

Annual Questionnaire – Personal

For the financial year:

CLIENT NAME:

The following list contains all the relevant information that will allow us to use your information to finalise the tax accounts. Please answer ALL the questions. Where lists of information are required please compile separate schedules. Tick the relevant box if the information is enclosed or "N/A" if the schedule is not required. **By providing this information, we will be able to efficiently prepare your end of year taxation accounts and returns. If you are not sure of any of the information required, please contact us.**

INCOME	Please provide the following:	Enclosed/Yes	N/A
WAGES AND SALARIES	(We will receive your summary of earnings directly from IRD) Please provide details of employers.	<input type="checkbox"/>	<input type="checkbox"/>
INTEREST DIVIDENDS	Did you receive any investments income (NZ and overseas) please provide details.	<input type="checkbox"/>	<input type="checkbox"/>
SHAREHOLDERS SALARIES	Will or have you received shareholder salaries from businesses for which we do not prepare the financial statements? If Yes: Please provide us with supporting documentation including Financial Statements	<input type="checkbox"/>	<input type="checkbox"/>
OTHER INCOME	Details of any other income (excluding PAYE Salaries or WINZ payments)?	<input type="checkbox"/>	<input type="checkbox"/>
TRUST	Are there any Trusts which you have an interest in that we have not been advised of?	<input type="checkbox"/>	<input type="checkbox"/>
PARTNERSHIP	Details of any income from a partnership (where we don't prepare the information for you).	<input type="checkbox"/>	<input type="checkbox"/>
LTC	Details of your income, expenses or losses from a Look Through Company (where we don't prepare the information for you).	<input type="checkbox"/>	<input type="checkbox"/>
SELF EMPLOYED INCOME	Complete Business Questionnaire. Were you working more than 20 hours per week?	<input type="checkbox"/>	<input type="checkbox"/>
PURCHASE OF PROPERTY	Have you recently purchased property(ies) with the intention of reselling? If so - please provide a copy of: -The S&P Statement(s) -The Solicitors Statement(s)	<input type="checkbox"/>	<input type="checkbox"/>
OVERSEAS INCOME	Are you currently receiving an overseas pension, or deriving an income from overseas investments?	<input type="checkbox"/>	<input type="checkbox"/>

EXPENSES	Please provide the following:	Enclosed / Yes	N/A
DEDUCTIBLE EXPENSES	Can you claim expenses?	<input type="checkbox"/>	<input type="checkbox"/>
	If Yes: Please provide supporting documents of any expenses incurred in deriving income from sources other than employment (i.e. income protection insurance, etc). Investment Portfolio fees, Interest on Loans for Investments.		

REBATES	Please provide the following:	Enclosed / Yes	N/A
DONATIONS	Have you made any donations?	<input type="checkbox"/>	<input type="checkbox"/>
	If Yes: Please provide us with receipts		
BANK ACCOUNT	If you have answered "yes", provide your bank account number as the Inland Revenue Department will only direct credit this rebate to a bank account. Bank Account Number:		

OTHER INFORMATION		Enclosed / Yes	N/A
STUDENT ALLOWANCES/LOANS	Have you or any of your children received loans or allowances?	<input type="checkbox"/>	<input type="checkbox"/>
CHILD MAINTENANCE	Are you paying child maintenance?	<input type="checkbox"/>	<input type="checkbox"/>
RESIDENCY	Were you a non-resident at any time during the income tax year?	<input type="checkbox"/>	<input type="checkbox"/>
OWNERSHIP INTERESTS	Did you have an interest in a foreign company, unit trust, life insurance policy or super scheme?	<input type="checkbox"/>	<input type="checkbox"/>
CONTACT DETAILS	Have you moved address or changed any contact details?	<input type="checkbox"/>	<input type="checkbox"/>
TAX LOSSES	Do you have losses being carried forward?	<input type="checkbox"/>	<input type="checkbox"/>

GENERAL COMMENTS

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DECLARATION

I instruct Diane Myers Chartered Accountant Ltd to complete my Tax return for this financial year. I undertake to supply all information necessary for this engagement and I accept responsibility for the accuracy and completeness of this information. This engagement is not intended to, and accordingly will not result in the expression by you of an opinion on the financial statement or tax return summary insofar as third parties are concerned. I further accept responsibility for all judgement decisions made in respect of my taxation affairs and will not hold your firm responsible should IRD subsequently challenge any aspects of the tax return. I authorise you to communicate with appropriate bankers, finance companies, and the IRD to obtain further information if required.

Signed _____ Dated ____/____/____
Phone _____ Fax _____ Mobile _____ Email _____

WORKING FOR FAMILIES	Please provide the following:	Enclosed / Yes	N/A															
CHILDREN	Details of children under 18 years of age and still at school for whom you may be entitled to family assistance.																	
	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">Full Name</th> <th style="width: 20%;">Date of birth</th> <th style="width: 40%;">IRD Number</th> </tr> </thead> <tbody> <tr><td>.....</td><td>.....</td><td>.....</td></tr> <tr><td>.....</td><td>.....</td><td>.....</td></tr> <tr><td>.....</td><td>.....</td><td>.....</td></tr> <tr><td>.....</td><td>.....</td><td>.....</td></tr> </tbody> </table>	Full Name	Date of birth	IRD Number		
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	Child support received: \$																	
	Names and dates of any children who left school during the year:																	
	If you received Working for Families payments during the period please supply us with the certificate issued by Work & Income New Zealand	<input type="checkbox"/>	<input type="checkbox"/>															
OTHER INCOME	Please provide details of any other income received by the household:																	
	<ul style="list-style-type: none"> ▪ Other payments received used for day to day living expenses if more than \$5,000 per year. <input type="checkbox"/> ▪ Passive income of Children, if over \$500 per year per child. <input type="checkbox"/> ▪ Income of non residence spouse or partner. <input type="checkbox"/> ▪ Tax exempt income. <input type="checkbox"/> ▪ Pension and Annuities. <input type="checkbox"/> ▪ Attributable fringe <input type="checkbox"/> 																	
CHANGE OF CIRCUMSTANCES	Have your circumstances changed during the year? For example, shared custody arrangements, change in marital or relationship status etc.	<input type="checkbox"/>	<input type="checkbox"/>															
	If Yes: Please provide full details:																	