



Income Tax Business Questionnaire

Year Ended 31 March 2009

Please help us to prepare your accounts with current and accurate information on time, by completing our questionnaire and submitting it to us early.

Name: 1. _____

Name: 2. _____

Client Code: 3. _____

Email Address:4. _____

Please complete the checklist, general information page and the sections relevant to you or which have changed from previous year.

For **new clients**, please fill in all the relevant sections.

**PLEASE FILL IN THIS CHECKLIST TO
ENSURE YOUR QUESTIONNAIRE IS COMPLETE**

			TICK 3
PART A	–	Personal Information	Page 2 <input type="checkbox"/>
PART B	–	Personal Income	Page 4 <input type="checkbox"/>
PART C	–	Personal Deductions	Page 6 <input type="checkbox"/>
PART D	–	Rebates	Page 6 <input type="checkbox"/>
PART E	–	Family Support	Page 7 <input type="checkbox"/>
PART F	–	Business Details	Page 8 <input type="checkbox"/>

NOTE: Do you require any of our other services?: Family Trust Advice, Rental Property Structuring, Business Structuring Advice?

If YES please contact our office Yes

PLEASE SIGN BELOW:

I/We certify that this is a complete account of all sources of income and expenses derived during the financial year. The requirements of the substantiation provisions as they apply to expenses, deductions and claims made in the returns have been explained to us and we have all the required documents to support these expenses, deductions and claims.

We hereby declare that we have provided all necessary and relevant information regarding our income and expenses from all sources in and out of New Zealand.

We hereby authorise you to obtain any necessary information from financial institutions we use, that may be necessary to complete my/our accounts and taxation returns.

Signed _____ Date _____

Signed _____ Date _____

j. Do you think this will be your last tax return in New Zealand? Self No Yes
 Spouse/Partner No Yes

If yes, please advise reason _____

k. How do you conduct your business:

Name of Business	Type of Business	IRD No.	Business Category (Please Circle)	Are Financial Statements/ Tax Returns to be prepared by Ascent
			Sole Trader / Partnership / Company / Trust	
			Sole Trader / Partnership / Company / Trust	
			Sole Trader / Partnership / Company / Trust	
			Sole Trader / Partnership / Company / Trust	
			Sole Trader / Partnership / Company / Trust	
			Sole Trader / Partnership / Company / Trust	

Please provide copies of last Tax Returns and Financial Statements prepared for the above (if prepared by previous accountant).

l. Do you require Ascent to prepare your Personal Income Tax Returns? Self No Yes
 Spouse/Partner No Yes

NEW CLIENTS - Please supply a copy of your previous income tax returns and financial statements.

m. Previous Accountant details (if first year with Ascent)

Name: _____

Address: _____

Phone: _____

PART B - PERSONAL INCOME

- 1. Did you receive wages/salary from which tax was deducted other than interest or dividends?**
- | | | | |
|--|----------------|-----------------------------|------------------------------|
| | Self | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| | Spouse/Partner | <input type="checkbox"/> No | <input type="checkbox"/> Yes |

If yes, please supply relevant details. (Please note the IRD will issue a Statement of Earning to Ascent's office detailing income received from wages/salary, etc.)

- 2. Did you receive interest during the year?**
- | | | | |
|--|----------------|-----------------------------|------------------------------|
| | Self | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| | Spouse/partner | <input type="checkbox"/> No | <input type="checkbox"/> Yes |

If yes, please supply interest withholding tax certificate/statement.

- 3. Did you receive dividends from a company during the year?**
- | | | | |
|--|----------------|-----------------------------|------------------------------|
| | Self | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| | Spouse/Partner | <input type="checkbox"/> No | <input type="checkbox"/> Yes |

If yes, please supply interest and imputation certificate.

- 4. Did you receive income from an Estate or Trust?**
- | | | | |
|--|----------------|-----------------------------|------------------------------|
| | Self | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| | Spouse/Partner | <input type="checkbox"/> No | <input type="checkbox"/> Yes |

If yes, please supply a note of your share of income distributed.

- 5. Did you receive income from overseas?**
- | | | | |
|--|----------------|-----------------------------|------------------------------|
| | Self | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| | Spouse/Partner | <input type="checkbox"/> No | <input type="checkbox"/> Yes |

If yes, please supply a note of total received in NZ dollars and amount of tax deducted at source.

- 6. Did you receive income from a Partnership?**
- | | | | |
|--|----------------|-----------------------------|------------------------------|
| | Self | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| | Spouse/Partner | <input type="checkbox"/> No | <input type="checkbox"/> Yes |

If yes, please supply a copy of Partnership Accounts or income distribution certificate.

- 7. Did you receive income or salary from a company from which no tax was deducted?**
- | | | | |
|--|----------------|-----------------------------|------------------------------|
| | Self | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| | Spouse/Partner | <input type="checkbox"/> No | <input type="checkbox"/> Yes |

If yes, please supply details.

- 8. Did you receive income from self-employment or business?**
- | | | | |
|--|----------------|-----------------------------|------------------------------|
| | Self | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| | Spouse/Partner | <input type="checkbox"/> No | <input type="checkbox"/> Yes |

Self

Spouse/ Partner

Type of other business, e.g. Consulting _____

Any other, please specify: _____

- 9. Did you receive any other income?**
- | | | | |
|--|----------------|-----------------------------|------------------------------|
| | Self | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| | Spouse/Partner | <input type="checkbox"/> No | <input type="checkbox"/> Yes |

If yes, please provide details.

10. Did you receive any rental income?

Self No Yes
Spouse/Partner No Yes

If yes, please enter or write information below

Property Location: _____

Date Property Purchased: _____

Purchase Price: _____

Date Property became available for income producing: _____

Do you own this property jointly with any other person? No Yes

If yes – What percentage do you and spouse/partner own? _____ %

– Other partner(s)? _____ %

Name(s) _____

Do the income and expenses shown below reflect your share only? _____

Gross Rental Income \$ _____

Less Outgoings:

Advertising _____

Agent's commission _____

Borrowing/Mortgage Expenses, e.g. Fees _____

Insurance _____

Interest – Mortgage (*please provide loan statements) _____

Rates _____

Lease Preparation Expenses _____

Repairs and Maintenance _____

Servicing expenses (cleaning etc) _____

Telephone/Stamps/Stationery _____

Travel (collection of rent, maintenance etc) _____

Other, please specify _____

Sub Total: \$ _____

Total Deductions \$ _____

NET RENTAL INCOME/(LOSS) \$ _____

Property Valuation Details (If previously supplied, details are not required):

Land \$ _____

Improvement (House) \$ _____

*Chattels (Furniture, Fittings & Whiteware) \$ _____

(please provide list, including values of each item)

(Please provide rates notice or valuation.)

Capital (Total Value) \$ _____

***DEPRECIATION**

It is essential that investors take steps to value chattels at the time the property is purchased. If possible, it is advisable to include the valuation as an appendix to the agreement for sale and purchase, because once it is agreed with the vendor, it is difficult for the Inland Revenue Department to challenge. Your depreciation claim will be increased significantly by providing a full and fair chattel valuation.

PART C - DEDUCTIONS

10. Do you have any carry-forward losses from previous years? Self No Yes
Spouse/Partner No Yes

If yes, please provide IRD Loss Statement.

11. Do you have any expenses you can claim as deductions against dividend and interest income?
Self No Yes
Spouse/Partner No Yes

If yes, please insert information below.

Self

Who did you pay?	What for?	Amount
_____	_____	_____
_____	_____	_____

Partner/Spouse

Who did you pay?	What for?	Amount
_____	_____	_____
_____	_____	_____

12. Do you have any expenses you can offset against income for which Withholding Tax has been deducted? Self No Yes
Spouse/Partner No Yes

If yes, please provide details/list of expenses to offset against income.

13. Low Income Rebate (ie: taxable income under \$9,880.00) and ACC classification:

a) Please supply the number of weeks you worked for 20 or more hours a week.

Number of Weeks: _____

b) Please supply the number of weeks you worked for 30 or more hours a week.

Number of Weeks: _____

PART D - REBATES

*Please note: Ascent's fee for completion of your rebate return is \$45.00 plus GST.

14. Did you make a charitable donation of \$5 or more and would you like Ascent to complete your rebate return? Self No Yes
Spouse/Partner No Yes

If yes, please supply receipts and bank account details of the account you would like your rebate direct credited to, by the IRD.

Acc. No. _____
Acc. Name _____

16. Did you pay for child care or a housekeeper while you worked?

If either of the situations below apply to you, you can claim this rebate. You cannot claim this rebate if you live in a communal home, such as a rest home or hospice.

Do either of these two situations apply to you?

- You paid someone to care for your child (or children) and you met one of these conditions:
 - you were a single parent, and your child was under 18, or your child was unable to work because of a disability
 - you and your partner both worked (this doesn't apply to couples who are separated)
 - you (or your partner) were disabled or physically unable to care for the child.
- You paid for a housekeeper or domestic help, and you were either:
 - married, or you (or your partner) were disabled or physically unable to do housework, or
 - single and disabled or physically unable to do housework.

Self No Yes

If **yes**, please state amount paid: \$ _____

Spouse/Partner No Yes

If **yes**, please state amount paid: \$ _____

(Please note, a receipt/expense voucher is required to substantiate this claim.)

PART E - FAMILY SUPPORT

17. At any time during the year were you eligible for Family Support? No Yes

(If you are unsure, provide the following details and Ascent will calculate the entitlement amount, if any).

Child's Name	Date of Birth	IRD No
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

Did you receive any maintenance payments from a previous spouse/partner during the year?

No Yes Amount \$ _____

Did you pay any child support during the year?

No Yes Amount \$ _____

Did you receive Family Support payments from the IRD during the year? Please provide copy of IRD confirmation letter.

No Yes Amount \$ _____

Did your marital status change during the year (includes de facto)?

No Yes Date & details of change _____

Did any child leave your care during the year?

No Yes If so, date _____

Did any child leave school to start work?

No Yes If so, date _____

Has a Family Assistance Registration Pack (FS1) been completed previously?

No Yes If no, Please complete an (FS1) form and lodge it with the IRD

OFFICE USE ONLY
Checked: Senior Acct

PART F - BUSINESS DETAILS

1. **Business Name** _____

2. **Trade Name** _____

3. **Nature of Business** _____

4. **Stock on hand at year end:** \$ _____ GST Inclusive No Yes

Value at cost, market price or replacement value.

5. **Work in progress at year end:** \$ _____ GST Inclusive No Yes

Valued at cost of materials, labour and proportion of overhead, or work started not completed at 31 March, 2009.

6. **Accounts receivable** (money owing to your business) GST Inclusive No Yes

Name of Person/Business Owing Money

Total

a.	_____	_____
b.	_____	_____
c.	_____	_____
d.	_____	_____
e.	_____	_____
f.	_____	_____
g.	_____	_____
h.	_____	_____

7. Accounts payable (money owed by your business):

		GST Inclusive	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Name of Creditor	Expense Type	Amount		
a. _____	_____	_____		
b. _____	_____	_____		
c. _____	_____	_____		
d. _____	_____	_____		
e. _____	_____	_____		
f. _____	_____	_____		
g. _____	_____	_____		
h. _____	_____	_____		

8. Details of assets sold or scrapped: (attach separate list if required)

Asset	Date	Proceeds on Sale	Business Account or other
a. _____	_____	_____	_____
b. _____	_____	_____	_____
c. _____	_____	_____	_____
d. _____	_____	_____	_____

9. Details of assets purchased:

Asset	Date	Cost	Business Use (%)
a. _____	_____	_____	_____
b. _____	_____	_____	_____
c. _____	_____	_____	_____
d. _____	_____	_____	_____

Please note: If assets purchased under finance eg: loan/hire purchase, attach a copy of the finance or lease agreement.

10. Please attach copies of GST Returns & working papers for the financial year ended, 31 March 2009.

11. Details of business loan and hire purchase loans acquired/repaid during the year.

Attach documentation and supply details of interest paid and the balance of the loan at 31 March 2009.

12. Do you have a dedicated home office in your home?

(If previously supplied, details are not required)

No Yes

Home Office Area:

Total Home Area: _____ sqm Date Home Purchased: / /

Dedicated Office Area: _____ sqm Cost Price : \$ _____

*Land: \$ _____

*Improvements: \$ _____

*(from Valuation/Rates Notice)

(Please ensure you have provided details of interest paid on your mortgage for the period 1 April 2008 to 31 March 2009, i.e. Mortgage Statements.)

13. Motor Vehicle (enclose copies of fully completed logs):

Name of owner: _____

Description: _____ Engine Capacity: _____

Log Book: Attached Not Completed Previously Supplied

Registration No	Date Purchased	Cost Price	Date Sold	Sale Price

14. Loan Statements (please provide copies)

TICK 3

- Motor Vehicle (hire/purchase/lease)
- Home Mortgage (provide details of **interest** only)
- Other

15. Please attach Business Bank Statements & Deposit Account statements (eg.'25' account) for the period 1 April 2008 to 31 March 2009.

