

Trust Questionnaire

For the year ended 31st March 2017

Please ensure this questionnaire is completed and included with your records

Client Name:		Phone:
Balance Date:		Cellphone:
Email:		Convenient time to call:
Physical Address:		
Postal Address:		

To: Tax Matters Limited

You are hereby authorised to communicate with my/our bankers, solicitors, finance companies and all government agencies to obtain such information as you require in order to carry out the preparation of my/our financial statements and tax returns.

I/We authorise you to act as my/our Agent for Inland Revenue Department matters, and to have access to all tax types and all tax information pertinent to the completion of my financial statements and tax returns.

Signature: _____ Date: _____

Records Required		Comment
From 1st April 2016 to 31st March 2017		
Gifting		
Please provide details of any gifting done through the financial year. This includes the followgin; <ul style="list-style-type: none"> • Copy of deed of acknowledgement of debt • Copy of deed of forgiveness of debt (These are prepared by your solicitor or Trustee Service)	<input type="checkbox"/> <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Solicitor Name: _____
Investment Portfolio – from financial advisor		
Copy of your investment portfolio		

Interest Received – if separate from portfolio		
An RWT Deduction Certificate (IR15) will be sent to you by your bank, or other financial institutions, indicating the amount of tax deducted from interest earned.	<input type="checkbox"/>	
Dividends Received – if separate from portfolio		
A dividend payment advise will accompany dividend cheques indicating withholding tax deductions or imputation credits.	<input type="checkbox"/>	
Other Income & Expenses		
Rents Received Please complete Rental Questionnaire	<input type="checkbox"/>	
Business Income Please complete Business Questionnaire	<input type="checkbox"/>	
Overseas Investments – if separate from portfolio Details of all foreign investments and income.	<input type="checkbox"/>	
Accounts Receivable (Debtors) – See attached Schedule 1		
All accounts or amounts owing to you at balance date should be scheduled	<input type="checkbox"/>	
Accounts Payable (Creditors) – See attached Schedule 2		
All accounts or amounts owing at balance date should be scheduled	<input type="checkbox"/>	
Other Information		
Details of anything else we should be aware of in relation to the preparation of your accounts		

14. Final Accounts

Would you like to receive your final accounts printed and bound, then posted to you? Or would you like a PDF file emailed to you?

Accounts bound and posted

PDF file emailed

If you have any questions regarding this form, please do not hesitate to contact us:

Please return this slip and all necessary documents to us in person at our physical address, via post, fax or email.

Tax Matters Limited

Physical: Unit 3/245 St Asaph Street Christchurch 8011 or

Postal: P O Box 13400, Armagh, Christchurch 8141

Phone: (03) 366 6115

Fax: (03) 366 4798

Email: laura@taxmatters.net.nz

**Thank you for completing this questionnaire
Don't forget to sign on page 1**

Schedule 1 – Accounts Receivable (Debtors)

Amounts owing to you at 31 March 2017

Name of Debtor	Description of Goods	Code	Net Amount	GST	Total Incl GST
Totals					

Schedule 2 – Accounts Payable (Creditors)

Amounts owing as at 31 March 2017

Name of Debtor	Description of Goods	Code	Net Amount	GST	Total Incl GST
Totals					