

Financial Statements Questionnaire –

Ensure this questionnaire is completed and included with your records

Client Name:		Phone:	
Balance Date:		Email:	

Name	IRD Number	Signature	Date

Under the Companies Amendment Act 2014 there is now a requirement for all directors to provide their place of birth and date of birth AND in addition, there must be at least one director that either lives in New Zealand; or lives in Australia and is a director of a company incorporated in Australia:

Director	Date of birth	City / Town of birth	Country of birth	Current residential address

Convenient time to call you is:	
Alternative phone numbers are:	
When do you want your accounts completed by?	
Would you like us to supply a copy to your bank?	Yes <input type="checkbox"/> No <input type="checkbox"/> (Tick One)
If your accounts are to be supplied to your bank, please advise the name of your current bank manager:	

Records Required:	✓	Comment:
Employer – Wages paid to Employees		
Supply a month-by-month summary of gross wages, termination or incentive payments and PAYE deductions as returned to the IRD. (Not required if you use Xero Payroll).	<input type="checkbox"/>	
Covid-19 Wage Subsidy and other Covid-19 support payments		
Have you received the Wage Subsidy or Covid 19 Support payment? (please note all dates and receipts)		<input type="checkbox"/>
Date rec: __/__/__ \$ _____	Date rec: __/__/__ \$ _____	
Date rec: __/__/__ \$ _____	Date rec: __/__/__ \$ _____	
Date rec: __/__/__ \$ _____	Date rec: __/__/__ \$ _____	
Where Wage Subsidy payments have been received for stakeholders (shareholders/partners/trustees/beneficiaries/owners) of the business please provide details of the following:		<input type="checkbox"/>
<ul style="list-style-type: none"> • Amounts received for each stakeholder • Whether amounts received were for full-time or part-times 		
Have you received the Covid-19 Leave Support Payments? (please note all dates and receipts)		<input type="checkbox"/>
Date rec: __/__/__ \$ _____	Date rec: __/__/__ \$ _____	
Date rec: __/__/__ \$ _____	Date rec: __/__/__ \$ _____	
Date rec: __/__/__ \$ _____	Date rec: __/__/__ \$ _____	
Where Covid-19 Leave Support Payments have been received for stakeholders (shareholders/partners/trustees/beneficiaries/owners) of the business please provide details of the following:		<input type="checkbox"/>
<ul style="list-style-type: none"> • Amounts received for each stakeholder • Whether amounts received were for full-time or part-times 		
Have you received Covid-19 Short-Term Absence Payments? (please note all dates and receipts)		<input type="checkbox"/>
Date rec: __/__/__ \$ _____		
Date rec: __/__/__ \$ _____		
Date rec: __/__/__ \$ _____		
Where Covid-19 Short-Term Absence Payments have been received for stakeholders (shareholders/partners/trustees/beneficiaries/owners) of the business please provide details of the following:		<input type="checkbox"/>
<ul style="list-style-type: none"> • Amounts received for each stakeholder • Whether amounts received were for full-time or part-times 		
Have you received Resurgence Support Payments? (please note all dates and receipts)		<input type="checkbox"/>
Date rec: __/__/__ \$ _____		
Date rec: __/__/__ \$ _____		
Date rec: __/__/__ \$ _____		
Have you received a Covid-19 Cultural Sector Emergency Relief Grant or other Covid-19 support payments?		<input type="checkbox"/>
Please provide details if it is an "other" Covid-19 support payment		
Date rec: __/__/__ \$ _____		
Date rec: __/__/__ \$ _____		
Have you received the Covid-19 Small Business Loan?		<input type="checkbox"/>
Date rec: __/__/__ \$ _____		

Have any amounts of Covid-19 support payments been repaid back?		<input type="checkbox"/>
Please provide details of payment and reason for repayment Date paid back: __/__/__ \$_____ Reason: _____ _____ _____ _____		
Fringe Benefit Tax (FBT) Returns		
Supply copies of Fringe Benefit Tax (FBT) returns and work papers.	<input type="checkbox"/>	
Final Bank Statement		
Final bank statement for the year for all bank accounts	<input type="checkbox"/>	
Loan Statements		
Supply a copy of any loan transaction statements for the financial year up to your balance date, including loans that have been refinanced or repaid during the year.	<input type="checkbox"/>	
Interest and Dividend Certificates		
Supply copies of certificates.	<input type="checkbox"/>	
Lease details		
Supply copies of lease agreements for non-building assets (e.g. motor vehicles, equipment).	<input type="checkbox"/>	
Foreign Income		
Details of any foreign income received, and any tax deducted from this.	<input type="checkbox"/>	
Accounts Receivable (Debtors) – see attached Schedule 1		
All accounts or amounts owing to you at balance date should be scheduled. Exclude bad debts. To enable bad debts to be excluded from income, these must be written off prior to balance date.	<input type="checkbox"/>	Total at Balance Date: \$ _____ GST Included <input type="checkbox"/> Excluded <input type="checkbox"/>
Accounts Payable (Creditors) – see attached Schedule 2		
All accounts or amounts owing by you at balance date should be scheduled indicating name of creditor, amount and what the debt is for.	<input type="checkbox"/>	Total at Balance Date: \$ _____ GST Included <input type="checkbox"/> Excluded <input type="checkbox"/>
Cash on Hand		
*Cash on Hand \$ _____ Date banked __/__/__	<input type="checkbox"/>	
Petty Cash \$ _____	<input type="checkbox"/>	
Till Floats/Cash Floats \$ _____	<input type="checkbox"/>	
*Incl cash sales prior to balance date but not banked until after balance date		

Stock on Hand					
Stock Stock should be physically counted at balance date and adequate records retained to substantiate the dollar value arrived at. Please note that if you estimate your stock to be less than \$10,000 at the end of your income year, you may have the option of not physically counting your stock. In these circumstances we will assume that your closing stock is the same as your opening stock. Please indicate if you would like to use this option.		<input type="checkbox"/> Valued at lower of: ▪ cost <input type="checkbox"/> ▪ net realisable value <input type="checkbox"/> ▪ market value <input type="checkbox"/> <input type="checkbox"/> \$ _____ GST Included <input type="checkbox"/> Excluded <input type="checkbox"/>			
Work in Progress Include material costs, labour costs and overhead costs. Briefly, how was this calculated? <hr/> <hr/>		<input type="checkbox"/> \$ _____ GST Included <input type="checkbox"/> Excluded <input type="checkbox"/>			
Prepayments Made Balance of any payments made before balance date for goods or services not received or used by balance date.		<input type="checkbox"/> \$ _____ GST Included <input type="checkbox"/> Excluded <input type="checkbox"/>			
Income in Advance Balance of any receipts received before balance date for goods or services not provided by balance date.		<input type="checkbox"/> \$ _____ GST Included <input type="checkbox"/> Excluded <input type="checkbox"/>			
Capital Expenditure					
Attach details of assets purchased or sold during the year such as motor vehicles, plant and equipment and properties. Where applicable please provide the following details: <ul style="list-style-type: none"> ▪ Hire purchase or loan agreements ▪ Lease agreements ▪ All legal statements and agreements ▪ Trade-in details ▪ Lost, stolen or scrapped items ▪ Insurance pay out ▪ Copy of Tax Invoices A copy of last year's Asset and Depreciation Schedule is attached for your information. We suggest you review the schedule and indicate any assets that no longer exist.		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
Transactions Not Through the Business					
Were all sales banked into your business trading bank account? Yes <input type="checkbox"/> No <input type="checkbox"/> If No, list amounts not banked and when they were lodged: <hr/> <hr/> <hr/>		Personal \$ _____ Business \$ _____ Other \$ _____			
Other Non-Taxable Income					
Did you receive non-taxable income from any other sources? If Yes, please provide details.		<input type="checkbox"/>			
Legal and Loan Documents					
Please attach any solicitor's statements and Sale and Purchase Agreements relating to any legal transactions during the year. Please also include Statements and Agreements relating to any mortgages, hire purchase, leases or loans.		<input type="checkbox"/>			

Business Expenses		
There are a number of invoices that we specifically require. Please ensure the records you provide us with include all paid accounts for:	<input type="checkbox"/>	
<ul style="list-style-type: none"> Insurance premiums Legal fees 	<input type="checkbox"/>	
Private Use		
Value of goods taken for private use at their cost price.	<input type="checkbox"/>	\$ _____ GST Included <input type="checkbox"/> Excluded <input type="checkbox"/>
Expenses paid in Cash or from Personal Funds		
Please provide a list if applicable.	<input type="checkbox"/>	
Residential Land Withholding Tax		
Have you sold residential property in New Zealand where Residential Land Withholding Tax has been deducted and paid to the IRD? If so, provide details e.g. IR1100 Residential land withholding tax return and other sale and purchase documents.	<input type="checkbox"/>	
Residential Property Sales		
<p>Have you sold any residential property during the year (not otherwise detailed on the information provided)?</p> <p>If yes, when was the property purchased?</p> <p>If it was purchased with 10 years of the sale date,</p> <ul style="list-style-type: none"> what was the original purchase price and the sale price? 	<input type="checkbox"/>	<p>_____</p> <p>\$ _____</p> <p>_____</p> <p>_____</p>
Mortgage Interest Paid on Residential Properties		
<p>Have you incurred interest on residential properties owned (which is not your main family home or a 'new build*')? Is the interest also against properties other than residential rentals? If so, please provide details of amount of interest and dates paid.</p> <p>* A new build is a self-contained residence that receives a Code Compliance Certificate confirming the residence was added to the land on or after 27 March 2020</p>	<input type="checkbox"/>	
Research and Development		
Have you spent an amount on research and development during the income year? If so, provide ledger accounts and details of expenditure	<input type="checkbox"/>	

Motor Vehicles

The proportion of motor vehicle business use as established by your vehicle log book(s) is/are:

Vehicle Description: _____

Business _____ km
Total _____ km
Percentage Business _____ %

Vehicle Description: _____

Business _____ km
Total _____ km
Percentage Business _____ %

Please note that a detailed and accurate log book must be completed for a three month period every three years or vehicle expense claims will be limited to a maximum of 25% of expenses incurred. If you are operating as a Company, please indicate which vehicles you are currently paying Fringe Benefit tax for:

Home Office Expenses

If part of your home is set aside principally for use as an office/workshop/storage area, please provide the following details:

Address for Home Office _____

Home Office area: - no change as per previous year ☐

OR

Area used for Business: _____ m²

Total Area of House & Workshop: _____ m²

Actual Cost Method

Power \$ _____
Insurance (Building & Contents) \$ _____
Interest (House Mortgage) \$ _____
Rates (including regional council rates) \$ _____
Rent \$ _____
Repairs & Maintenance \$ _____
Telephone rental \$ _____
Other \$ _____
Total \$ _____

OR IRD Square Metre Rate Method (see below note)*

Interest (House Mortgage) \$ _____
Rates (including regional council rates) \$ _____
Rent \$ _____

**Would you like to use the IRD rate? Currently it is \$47.85 per square metre. This allowance doesn't cover Mortgage Interest, Rates or Rent costs so we would still require these amounts.*

Mixed Use Holiday Home

Does this entity have a property (such as a holiday home or a bach) that is used privately and also to derive income? Yes ☐ No ☐

Details of property _____

Was the property empty for 62 days or more in the income year? Yes ☐ No ☐

If yes, please complete the following section so we can determine the amount of allowable deductions.

Mixed Use Holiday Home – Information Required

The number of days the property was empty during the income year _____

The number of days the asset was used by family or associated persons* during the income year

OR where income from any person received was less than 80% of market rate _____

* Associated persons include close relatives, or if owned by an entity, persons associated with the entity owning the property

If there is more than one tenant who used the property through the year, please attach details.

Name of tenant: _____

Relationship to owner (if any): _____

Amount of rent they paid: \$ _____

Dates rented (From: To) _____

Expenses incurred in respect of the property (the list below is not exhaustive – details of all expenses will be required):

Cost of advertising for tenants \$ _____

Cost of repairing damages caused by tenants \$ _____

Number of days spent in the property while repairing damages caused by tenants _____

Mortgage interest \$ _____

Rates \$ _____

Insurance \$ _____

Repairs/maintenance for general wear and tear \$ _____

Other (please give details) _____

Mixed Use Boat or Plane

Does this entity have a boat or plane (with a market value of \$50,000 or greater), that is used privately and also to derive income? Yes ☐ No ☐

If Yes, provide details:

Description: _____

Market value: \$ _____

Was the asset unused for 62 days or more in the income year? Yes ☐ No ☐
If yes, please complete the following section so we can determine the amount of allowable deductions.

Mixed Use Boat or Plane – Information Required

The number of days the asset was **unused** during the income year _____

The number of days the asset was used by family or associated persons* during the income year _____

OR where income from any person received was less than 80% of market rate _____

* Associated persons include close relatives, or if owned by an entity, persons associated with the entity owning the property

For non-associated persons where payment received is at least 80% of market value:

Number of days the asset was used: _____

Income received: \$ _____

Expenses incurred in respect of the property (the list below is not exhaustive – details of all expenses will be required):

Cost of advertising for hireage \$ _____

Cost of repairing damages caused by hireage \$ _____

Operating costs / supplies \$ _____

Insurance \$ _____

Repairs/maintenance for general wear and tear \$ _____

Other (please give details) _____

Cryptoassets

Have you received or traded in cryptoassets during the income year? If so, please provide the following information:

☐

- The type of cryptoasset
- For each transaction provide the date, type of transaction i.e. received or disposed of, number of units, value in NZD
- Total units of each cryptoasset held at the beginning and end of the year
- Exchange records and bank statements
- Wallet addresses

***Thank you for completing this questionnaire
Don't forget to sign it***

Schedule 1 – Accounts Receivable (Debtors)

Amounts owing to you at

Client Name	
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[illegible]

Totals	
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Amounts owing by you at

Client Name

[illegible]

Totals