

Company Questionnaire Tax Matters Completes GST/Not GST Registered For the year ended 31st March 2024

Please ensure this questionnaire is completed and included with your records

	Phone:	
	Cellpho	one:
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ies to obtain such information as you require in or		•
Date:		
	\	Comment
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heque butts, Cash Manager etc accounting system please provide a copy of access ement for year for all bank accounts ting for Accounts Payable and Accounts Receivable as		
	nited uthorised to communicate with my/our bank, solies to obtain such information as you require in ordetements and tax returns. I to act as my/our Agent for Inland Revenue Department tax information pertinent to the completion of my fire	uthorised to communicate with my/our bank, solicitors ies to obtain such information as you require in order to atements and tax returns. I to act as my/our Agent for Inland Revenue Department metax information pertinent to the completion of my financial

 Or, Where you supply a written Cashbook, please provide and include the month past balance date: Cashbook, written up, analysed and reconciled to the bank statements monthly Bank statements including any savings account or term deposit Cheque and deposit butts showing the nature of each payment/deposit. Loan Statements	
Supply a copy of any loan transaction for the financial year up to your balance date.	
Employers – Wages paid to Employees	
Please send a month-by-month summary of gross wages and PAYE deductions as returned to the IRD OR	
Send a copy of your Employer Monthly Deduction Schedule (IR348)	
Fringe Benefit Tax (FBT) Returns	
Supply copies of FBT Returns and Workpapers	
Interest and Dividends Received	
Supply copies of certificates/dividend advice notes	
Accounts Receivable (Debtors) – see attached Schedule 1	
All accounts or amounts owing to you at balance date should be scheduled. OR Where an accounting software package is used, please include Debtors Report as at balance date	Total at Balance Date: \$ GST Included □ GST Excluded □
Accounts Payable (Creditors) – see attached Schedule 2	
All accounts or amounts owing as at balance date should be scheduled OR Where an accounting software package is used, please include Creditors Report as at balance date	Total at Balance Date: \$ GST Included
Donations	
Please provide valid receipts. Note, this must be signed by an authorised person & show a stamp or letterhead.	

Bad Debts	
Please provide a schedule for Bad Debts Written Off during the Year (Remember, Bad Debts need to be written off the debtors ledger before balance date to be tax deductible in that year)	Total at Balance Date: \$ GST Included □ OR
balance date to be tax deductible in that year)	GST Excluded □ ON
Cash on Hand	
Cash on Hand* \$ Date Banked// Petty Cash \$ Till Floats/Cash Float \$ * (Include cash sales prior to balance date but not banked until after balance date)	
Stock on Hand	
Stock must be physically counted and adequate records retained to substantiate the physical count.	\$
Stock on hand should be valued at the lower of cost, market selling value or replacement value.	GST Included □ OR GST Excluded □
Work In Progress	
Work in Progress should be valued at cost of materials, direct labour and factory overheads less any progress payments.	\$
	GST Included □ OR GST Excluded □
Capital Expenditure	
Attached 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	
 Hire purchase or loan agreements Lease agreements All legal statements, agreements and solicitors invoices Trade-in details Lost, stolen or scrapped items Copy of Tax Invoices Valuations 	

Transactions Not Through the Business				
Were all sales banked into your business trading bank account? i.e cash Yes □ No □ If No, list amounts and where they were lodged or how they were spent		\$		
Legal Documents				
Please attach all solicitor's statements and copies of any invoices for transactions not covered under Capital Expenditure		\$		
Overseas Travel				
A diary should be provided showing dates and times of meetings and what the meeting was about.				

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: • Insurance premiums • Legal fees • ACC payments and arrangements			
Personal Use Adjustments			
Portion of expenses paid by the business to be allocate Telephone/Internet Power Insurance Value of goods taken for private use	ed as personal;		
Entertainment			
Have you kept suitable records of the reason for the experson being entertained?	xpense and the		
Expenses paid in Cash or from your own funds			
Please provide a list if applicable.			
Motor Vehicles	Home Office Expe	nses	
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 Total km Percentage Business km Percentage Business km	If part of your home is set aside principally for us an office/workshop/storage area, please provide following details for the year: Area used for business Total area of house & workshop Power Insurance Rates Mortgage Interest/Rent \$		sprage area, please provide the eyear: m2 vorkshop m2 \$ \$ \$ \$ \$ \$

Other Information		
Details of anything else we should be aware of in relation to the preparati	on of	your accounts.
Covid-19 Wage Subside/Leave Subsidy		
Please advise if you applied for the wage or leave subsidy. Details of application/funding received.		

General	Yes	No
Do you require your accounts by a specific date?		
Has your address changed during the period?		
Has your contact phone number changed during the period?		
Has the nature of your business changed over the last 12 months?		
Please provide a bank account number for any tax refunds to be credited		

We will email you a PDF copy of your accounts. If you require a printed copy, please advise.
☐ Accounts bound and posted

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 or email.

Tax Matters Limited

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

Postal: P O Box 13400, City East, Christchurch 8141

Phone: (03) 366 6115

Email: debbie@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 2024

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 2024

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

Can we assist you in any way, or is anything you would like to discuss:	Yes
Assistance with tax planning	
Would you like Tax Matters to look after GST/RWT/Payroll returns (if not already)	
Assistance with budgets / cashflow forecast	
Preparation of regular financial reports (monthly, quarterly)	
Regular meetings to improve business performance	
Identifying your future direction with a strategic plan and a business plan	
Assistance with a succession plan	
Preparation of business for sale	
Due diligence for purchase of a business	
Any accounts receivable issues you would like assistance with resolving / collection	
Funding requirements, working capital or asset finance	
Any specific business problems you would like to discuss, or matters you wish to	
raise	