

NATIONAL ACCOUNTANTS LIMITED

**Personal Tax Return Checklist for Year Ended 31 March 2021**

Please complete and sign for every individual

Client: \_\_\_\_\_

*The following information may be required to complete your tax return. If applicable, Please tick the appropriate space and provide details or write details in the space provided.*

**Income:**

1. SALARY, wages, national superannuation, pensions, accident compensation etc., attach annual certificates. This may have been sent direct to us as your agent. \_\_\_\_\_
2. INTEREST – provide certificates from financial institutions or other. \_\_\_\_\_
3. DIVIDENDS – provide details of dividend warrants (indicate any deductions for withholding tax and/or imputation credits). \_\_\_\_\_
4. RENTS – advise gross rents received and expenses to be claimed against this income (E.g. rates, interest, repairs, insurance, other). \_\_\_\_\_
5. INCOME FROM ESTATES/TRUST – provide details of any income (i.e. Interest, dividends, rents, business income or other) and any tax paid by the estate/trust. \_\_\_\_\_
6. INCOME – Portfolio Investment Entity - advise details of any PIE (Portfolio Investment Entity) income. \_\_\_\_\_
7. OWNERSHIP INTERESTS –
  - a. Did you have any interest in a foreign company, unit trust, life insurance policy or super scheme? \_\_\_\_\_
  - b. Are you a trustee of a foreign trust? \_\_\_\_\_
8. PARTNERSHIPS – advise your share of income or losses in all partnerships. \_\_\_\_\_
9. SHARE TRADING – if you have been dealing in shares or you have purchased shares for the purpose of selling at a profit, advise full details of such transactions. \_\_\_\_\_
10. STUDENT LOAN – advise details of loan, repayments, etc. \_\_\_\_\_
11. COMPANY INCOME – does your company receive 80% or more of its income from one source **from personal services** or one or more sources which are related? E.g. 2 companies having much the same shareholding. \_\_\_\_\_

12. *INVESTMENTS – please provide all original cost values of all overseas share and deposit investments as well as cost and market value at balance date. (Individually owned overseas investments less than \$50,000 are excluded from the new fair dividend rate rules, or \$100,000 per couple)* \_\_\_\_\_
13. Are you involved in a Kiwisaver scheme? \_\_\_\_\_
14. Do you own or trade in any cryptocurrencies? \_\_\_\_\_
15. Have you received any share options or any other non-cash benefits ? \_\_\_\_\_
16. Have you received any Covid 19 support ? \_\_\_\_\_
17. **OTHER INCOME** – provide full details. \_\_\_\_\_  
*NOTE – if you are a NZ resident you must provide your worldwide income to us, as well as the income of any associated entity.*

**Deductions:**

1. **LTC LOSSES** – advise details of any losses attributed from an LTC (Look Through Company) \_\_\_\_\_
2. **EXPENSES** – incurred for return preparation or against withholding payments. \_\_\_\_\_
3. **INCOME REPLACEMENT INSURANCE POLICIES** – provide details of premiums, if applicable. \_\_\_\_\_
4. **INTEREST** – have you paid interest on money borrowed to buy shares or a business? Details please. \_\_\_\_\_
5. **OTHER EXPENSES** – any other expenses incurred against income? E.g. Monitoring fees etc. \_\_\_\_\_

**Rebates (if we are to complete this for you):**

1. **DONATIONS** – attach all receipts in excess of \$5.00. \_\_\_\_\_
2. **BANK ACCOUNT** – please advise full bank account number that you wish your donation rebate to be direct credited to. \_\_\_\_\_

**FAMILY TAX CREDIT**

**Family Tax Credit Questionnaire**

Our dependent children are as follows:-

Name	Date of Birth	IRD Number
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Were there any additions to the family during the last financial year? YES/NO

Did any children turn 18 years old or become financially independent during the last financial year? YES/NO

Who?.....  
Did your children's care-givers change in any way during the year (marital status) YES/NO  
*If yes, details please .....*

Did either of you receive ACC payments for more than 3 months during the last financial year? YES/NO

Did either of your incomes switch to student allowance during the last financial year? YES/NO

Did the combined weekly working hours for parents fall below 30 hours during the last financial year? YES/NO

If a solo parent, did your weekly working hours fall below 20 hours during the last financial year? YES/NO

Do you expect a dramatic change to your family income in the coming 12 months YES/NO  
*If yes, please discuss with us*

If you have a partner who prepares their own tax return? YES/NO  
Please supply full details of their income

Did you receive any other parental allowances or benefits (e.g. foster care allowance, orphan's benefit, unsupported child's benefit or parent's allowance)

YES/NO

**DECLARATION**

Please complete my Tax return based on the information contained in this questionnaire. I also give you my full authority to contact my Bank or any other financial organisation, my lawyer, WINZ and the Inland Revenue Department for any purposes relating to my affairs. This authority also applies for the client linking system with IRD (for all tax types) and yourselves as Tax Agents. I accept responsibility for the accuracy and completeness of the information supplied and used in the preparation of my income tax return. 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.

**ACCOUNTANCY FEE**

I understand fees for preparing my tax return and any related accounting and for all consultations are charged on the basis of the time taken to do my work and the degree of knowledge and skill of your staff members involved in the assignment.

Signed

\_\_\_\_\_ Dated \_\_\_\_/\_\_\_\_/\_\_\_\_