walker wayland

TRUST INFORMATION QUESTIONNAIRE
FOR THE YEAR ENDED 31 MARCH 2022

Please confirm your contact details:			
Business name		Home telephone	
Postal address		Office telephone	
		Mobile telephone	
Contact person		Email address	
Bank Acc No. (for tax refund)			

It is a requirement for us to retain a questionnaire on file for each income year. We thank you for taking the time to complete this questionnaire for each trading entity that requires financial statements and/or an income tax return to be prepared.

If you have any queries about how to complete this questionnaire please contact us on (09) 968 4440. Please return the completed and signed questionnaire with your financial records.

TERMS OF ENGAGEMENT
(as per Institute of Chartered Accountant of New Zealand recommended text)

I accept responsibility for the accuracy and completeness of the information supplied in this questionnaire which is to be used in the preparation of my financial statements. You are not to complete an audit, nor do I wish you to undertake a detailed review of my affairs in order to substantiate the accuracy of my information, and therefore you are unable to provide any assurance on my financial statements. I understand your work cannot be relied on to detect error and fraud and that you accept no liability for the accuracy and completeness of the information supplied by me. I further understand that the financial statements will be prepared at my request and for my purposes only and that you will not be liable for any losses, claims or demands by any third person. I also accept responsibility for all other records and information supplied to you other than those listed below.

I accept responsibility for any failure by me to supply all relevant records and information to you.

I understand that Walker Wayland Auckland Ltd will endeavour to lodge my income tax return by the due date. However, if information required to prepare this income tax return is delivered late, the Walker Wayland Auckland Ltd will not be liable for late lodgement penalties and/or interest charges.

I personally guarantee to pay accountancy fees rendered and authorise Walker Wayland Auckland Ltd to apply tax refunds against any outstanding debt.

I hereby declare that the above information is true and correct:

DATE __________ **SIGNATURE** ___________________ **NAME** __________________________

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CLIENT ACCEPTANCE FORM

In respect to non-disclosure, you also authorise Walker Wayland Auckland Ltd personnel to act as required under sections 20B to 208 of the Tax Administration Act 1994.

You give your full authority to us to contact any organisation (including your bank, financiers, insurers, city council and the Inland Revenue Department) for the purposes of obtaining information necessary to complete your various taxation returns and financial statements. Information from Inland Revenue Department is through all channels, including electronic. The authority to obtain information is for all tax types except Child Support. You acknowledge that this information would not otherwise be available due to the Privacy Act restrictions, but you give your full authority for this statement to be used as a written confirmation of your agreement to us obtaining information for any organisation, as listed above on the signed consent statement, for the abovementioned purposes. This also includes linking all person(s) and entities to our agency list as your tax agent.

Accident Compensation Corporation

You authorise Walker Wayland Auckland Ltd to act as your agent for ACC levy purposes for all associated entities. This authorisation allows Walker Wayland Auckland Ltd to query and change information on your ACC levy account(s) through ACC staff, and through ACC Online Services. This authority will also allow Walker Wayland Auckland Ltd main representative discretion to delegate access to your ACC information to other members of Walker Wayland Auckland Ltd. Other delegated members of Walker Wayland Auckland Ltd will also be able to query and change information on your ACC levy account.

Acceptance

The terms of this engagement and the general terms and conditions are accepted.

DATE __________ **SIGNATURE** __________________ **NAME** _________________________

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INFORMATION REQUIRED

1. Did your Trust receive any interest or dividends in the year? YES / NO / N.A.

   If **YES**, please attach dividend certificates and/or RWT Certificates, including income from PIE investments.

2. Did your Trust operate any bank or term deposit accounts during the year? YES / NO / N.A.

   If **YES** please supply
   - A download of the transactions (with notes/descriptions for each item) for each account for the year (contact our office if you require assistance with this).

   OR
   - Bank statements with transaction details

3. Did your Trust buy, sell or improve any houses, shares, life insurance policies, term deposits or any other property during the year? YES / NO / N.A.

   If **YES** please attach for each transaction:
   - Sale and purchase agreement and settlement statements (for purchase or sale of property)
   - Detailed list of improvements made to the house
   - Trustees resolutions in support
   - Details of how these proceeds were allocated, or funds raised

4. Did your Trust have any foreign income, investments or loans?

   If the Trust owns shares in investments, term deposits or debts owing to organisations which operate in foreign countries, or if such investments were bought or sold during the year, the Foreign Investment rules may apply to this income.

   a) Has the trust held Australian shares? YES/NO
   b) Has the trust held other foreign shares? YES/NO
   c) Has the trust made Investments in foreign unit trusts? YES/NO
   d) Investments in foreign life insurance, endowment policies, etc? YES/NO
   e) Investments in foreign superannuation or pension funds? YES/NO
   f) Investments in any other kind of foreign company, individual or equity scheme? YES/NO
   g) Loans from any foreign company, individual or equity scheme? YES/NO
   h) Overseas bank account YES/NO
   i) Did the trust hold any cryptocurrency investments at any time during the year? Has the trust received any mining income from cryptocurrencies? YES/NO

   If you have answered YES to any of the questions above in 4, please provide the relevant documentation. We may contact you to obtain further information.

5. Who is the insurer of the trust property?
   - Company name ________________________________
   - Policy number ________________________________
   - Telephone number ________________________________

6. Did your Trust receive any gifts or have any debt forgiven during the year? YES / NO

   If **YES** please supply
   - Gift certificate
   - Deed of reduction in debt

7. Have any of the settlors of the trust moved overseas during the year? YES / NO

8. Was your trust deed amended in any way during the year? YES / NO

   If **YES** please supply
   - Resolution to amend
   - Copy of amended trust deed

9. Were there any changes in trustees during the year? YES / NO

   If **YES** please supply
   - Resolution to retire a trustee
   - Resolution to appoint a trustee
   - Deeds to support the above
   - Please supply address, phone and IRD number details for new trustees

10. Did the trustees add or amend any deed/memorandum of wishes during the year? YES / NO

    If **YES** please supply
    - Supporting documentation

11. Were there any changes in beneficiaries during the year? YES / NO

    If **YES** please supply
    - Resolution to remove a beneficiary
    - Resolution to appoint a beneficiary
    - Deeds to support the above
    - Please supply address, phone, IRD number and date of birth details for new beneficiaries

12. If the Trust owns any Life policies over the Trustees/Settlors/Beneficiaries lives, and you have not already supplied copies of these policies, please provide these.

13. If you have an investment advisor who regularly advises the Trust on matters of investments, please supply their details.

Name. ____

Company ____

Address ____

Telephone ____

E-mail ____

14. Who are the legal advisors to the Trust?

Name ____

Company ____

Address ____

Telephone ____

E-mail ____

15. Are your personal wills up to date? YES / NO

16. Do you, as trustee, have a Power of Attorney in place? YES / NO

- Please supply a copy of the power of attorney if we do not already hold it.