

## 2009 PERSONAL TAXATION QUESTIONNAIRE

<b>Name:</b>		<b>Year End:</b>	31 March 2009
<b>Phone Number:</b>		<b>Facsimile Number:</b>	
<b>E-mail Address:</b>		<b>Date of Birth:</b>	

Please complete the checklist below to determine which parts of the questionnaire you need to complete. **Please complete the section of the questionnaire if you answer 'yes' to the relevant question.**

	YES	NO	If 'YES', please complete these sections
1. Did you receive <b>any</b> of the following types of income?	<input type="checkbox"/>	<input type="checkbox"/>	
- Salary, Wages or Accident Compensation payments	<input type="checkbox"/>	<input type="checkbox"/>	A1
- A benefit of any sort, NZ Superannuation or Family Support	<input type="checkbox"/>	<input type="checkbox"/>	A1
- Withholding Payments	<input type="checkbox"/>	<input type="checkbox"/>	A1
2. Did you receive any interest or dividends?	<input type="checkbox"/>	<input type="checkbox"/>	A2
3. Are you a shareholder or director of a company that Perriam and Partners Ltd does not act for (excluding shareholdings in publicly listed companies)?	<input type="checkbox"/>	<input type="checkbox"/>	A3
4. Do you have a Student Loan?	<input type="checkbox"/>	<input type="checkbox"/>	A4
5. Did you receive any income from an Estate, Trust, Partnership or Business that Perriam and Partners Ltd does not act for?	<input type="checkbox"/>	<input type="checkbox"/>	A5
6. Did you receive any income from overseas (excluding interest or dividends included above)?	<input type="checkbox"/>	<input type="checkbox"/>	A6
7. Did you receive any of the following types of income?			
- Income from the sale of real estate (apart from your personal residence)?	<input type="checkbox"/>	<input type="checkbox"/>	A7
- Income from the sale of any shares, bonds or other investments?	<input type="checkbox"/>	<input type="checkbox"/>	A7
- Income from any pension, annuity or superannuation scheme?	<input type="checkbox"/>	<input type="checkbox"/>	A7
- Any other income (for example royalties)?	<input type="checkbox"/>	<input type="checkbox"/>	A7
8. Did you incur any expenses relating to earning your income?	<input type="checkbox"/>	<input type="checkbox"/>	A8
9. Did you make any donations during the year?	<input type="checkbox"/>	<input type="checkbox"/>	A9
- Did you pay for childcare or house keepers?	<input type="checkbox"/>	<input type="checkbox"/>	A9
10. Is your taxable income likely to be under \$9880 for the year?	<input type="checkbox"/>	<input type="checkbox"/>	A10
11. Have you paid Premiums on Income Protection Insurance?	<input type="checkbox"/>	<input type="checkbox"/>	A11
12. Do you have any Portfolio Investment Entities?	<input type="checkbox"/>	<input type="checkbox"/>	A12
13. Did you receive any Child Support during the year?	<input type="checkbox"/>	<input type="checkbox"/>	A13
14. Do you want us to assess your eligibility for Family Assistance?	<input type="checkbox"/>	<input type="checkbox"/>	A14
15. <b>IN ALL CASES, PLEASE COMPLETE SECTION A15</b>	<input type="checkbox"/>		<b>A15</b>
16. <b>IN ALL CASES, PLEASE SIGN THE DECLARATION AT A16</b>	<input type="checkbox"/>		<b>A16</b>

**PLEASE CALL US FOR ASSISTANCE - (03) 358-3108**

**A1. Income with Tax Deducted**

Please provide the following records:

**Enclosed**      **N/A**

- A copy of your 'Summary of Earnings' if you received one

                    

If you did not receive this then we will have received it direct from the Inland Revenue Department.

**If you received Withholding Payments (for example, real estate commissions), you may be able to claim expenses against this income.** If you wish to claim expenses please provide details or contact us to discuss what you can claim.

**Enclosed**      **N/A**

Expense details

                    

**A2. Interest and Dividends**

Please provide the following records:

**Enclosed**      **N/A**

- A copy of all Resident Withholding Tax certificates received
- A copy of all dividend statements received

                       
                     

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**A3. Shareholdings and Directorships**

Please provide the following records, including totals of all income received or losses attributed for the financial year:

Name of Company	Directors Fees	Salaries	Share of LAQC loss

**A4. Student Loan**

If you have made any voluntary repayments of your student loan please provide details.

Amount Paid

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**A5. Estate, Trust or Partnership Income**

Please provide the following records for the financial year.

Name and Type of Entity	IRD Number	Amount	Tax Credits

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**A6. Overseas Income**

Please provide the following records, including totals of all income received and tax credits for the financial year:

Name of Entity	Currency	Amount	Tax Credits

**A7. Other Income**

Please provide full details of any other income you have received during the year and attach any related documentation.

**Description of Income**

**Amount**


**A8. Expenses**

Please provide details below (examples include fees paid to an investment advisor or interest on funds borrowed to invest in an income producing asset).

**Description of Expense**

**Amount**


**A9. Donations / Childcare / Housekeeper**

If you would like us to complete your rebate claim, please attach all your donation and childcare receipts to this questionnaire. You must have a receipt in order to claim a rebate.

Do you require us to complete your rebate form?

**Yes**      **No**

    

**A10. Income under \$9880**

To enable us to complete the rebate calculation, please complete the following details:

Number of weeks that you worked 20 hours or more during the year:

Number of weeks that you were on a sickness benefit or received ACC:

Number of weeks that your family received family support while you were working 20 or more hours per week:


**A11. Income Protection:**

The premiums payable on income protection policies **may** be deductible as an expense in your tax return. Your insurance company should have provided you with an annual confirmation of premiums paid. If your policy is an "agreed amount" then please provide details of the policy.

**Enclosed:**

Annual confirmation of premiums paid/invoice:

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**Company**

**Amount Paid**

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**A12. Portfolio Investment Entities**

1. Do you own any overseas investments? (shares / equity investments)  
Please forward all correspondence received in relation to these investments throughout the year.

**Yes**      **No**

    

2. Have you elected for a Prescribed Investor Rate (PIR) for any investments held?  
If so, please confirm which investments you have made an election.

    

**This is particularly important for investments held in a Family Trust**

**A13. Child Support**

Did you received Child Support during the year?

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**A14. Family Assistance**

Please provide the following information to allow us to calculate your entitlement:

Spouses Name:  Spouses D.O.B:   
Spouses IRD Number:   
Spouses Taxable Income:

Names of Children (full name)	Date of Birth	IRD Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

If any of the children do not have an IRD number, please complete an IR595 form which is available from the AA or Postshops. Alternatively this could be downloaded from the IRD's website.

Number of weeks that you &/or your spouse worked 30 hours or more during the year or 20 hours yourself only:

Please provide details of children who left school or became financially independent during the year.

Names of Children	Date left school/independent
<input type="text"/>	<input type="text"/>

**A15. General**

1. Do you have an entitlement to benefits from any foreign company, unit trust, superannuation scheme or life insurance policy? If so, please provide details as additional disclosures may be required.
2. If there are any other matters, not included above which you feel might be relevant in determining your tax position, please note them here:

**A16. DECLARATION**

I accept responsibility for all records and information supplied to you for the purpose of preparing my Income Tax return. I accept responsibility for any failure by me to supply all relevant records and information to you.

I ..... hereby authorise Perriam and Partners Ltd to obtain from any third party any records or information you require for the purpose of preparing my Income Tax Return and accordingly any such third party is authorised to provide you with information required.

Signed   
Date

**Your time and effort in completing this form is much appreciated by the team at Perriam and Partners Ltd.**