Mackay Bailey Ltd
Chartered Accountants
109 Blenheim Road
PO Box 13311
Christchurch 8141
New Zealand
p + 64 3 341 0930
f + 64 3 343 9843
e office@mackaybailey.co.nz
w www.mackaybailey.co.nz

mackaybailey
Commercial and Rural Accountants

2018 TRUST QUESTIONNAIRE

NAME:

Balance Date:

Please update your contact details below if there have been any changes:

Phone:

Fax:

Mobile:

E-mail:

Postal address:

Please take the time to work through this questionnaire thoroughly and action each point that is applicable to you. This will greatly assist us in the efficient preparation of your annual report and tax return.

Terms of Engagement

This engagement is subject to Mackay Bailey Limited's current Terms of Engagement which are available on our website: www.mackaybailey.co.nz/engagement

By signing this page you accept responsibility for all information provided to us and agree to our Terms of Engagement.

Authority to Act and Obtain Information

We may use this authority to obtain additional information should we require it to complete this engagement.

I authorise Mackay Bailey to obtain any financial records necessary to complete the Trust's annual report and tax returns for the 2018 year. This may include, but is not limited to, bank statements, co-operative statements, insurance invoices as well as dividend and interest certificates.

I authorise Mackay Bailey to be the Trust's Inland Revenue Tax Agent for all tax types and communicate with Inland Revenue on my behalf, including communicating via electronic methods.

I authorise Mackay Bailey to communicate with the Trust's financiers, banks, solicitors and other advisors as they deem appropriate to obtain information necessary to carry out this engagement.

Signature: ______________________________

Full Name: ______________________________

Date Completed: ______________________________

GENERAL

Is there a specific date that you require your accounts completed by? ______/______/______

Would you like a draft copy of the annual report before it is finalised? Yes / No

Would you like us to supply a copy of your annual report to the bank? Yes / No

Who is your bank manager? ______________________________

CHECKLIST OF RECORDS TO BE SUPPLIED TO COMPLETE THE ANNUAL REPORT:	Tick if applicable
Cash Book/Accounting System Please supply a back-up of your electronic cashbook if you use one. Please also advise the password if applicable. You can e-mail a back-up to **backups@mackaybailey.co.nz** if you prefer.	
Bank Statements • For all accounts operated by the Trust. Statements should cover the full period plus one month after balance date. Please obtain any missing statements from your bank. • All cheque books and deposit books. • You can note income or withdrawal details on the bank statements, including automatic payments, if this is preferred.	
GST Returns Please supply your copies of **all GST returns and workings** for the year	
Term Loans/Hire Purchase Agreements Please supply all loan statements and new hire purchase agreements.	
Insurance Please supply the premium summary and a copy of any invoices for insurance. If the Trust received any insurance claim/EQC proceeds during the year please include copies of the documentation.	
Interest Certificates These are normally sent by banks in April each year.	
Dividend Certificates Please provide all dividend certificates received, including details of shares received in lieu of dividends.	
Rates/Government Valuation Please supply a copy of the Rates notice or Government Valuation notice if there has been an updated valuation issued during the year.	

Gifting Please supply details of any gifting received by the Trust.	
Solicitor's Invoices (To enable analysis of legal fees) Please supply **all** invoices for legal services	
Major Transactions Please supply documentation, settlement statements and invoices relating to any major transactions such as the sale or purchase of significant assets, property or development. This will ensure that we treat this expenditure correctly and maximise the depreciation claim.	

NEW ASSETS PURCHASED OR CAPITAL IMPROVEMENTS

Asset Description	Total Paid	Date	Details of Any Asset Traded In

(Please supply Hire Purchase Agreements if applicable)

PARTICULARS OF ASSETS SOLD OR SCRAPPED DURING THE YEAR

(Please refer to your last years fixed asset and depreciation schedule included with your annual report)

Asset Description	Date Sold	Total Received	Tick If Scrapped	Details of Replacement Asset if Traded

INTEREST PAID TO FAMILY MEMBERS

Please provide details of interest paid to family members:

Name: ______________________________ Amount Paid: ______________

Name: ______________________________ Amount Paid: ______________

Please also supply copies of any Resident Withholding Tax returns filed with Inland Revenue

CLAIM FOR OTHER EXPENSES

In the event of deductible expenses being paid in cash or from a personal account, please supply details, as these items can be included as a deductible expense if they are business related, examples maybe newspapers, taxi fares, car parking, etc.

CASH INCOME NOT BANKED DURING THE YEAR

Please provide details of cash received but not paid into your bank account.

______________________________ $ ______________

TRUST ADMINISTRATION

We appreciate that in most instances we may have attended to the necessary documentation. However because of the potential income tax implications of not documenting such matters on a timely basis, please answer the following questions, details can be added in the Notes sections below:

Have there been any changes in Trustees during the year?	Yes / No
Have there been any major changes to the Trust's activities?	Yes / No
Have there been any distributions of cash, investments or property to Beneficiaries during the year?	Yes / No
Have there been any advances to Trustees or Beneficiaries during the year?	Yes / No
Has the Trust received any gifts in reduction of debt during the year?	Yes / No
Does the Trust have a Memorandum of Wishes?	Yes / No

If Yes, when was it last reviewed _______________

NOTES

Please make sure that the records you supply are **complete.** If some information has been mislaid, **please obtain copies.**

Thank you for completing this questionnaire. Please sign where indicated on page 2.