## Financial Statements Questionnaire -

| Ensure this questionnaire is completed and included with your records   |   |   |   |   |  |  |
|---|---|---|---|---|--|--|
| Client Name   |   |   | Phone:                                      |   |  |  |
| Balance Date  |   |   | Email:                                      |   |  |  |
| To: Smith Mitchell Limited  |   |   |   |   |  |  |
| Terms of Engagement   |   |   |   |   |  |  |
| I/We hereby instruct you Smith Mitchell Limited and staff/contractors as applicable to prepare my/our Financial Statements and Taxation Returns for the year/period ending . I/We undertake to supply all information necessary to carry out such services and will be responsible for the accuracy and completeness of such information. I/We understand that you will rely upon the information provided by me/us. Your services are not intended to, and accordingly will not result in the expression by you of an opinion on the Financial Statements in so far as third parties are concerned, or in the fulfilling of any statutory audit requirements. I/We understand that during preparation of the Financial Statements and Taxation Returns you will not be specifically investigating non-compliance with laws and regulations – however, should anything come to light of this nature during this process, you will bring that to my/our attention. |   |   |   |   |  |  |
| my/our taxation liabilities   | Financial Statements and Taxa<br>If this should change in any<br>to any person, other than me/us  | material respect, I/w   | e will inform you imr                       | nediately. You will not                       |  |  |
| All other terms and cond I/we signed when I/we be   | litions of this engagement are tecame a client.   | the same as those re  | ferred to in the origin                     | nal Engagement Letter                         |  |  |
| all accounts are due for p  | u have the right to charge intercoayment by the 20th of the mon<br>cept that any collection costs yo  | th following invoice da   | ate. The charging of                        | such interest will be at                      |  |  |
| all tax types (except chile   | nin information from Inland Revold<br>support), bank and loan acco<br>ough all Inland Revenue media   | ounts in order to comp  | plete the above assig                       | nments. This includes                         |  |  |
| allows your organisation<br>MyACC for Business. Th<br>to my/our ACC informati   | nisation to act as our agent for<br>to query and change informatio<br>is authority will also allow your<br>on to other members of your of<br>I change information on my/our | n on my/our ACC levy<br>organisation's main r<br>organisation. Other de | account(s) through A epresentative discreti | ACC staff, and through ion to delegate access |  |  |
|   | e/us as my/our tax agent. All<br>her taxation return on behalf of i   |   |   |   |  |  |
| Name  | IRD Number  | Signature   |   | Date  |  |  |
|   |   |   |   |   |  |  |
|   |   |   |   |   |  |  |
|   |   |   |   |   |  |  |
|   |   |   |   |   |  |  |
|   |   |   |   |   |  |  |
| Convenient time to call you is:   |   |   |   |   |  |  |
| Alternative phone nu  | ımbers are:   |   |   |   |  |  |
| Would you like us to  | supply a copy to your bar   | nk? Yes [   | ☐ No ☐ (Tick O                              | ne)   |  |  |
| 1 -   | to be supplied to your bar<br>ame of your current bank n  |   |   |   |  |  |

| Records Required:   |                    | ✓      | Comment:                       |  |
|---|--------------------|--------|--------------------------------|--|
| Employer – Wages paid to Employees  |                    |        |                                |  |
| Supply a month-by-month summary of gross wages, termina payments and PAYE deductions as returned to the IRD. (Not use Xero Payroll).        |                    |        |                                |  |
| Covid-19 Wage Subsidy and other Covid-19  | support pay        | mer    | nts                            |  |
| Have you received the Covid-19 Leave Support Payments?  | (please note all   | dates  | s and receipts)                |  |
| Date rec:// \$  | Date rec://_       | \$     |                                |  |
| Date rec://\$   | Date rec://_       | \$     |                                |  |
| Date rec:// \$  | Date rec://_       | \$     | <del></del>                    |  |
| Where Covid-19 Leave Support Payments have been received (shareholders/partners/trustees/beneficiaries/owners) of the bu                    |                    | vide c | letails of the following:      |  |
| Amounts received for each stakeholder   |                    |        |                                |  |
| Whether amounts received were for full-time or part-tire  | nes                |        |                                |  |
| Have you received a Covid-19 Cultural Sector Emergency F  | Relief Grant or ar | ny oth | ner Covid-19 support payments? |  |
| Please provide details if it is an "other" Covid-19 support payment   |                    |        |                                |  |
| Date rec:// \$  |                    |        |                                |  |
| Date rec:// \$  |                    |        |                                |  |
| Have you received the Covid-19 Small Business Loan?   |                    |        |                                |  |
| Date rec: _/_/_ \$  |                    |        |                                |  |
| Date 1ec//  |                    |        |                                |  |
| Have any amounts of Covid-19 support payments been rep  | aid back?          |        |                                |  |
| Please provide details of payment and reason for repayment  |                    |        |                                |  |
| Date paid back:/ \$   | Reason:            |        |                                |  |
|   |                    |        |                                |  |
|   |                    |        |                                |  |
|   |                    |        |                                |  |
|   |                    |        |                                |  |
| Fringe Benefit Tax (FBT) Returns  |                    |        |                                |  |
| Supply copies of Fringe Benefit Tax (FBT) returns and work p  | naners             |        |                                |  |
| Final Bank Statement  | эарстэ.            | Ш      |                                |  |
| Tillal Balik Statement  |                    |        |                                |  |
| Final bank statement for the year for all bank accounts   |                    |        |                                |  |
| Loan Statements   |                    |        |                                |  |
| Supply a copy of any loan transaction statements for the fina your balance date, including loans that have been refinanced during the year. | •                  |        |                                |  |
| Interest and Dividend Certificates  |                    |        |                                |  |
| Supply copies of certificates.  |                    |        |                                |  |
| Lease details   |                    |        |                                |  |
| Supply copies of lease agreements for non-building assets (exvehicles, equipment).  | e.g. motor         |        |                                |  |
| Foreign Income  |                    |        |                                |  |
| Details of any foreign income received, and any tax deducted  | from this.         |        |                                |  |

| Accounts Receivable (Debtors) – see attached Schedule 1  |   |   |  |  |
|--|---|---|--|--|
| All accounts or amounts owing to you at balance date should be scheduled. <b>Exclude</b> bad debts. To enable bad debts to be excluded from income, these must be written off prior to balance date.   |   | Total at Balance Date:  \$ GST Included  Excluded |  |  |
| Accounts Payable (Creditors) – see attached Schedule 2   | l |   |  |  |
| All accounts or amounts owing by you at balance date should be scheduled indicating name of creditor, amount and what the debt is for.   |   | Total at Balance Date: \$ GST Included  Excluded  |  |  |
| Cash on Hand   | 1 |   |  |  |
| *Cash on Hand \$ Date banked//_  |   |   |  |  |
| Petty Cash \$  |   |   |  |  |
| Till Floats/Cash Floats \$ *Incl cash sales prior to balance date but not banked until after balance date  |   |   |  |  |
| Stock on Hand  |   |   |  |  |
| Stock Stock should be physically counted at balance date and adequate records retained to substantiate the dollar value arrived at.  |   | Valued at lower of:  cost  net realisable value   |  |  |
| Please note that if you estimate your stock to be less than \$10,000 at the end of your income year, you may have the option of not physically counting your stock. In these circumstances we will assume that your closing stock is the same as your opening stock. Please indicate if you would like to use this option. |   | market value S  SST Included Excluded             |  |  |
| Work in Progress Include material costs, labour costs and overhead costs. Briefly, how was this calculated?  |   | \$<br>GST Included                                |  |  |
| Prepayments Made  Balance of any payments made before balance date for goods or services not received or used by balance date.   |   | \$GST Included                                    |  |  |
| Income in Advance Balance of any receipts received before balance date for goods or services not provided by balance date.   |   | \$GST Included                                    |  |  |
| Capital Expenditure  | ı |   |  |  |
| Attach 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:  |   |   |  |  |
| <ul> <li>Hire purchase or loan agreements</li> <li>Lease agreements</li> <li>All legal statements and agreements</li> <li>Trade-in details</li> <li>Lost, stolen or scrapped items</li> <li>Insurance pay out</li> <li>Copy of Tax Invoices</li> </ul>   |   |   |  |  |
|  | ĺ |   |  |  |

| Transactions Not Through the Business   |   |               |                 |
|---|---|---------------|-----------------|
| Were all sales banked into your business trading bank account? Yes \_ No \_   |   |               |                 |
| If No, list amounts not banked and when they were lodged:   |   | Personal      | \$              |
|   |   | Business      | \$              |
|   |   | Other         | \$              |
|   |   |               |                 |
| Other Taxable or Non-Taxable Income   |   | T             |                 |
| Did you receive income from any other sources either taxable or non-taxable?  |   |               |                 |
| If Yes, please provide details (e.g. Uber, Airbnb, services through platforms such as Pocket Job, Airtasker etc).   |   |               |                 |
| Legal and Loan Documents  | I | ·             |                 |
| Please attach any solicitor's statements and Sale and Purchase Agreements relating to any legal transactions during the year. Please also include Statements and Agreements relating to any mortgages, hire purchase, leases or loans.            |   |               |                 |
| Business Expenses   | ı |               |                 |
| There are a number of invoices that we specifically require. Please ensure the records you provide us with include all paid accounts for:   |   |               |                 |
| <ul> <li>Insurance premiums</li> </ul>  |   |               |                 |
| Legal fees  |   |               |                 |
| Private Use   |   |               |                 |
| Value of goods taken for private use at their <b>cost</b> price.  |   | ¢             |                 |
| value of goods taken for private use at their cost price.   |   | ST Included   | –<br>Evoluded □ |
| Expenses paid in Cash or from Personal Funds  |   | COT IIICIACCA | Excided         |
| Please provide a list if applicable.  |   |               |                 |
| Residential Land Withholding Tax  |   | <u> </u>      |                 |
| Have you sold residential property in New Zealand where Residential Land Withholding Tax has been deducted and paid to the IRD? If so, provide details e.g. IR1100 Residential land withholding tax return and other sale and purchase documents. |   |               |                 |
| Residential Property Sales  |   |               |                 |
| •   |   |               |                 |
| Have you sold any residential property during the year (not otherwise detailed on the information provided)?  |   |               |                 |
| If yes, when was the property purchased?  |   | -             |                 |
| If it was purchased with 10 years of the sale date,   |   | \$            |                 |
| <ul> <li>what was the original purchase price</li> </ul>  |   |               |                 |
| • and the sale price?   |   |               |                 |
|   |   |               |                 |
| Mortgage Interest Paid on Residential Properties  |   |               |                 |
| Have you incurred interest on residential properties owned (which is not your main family home or a 'new build*')? Is the interest also against properties other than residential rentals? If so, please provide details of amount of             |   |               |                 |
| interest and dates paid.  |   |               |                 |

| December of Development  |                             |                   |         |                                      |                             |
|--|-----------------------------|-------------------|---------|--------------------------------------|-----------------------------|
| Research and Development   |                             |                   |         |                                      |                             |
| Have you spent an amount on research year? If so, provide ledger accounts an |                             | the income        |         |                                      |                             |
| Motor Vehicles   |                             |                   |         |                                      |                             |
| The proportion of motor vehicle busine                                       | ss use as established by    | your vehicle log  | book(   | s) is/are:                           |                             |
|  |                             | ,                 | ,       | ,                                    |                             |
| Vehicle Description:   |                             | _                 |         |                                      |                             |
| Business   | km                          |                   |         |                                      |                             |
| Total  | km                          |                   |         |                                      |                             |
| Percentage Business  | %                           |                   |         |                                      |                             |
| Vehicle Description:   |                             |                   |         |                                      |                             |
| venicle bescription.   |                             |                   |         |                                      |                             |
| Business   | km                          |                   |         |                                      |                             |
| Total  | km                          |                   |         |                                      |                             |
| Percentage Business  | %                           |                   |         |                                      |                             |
| Please note that a detailed and accura                                       | te log book must be comp    | leted for a three | mont    | th period every thr                  | ee vears or vehicle         |
| expense claims will be limited to a max                                      |                             |                   |         |                                      | •                           |
| which vehicles you are currently paying                                      | ·                           | , ·               |         |                                      |                             |
|  |                             |                   |         |                                      |                             |
|  |                             |                   |         |                                      |                             |
|  |                             |                   |         |                                      |                             |
| Home Office Expenses   |                             |                   |         |                                      |                             |
| •  |                             |                   |         |                                      |                             |
| If part of your home is set aside princip                                    | ally for use as an office/w | orkshop/storage   | area,   | , please provide tr                  | ne following details:       |
| Address for Home Office  |                             |                   |         |                                      |                             |
|  | <del>-</del>                |                   |         |                                      | _                           |
| Home Office area: - no change as per   | previous year 📋             |                   |         |                                      |                             |
| OR   |                             |                   |         |                                      |                             |
| Area used for Business:  | m²                          |                   |         |                                      |                             |
| Total Area of House & Workshop:  | m²                          |                   |         |                                      |                             |
|  |                             |                   |         |                                      |                             |
| Actual Cost Method   |                             | OR IRD Squa       | are Me  | etre Rate Method                     | (see below note)*           |
| Power  | \$                          |                   |         |                                      |                             |
| Insurance (Building & Contents)  | \$                          |                   |         |                                      |                             |
| Interest (House Mortgage)  | \$                          | Interest (Hou     | se Mo   | ortgage)                             | \$                          |
| Rates (including regional council rates)                                     | ) \$                        | ·                 |         |                                      | es) \$                      |
| Rent   |                             | ·                 | iiig ic | gioriai courion rate                 |                             |
|  | \$                          | Rent              |         |                                      | \$                          |
| Repairs & Maintenance  | \$                          |                   |         | use the IRD rate?<br>allowance doesn | Currently it is \$47.85 per |
| Telephone rental   | \$                          |                   |         |                                      | vould still require these   |
| Other  | \$                          | amounts.          |         |                                      |                             |
| Total  | \$                          |                   |         |                                      |                             |

Thank you for completing this questionnaire

Don't forget to sign it

## Schedule 1 – Accounts Receivable (Debtors) Amounts owing to you at

| 7 miles owning to you at                             |         |                      |      |                 |
|--|---------|----------------------|------|-----------------|
| Client Name  |         |                      |      |                 |
| Name of Debtor                                       |         | Description of Sale  | Code | Total Incl GST  |
| Name of Bestor                                       |         | Description of Gale  | Code | Total life! GOT |
|  |         |                      |      |                 |
|  |         |                      |      |                 |
|  |         |                      |      |                 |
|  |         |                      |      |                 |
|  |         |                      |      |                 |
|  |         |                      |      |                 |
|  |         |                      |      |                 |
|  |         |                      |      |                 |
|  | 1       |                      |      |                 |
| Totals   |         |                      |      |                 |
| Schedule 2 – Accounts Pag<br>Amounts owing by you at | yable ( | (Creditors)          |      |                 |
|  |         |                      |      |                 |
| Name of Creditor                                     |         | Description of Goods | Code | Total Incl GST  |
|  |         |                      |      |                 |
|  |         |                      |      |                 |
|  |         |                      |      |                 |
|  |         |                      |      |                 |
|  |         |                      |      |                 |
|  |         |                      |      |                 |
|  |         |                      |      |                 |
|  |         |                      |      |                 |

| Totals |  |
|--------|--|
|        |  |

## Schedule 3 Livestock – Cattle Tallies

- Include stock that you **own**, regardless of where the stock is located.
- Do not include stock owned by other people but grazing on your land.

| Cattle    |                           |               |  |
|-----------|---------------------------|---------------|--|
| Opening S | stock Numbers             |               |  |
| Add:      | Purchased during year     |               |  |
|           | Calves Bred               |               |  |
|           |                           | Sub Total (A) |  |
| Deduct:   | Total Cattle sold         |               |  |
|           | Closing Stock Numbers     |               |  |
|           | Known Deaths and Killed   |               |  |
|           |                           | Sub Total (B) |  |
| Unaccoun  | ted for and Missing (A-B) |               |  |

| Description                        |                           |        | Total Number of<br>Cattle as at |
|------------------------------------|---------------------------|--------|---------------------------------|
| Beef Breeds and Beef Cross         | ses                       |        | <b>I</b>                        |
| Rising one year heifers            |                           |        |                                 |
| Rising two year heifers            |                           |        |                                 |
| Mixed age cows                     |                           |        |                                 |
| Breeding Bulls                     |                           |        |                                 |
| Rising one year                    | Steers:                   | Bulls: |                                 |
| Rising two year                    | Steers:                   | Bulls: |                                 |
| Rising three year                  | Steers:                   | Bulls: |                                 |
| Friesian and Related Breeds        | s, Jersey and other dairy | breeds |                                 |
| Rising one year heifers            |                           |        |                                 |
| Rising two year heifers            |                           |        |                                 |
| Mixed age cows                     |                           |        |                                 |
| Breeding Bulls                     |                           |        |                                 |
| Rising one year                    | Steers:                   | Bulls: |                                 |
| Rising two year                    | Steers:                   | Bulls: |                                 |
| Rising three year                  | Steers:                   | Bulls: |                                 |
|                                    | TOTAL                     |        |                                 |
| Deaths and Losses                  |                           |        |                                 |
| Natural Increase                   |                           |        |                                 |
| Peak Milking Cow Numbers for th    | e last season             |        |                                 |
| Effective Milking Hectares for the | last season               |        |                                 |

## Schedule 3 Livestock – Sheep Tallies

- Include stock that you <u>own</u>, regardless of where the stock is located.
  Do not include stock owned by other people but grazing on your land.

| Sheep     |                          |               |  |
|-----------|--------------------------|---------------|--|
| Opening S | tock Numbers             |               |  |
| Add:      | Purchased during year    |               |  |
|           | Lambs Bred/Docked        |               |  |
|           |                          | Sub Total (A) |  |
| Deduct:   | Total Sheep Sold         |               |  |
|           | Closing Stock Numbers    |               |  |
|           | Sheep Killed             |               |  |
|           | Known Deaths             |               |  |
|           |                          | Sub Total (B) |  |
| Unaccount | ed for and Missing (A-B) |               |  |

| Description   | Number of<br>Sheep as at |
|---|--------------------------|
| Sheep   |                          |
| Ewe hoggets   |                          |
| Two tooth ewes  |                          |
| Mixed age ewes (Rising 3 year and 4 year)             |                          |
| Rising five year and older ewes                       |                          |
| Mixed age wethers                                     |                          |
| Breeding rams   |                          |
| Ram hoggets   |                          |
| Wether hoggets  |                          |
| TOTAL   |                          |
| Sheep bred during the year (Lambs docked last spring) |                          |
| Deaths and Losses                                     |                          |

| Wool                                       |  |  |
|--|--|--|
| Total kg's of wool on hand at Balance Date |  |  |
| Date the wool was actually sold            |  |  |
| Net Proceeds received                      |  |  |