

## Primary Production - Year End Questionnaire 2020

Client:

Date:

This Primary Production - Year End Questionnaire is designed to save you time and money. The effort you invest to complete this questionnaire will be repaid because we'll be able to complete your accounts accurately and efficiently, saving you unnecessary fees that might otherwise be incurred if we had to come back to you multiple times requesting more information.

Please complete this questionnaire and ensure you attach all relevant documentation, then sign and date this form below, and return your questionnaire and documentation to us.

If you have any queries or concerns, please do not hesitate to contact us.

### Complete Business Strategies

---

*I/We hereby instruct you to prepare our Financial Accounts and Taxation Returns for the financial year ended 30 June 2020.*

*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. You are hereby authorised to communicate with my bankers, solicitors, finance companies and all government agencies such as the ATO to obtain any information you require to enable you to complete the above assignment.*

Name:

Signature:

Date:

**To ensure that our records are up to date, please assist us by confirming and/or completing the following:**

|                                       |      |          |     |        |
|---------------------------------------|------|----------|-----|--------|
| Entity name:                          |      |          |     |        |
| ABN:                                  |      |          |     |        |
| ACN<br>(if a company)                 |      |          |     |        |
| TFN:                                  |      |          |     |        |
| Main business activity:               |      |          |     |        |
| Address of business:                  |      |          |     |        |
|                                       |      |          |     |        |
| Registered address:<br>(if a company) |      |          |     |        |
|                                       |      |          |     |        |
| Postal address:                       |      |          |     |        |
|                                       |      |          |     |        |
| Telephone number:                     |      |          |     |        |
| Email address:<br>(For our records)   |      |          |     |        |
| Trustee(s):<br>(if a trust)           |      |          |     |        |
|                                       |      |          |     |        |
| Contact name:                         |      |          |     |        |
| Address:                              |      |          |     |        |
| Telephone:                            | Home | Business | Fax | Mobile |
| Email address:<br>(For our records)   |      |          |     |        |
| Trustee(s):<br>(if a trust)           |      |          |     |        |
|                                       |      |          |     |        |
| Contact name:                         |      |          |     |        |
| Address:                              |      |          |     |        |
| Telephone:                            | Home | Business | Fax | Mobile |
| Email address:<br>(For our records)   |      |          |     |        |

| 1. If we are preparing your accounts for the first time:  |  | Yes                      | No                       | ?                        |
|---|--|--------------------------|--------------------------|--------------------------|
| <b>Please provide:</b>  |  |                          |                          |                          |
| 1.1   | Copies of your most recent Financial Statements including livestock trading accounts.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.2   | A copy of your last tax return, taxation assessment and PAYG instalment notices.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.3   | Copies of any other correspondence with the Tax Office such as objections, penalties, Statement of Account, Garnishee Notice, Final Notice to Lodge. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Livestock</b>  |  |                          |                          |                          |
| 2. Livestock  |  | Yes                      | No                       | ?                        |
| 2.1   | Please supply the following information for each category of livestock:  |                          |                          |                          |
| 2.1.1   | Stock on hand at end of year.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.1.2   | Natural increase for year.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.1.3   | Deaths for year.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.1.4   | Stock killed for rations or exchanged for goods and services.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Forced disposal or death of livestock:   |  | Yes                      | No                       | ?                        |
| 3.1   | Have you experienced the forced disposal of livestock due to:  |                          |                          |                          |
| 3.1.1   | Compulsory acquisition of land?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.1.2   | Cattle tick eradication program?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.1.3   | Pasture or fodder destroyed by fire, drought or flood?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.1.4   | Disease control?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.1.5   | Death by disease?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.1.6   | Contamination of property?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>You can elect to spread profit from the forced disposal or death of livestock in these circumstances over a period of 5 years or alternatively to use the profit to reduce the cost of replacement livestock over 5 years.</i> |  |                          |                          |                          |
| 3.2   | Have you received any insurance recovery for loss of livestock?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Fencing &amp; Landcare, Fodder Storage Assets, Water Facilities and Electricity</b>  |  |                          |                          |                          |
| 4. Fencing Assets and Landcare Operations   |  | Yes                      | No                       | ?                        |
| 4.1   | Please provide details of any expenditure (other than the purchase of plant) for landcare such as:   |                          |                          |                          |
| 4.1.1   | Eradication or extermination of animal or vegetable pests.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.1.2   | Destruction of plant growth detrimental to the land.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.1.3   | Prevention or combating land degradation ( <i>other than fencing</i> ).  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.1.4   | Erection of fences to exclude livestock or vermin from degraded land or to assist in reclamation of that land.                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

|                             |  |                          |                          |                          |
|-----------------------------|--|--------------------------|--------------------------|--------------------------|
| 4.1.5                       | Erection of fences to prevent land degradation, where the fences separate different land classes in accordance with an approved land management plan.                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.1.6                       | Construction of a levee or similar improvement.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.1.7                       | Construction of drainage works ( <i>other than draining swamps or low-lying areas</i> ) to control salinity or assist drainage control.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.2                         | Please supply details of capital expenditure on fencing assets that are not deductible as part of landcare operations.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>5.</b>                   | <b>Fodder Storage Assets</b>   | <b>Yes</b>               | <b>No</b>                | <b>?</b>                 |
| 5.1                         | Please provide details of:   |                          |                          |                          |
| 5.1.1                       | The purchase of fodder storage assets ( <i>e.g. silos &amp; tanks used to store grain and other animal feed</i> ).   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.1.2                       | Any costs incurred on structural improvements, capital repairs, alterations, additions or extensions to the fodder storage assets.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>6.</b>                   | <b>Water Facilities</b>  | <b>Yes</b>               | <b>No</b>                | <b>?</b>                 |
| 6.1                         | Please supply details of:  |                          |                          |                          |
| 6.1.1                       | The purchase of any plant primarily for the purpose of conserving or conveying water ( <i>e.g. dams, tanks, bores, irrigation channels, pumps, water towers &amp; windmills</i> ). | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.1.2                       | Any costs incurred on structural improvement primarily for the purpose of conserving or conveying water.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.1.3                       | Alterations, additions, extensions or capital repairs to any of those assets.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>7.</b>                   | <b>Electricity Connections and Telephone Lines</b>   | <b>Yes</b>               | <b>No</b>                | <b>?</b>                 |
| 7.1                         | Have you incurred any capital expenditure in connection with:  |                          |                          |                          |
| 7.1.1                       | Connecting or upgrading mains electricity?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7.1.2                       | Connection of a telephone line?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Horticultural Plants</b> |  |                          |                          |                          |
| <b>8.</b>                   | <b>Horticultural Plants</b>  | <b>Yes</b>               | <b>No</b>                | <b>?</b>                 |
| 8.1                         | Have you incurred any expenses in relation to the establishment of plants, such as:  |                          |                          |                          |
| 8.1.1                       | Acquiring and planting plants or seeds?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8.1.2                       | Preparing to plant ( <i>such as ploughing, contouring, fertilising, stone removal and topsoil enhancement, but not initial land clearing</i> )?                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8.1.3                       | Purchase of pots or potting mixtures?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8.1.4                       | Grafting trees?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8.1.5                       | Replacing existing plants or trees, because of diminished economic returns or declining popularity?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8.2                         | If you wish to self-assess the effective life of any plants, rather than accept the ATO's published effective life, what is your assessment of the effective life?                 |                          |                          |                          |

## Other Receipts

### 9. Abnormal Receipts Yes No ?

|     |                                    |                          |                          |                          |
|-----|------------------------------------|--------------------------|--------------------------|--------------------------|
| 9.1 | Have you received any income from: |                          |                          |                          |
| 9.2 | Double wool clips?                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9.3 | Insurance recoveries?              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## Farm Management Deposit Scheme

### 10. Deposits Yes No ?

|          |   |                          |                          |                          |
|----------|---|--------------------------|--------------------------|--------------------------|
| 10.1     | Have you made any deposits into a Farm Management Deposit prior to 30 June? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10.1.1   | If yes, please provide the following details:                               |                          |                          |                          |
| 10.1.1.1 | Name of financial institution.  |                          |                          |                          |
| 10.1.1.2 | Amount of deposit.  |                          |                          |                          |
| 10.1.1.3 | Interest received for the year.   |                          |                          |                          |

### 11. Repayments Yes No ?

|          |   |                          |                          |                          |
|----------|---|--------------------------|--------------------------|--------------------------|
| 11.1     | Have you received any repayments from a Farm Management Deposit prior to 30 June? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11.1.1   | If yes, please provide the following details:                                     |                          |                          |                          |
| 11.1.1.1 | Name of financial institution.  |                          |                          |                          |
| 11.1.1.2 | Amount of repayment.  |                          |                          |                          |
| 11.1.1.3 | Interest received for the year.   |                          |                          |                          |
|          | <i>Please provide full details</i>  |                          |                          |                          |

## Trading Accounts

### 12. Trading Accounts Yes No ?

|                                 |                                     |                          |                          |                          |
|---------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| Please provide statements from: |                                     |                          |                          |                          |
| 12.1                            | Co-operatives.                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12.2                            | Stock agents.                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12.3                            | Wheat board.                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12.4                            | Wool board.                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12.5                            | Other agencies with whom you trade. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## Other Information

### 13. Other Information

If there is any other information that you consider relevant, or you have particular concerns/queries, please provide us with details in the space below. Attach information if applicable.

|  |
|--|
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

**14. Timing**

14.1 Please indicate when you require the accounts to be completed:

14.2 Are these accounts required for a finance application?

**Thank you for taking the time to complete this questionnaire.**

**END OF DOCUMENT**