



PERSONAL INCOME TAX RETURN CHECKLIST

Please review this checklist and complete all relevant sections. Please ensure that you have received all income slips, receipts and other information prior to submitting your tax information to us to ensure your return is processed on timely basis.

Please ensure that you have provided to us all T slips and other income information, as CRA is imposing penalties on individuals who do not report income, even if the omission was inadvertent. Failure to report income twice within a four-year period will result in a penalty of 20% of the unreported income.

To ensure our records stay up to date, we ask that you please inform us of any changes to your contact information when they occur.

CONTACT/GENERAL INFORMATION

	<u>Taxpayer</u>	<u>Spouse/Common-law</u>
Name (Last, First)	_____	_____
Address	_____	_____
	_____	_____
Date of Birth (mm/dd/yyyy)	_____	_____
SIN Number	_____	_____
Phone Number	_____	_____
Email	_____	_____
Canadian Citizen?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
Citizen of another country?	<input type="checkbox"/> Y Which country: _____ <input type="checkbox"/> N	<input type="checkbox"/> Y Which country: _____ <input type="checkbox"/> N
Did you own foreign property with a cost over \$100,000 CDN at any time during the year?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
Would you like to give you name and address to Elections Canada for the voters list?	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Common-law		Do we prepare spouse return?
<input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed		<input type="checkbox"/> Y Please provide appropriate information
If marital status changed during year, give month/day: _____		<input type="checkbox"/> N Please provide Line 236 \$ _____

DEPENDANT INFORMATION

Please provide the following information for each dependant you financially supported during the year:

#	Dependant Name (First and Last)	SIN	(M/F)	Date of Birth (mm/dd/yyyy)	Relationship To You	Live with You?	Did we prepare return? *	Net Income (\$)
1								
2								
3								
4								

* If yes, please provide the appropriate tax information.

If we are not preparing your dependant(s) return and you wish to claim any unused tuition credits of your dependant(s), please provide a copy of the T2202A (tuition slip) from the recognized educational institution and ensure you provide us with their net income for the year in the space provided above. You can find this amount of Line 236 of their tax return.

TAX INFORMATION

Please provide the following slips and/or information as they apply for each individual we are preparing returns for:

INCOME

- T4 T4PS T4A T4A(OAS) T4A(P) T4E T5007
- T4RSP T4RIF T3 T5 T5008 T5013 RC62
- Self-employment income
(Summary and/or Receipts) Rental income
(Summary and/or Receipts) Capital gains/losses
(Summary and/or Receipts)
- Foreign income
(Summary and/or Receipts) Others – Please specify: _____
ex: support payments, income for which T4 slips were not issued (tips, odd jobs),
stock options exercised and/or sold, or any other income received that is taxable.

DEDUCTIONS

- RRSP contributions Union, professional dues
(only if paid personally) Safety deposit box charges
- Interest and carrying charges on funds
Borrowed for investing purposes Investment counsel and accounting
fees Clergy residence deduction
(T1223)
- Child care expenses
(Summary and/or Receipts) Moving expenses
(Summary and/or receipts) Employment/commission expenses
(T2200 & Summary and/or receipts)
- Others – Please specify: _____
ex: support payments, legal expenses incurred to collect income, repayments of income from prior years, or any other
expenses incurred that are deductible for tax purposes

TAX CREDITS

- Disability amount
(T2201 – signed by doctor) Tuition fees/education credit
(T2202 or other tax receipts) Interest paid on student loans
- Medical expenses Attendant care expenses Charitable donation receipts
- Political contributions receipts First Time Home Buyer credit Public Transit passes
- Children fitness credit
(max. \$1,000 per child) Children Art Tax Credit
(max. \$500 per child) Adoption related expenses
(Summary and/or Receipts)
- Income tax instalments paid
\$ _____ Others – Please specify: _____
ex: taxes paid to other countries, or any other which a tax credit is available.

OTHER INFORMATION

- Prior year Notice of Assessment and Reassessments.
- Details of Home Buyer Plan or Lifelong learning Plan withdrawals or repayments during year.
- Details of previous capital gain exemptions claimed, business investment losses and cumulative net investment loss accounts.
- Details of foreign property owned at any time in the year including cash, stocks, trusts, partnerships, real estate, tangible and intangible property, contingent interests, convertible property, etc.
- Are you a U.S. citizen, Green Card Holder, or were you, or your parents born in the United States? You likely have US filing obligations.
- Do you have, or share, custody of a child after a relationship breakdown? You may be entitled to the CCTB, UUCB and GST/HST Credit in respect of the child.
- Any other information that you feel will assist our office in preparing you return

DISCLAIMER

This personal income tax information sheet does not include all possible income and expense items that may be applicable to your particular tax situation. If you have other information that is not included on this sheet and you are not sure if there are tax implications, please feel free to contact our office and we would be happy to assist you.

Canada Revenue Agency performs regular reviews of income, expenses and credits claimed on tax returns. If your return is selected for review, you will be required to provide documentation to support amounts claimed. Therefore, we remind you to keep your receipts and records for a period of 6 years.

I have read and understand the above disclaimer. I also confirm the information that I have provided to your office is complete and accurate.

Signed by: _____

Date: _____