

2017 PERSONAL INCOME TAX RETURN CHECKLIST

<input type="checkbox"/> New Client <input type="checkbox"/> Returning Client	Today's Date:	Pickup Date:	Preparing: <input type="checkbox"/> Current Year <input type="checkbox"/> Multiple Years	Accounting Fees:
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PERSONAL INFORMATION

	Name (First Name, Last Name)	SIN	Address	Telephone #	Email Address
Taxpayer					
Spouse					

Marital Status: Single Married Common-law Separated Divorced Widowed

If marital status has changed during the year, please provide the date of change (YY/MM/DD): _____

Spouse's Net Income (if we are not preparing his/her return): _____ **(Best estimate if actual amount not available.)**

Did you dispose of your principal residence during the year? Yes No

If yes, please provide details of and/or documents for purchase and sale. **(Note: Penalties applicable if not reported.)**

RESIDENCE

Are you a U.S. Citizen or a green card holder? Yes No

Did you immigrate to Canada or emigrate from Canada during the past ten years? Yes No

If yes, provide date of entry into Canada (YY/MM/DD): _____ or date of departure from Canada (YY/MM/DD): _____

ELECTIONS CANADA

Are you a Canadian Citizen and Resident? Yes No

Do you wish to authorize CRA to provide your contact information to Elections Canada to update the voter's list? Yes No

FOREIGN REPORTING

Did you own foreign assets at any time in 2017 with a total cost of more than CAD\$100,000.00? Yes No

If yes, please provide details of ownership of foreign assets and transactions with foreign entities. **(Note: Penalties applicable if not reported.)**

DEPENDANTS *(If we prepared your 2016 Tax Return, please complete ONLY if information has changed)*

Name (First Name, Last Name)	Date of Birth (yyyy/mm/dd)	SIN	Relationship to you	Net Income (If Applicable)

GENERAL INCOME/DEDUCTIONS

- | | |
|--|--|
| <input type="checkbox"/> T4 Slips – Employment Income
<input type="checkbox"/> T4A Slips – Commission and Self-Employment
<input type="checkbox"/> T4E Slips – Employment Insurance Benefits
<input type="checkbox"/> T5007 Slips – WCB Benefits/Social Services Benefits | <input type="checkbox"/> Child Care Expenses (Please provide receipts per child)
<input type="checkbox"/> RC62 (UCCB)
<input type="checkbox"/> Support Payments (Spousal Support/Child Support)
<input type="checkbox"/> Union/Professional Dues Receipts |
|--|--|

PENSION INCOME

- | | |
|---|--|
| <input type="checkbox"/> T4A Slips – Pension, Retirement and Annuity Income | <input type="checkbox"/> T4RSP Slips – Registered Retirement Savings Plan Income (Including Withdrawals) |
| <input type="checkbox"/> T4A(OAS) Slips – Old Age Security | <input type="checkbox"/> T4RIF – Registered Retirement Income Fund |
| <input type="checkbox"/> T4A(P) Slips – Canada Pension | <input type="checkbox"/> Foreign Pension Income (Please provide details) |
| <input type="checkbox"/> T4A(RCA) Slips – Retirement Compensation Income | |

INVESTMENT INCOME/DEDUCTIONS

- | | |
|--|--|
| <input type="checkbox"/> T3 Slips – Estates/Trusts/Mutual Funds | <input type="checkbox"/> T5013/T5013A Slips – Partnership Income |
| <input type="checkbox"/> T4PS Slips – Income from Profit Sharing Plans | <input type="checkbox"/> Acquisition and/or Disposal of Capital Property (Shares, Bonds, Real Estate, etc.). Please provide Broker's Summaries and Year End Holdings where applicable. |
| <input type="checkbox"/> T5 Slips – Dividends/Interests/Capital Gains | |
| <input type="checkbox"/> T5008 Slips – Income from Securities Transactions | |

Note: Please provide a copy of your non-registered investment broker statement as of December 31, 2017. If you do not receive broker statements and it is convenient, please provide a summary of your investments as of December 31, 2017 by name, quantity held, acquisition date, disposal date, and cost paid.

SELF-EMPLOYMENT/BUSINESS/PROFESSIONAL/RENTAL INCOME

- Summary of Self-Employment Income and Expenses** (Including dates of acquisition and disposal of fixed assets, auto expense and vehicle kilometer log of total kilometers driven and kilometers driven for business, and, home office expenses and total square footage of home and space used for business) **(A worksheet to assist you with this is available. Please ask us.)**
- Summary of Rental Income and Expenses** (Including percentage of ownership, address(es) of rental properties, dates of acquisition and disposal of fixed assets, auto expenses and vehicle kilometer log of total kilometers driven and kilometers driven for business, and home office expenses and total square footage of home and space used for business) **(A worksheet to assist you with this is available. Please ask us.)**
- Are you GST Registrant? Would you like us to prepare and file your GST Return? Please provide a copy of the GST form with your GST Account number and GST Access Code.

Notes:

- **All Expenses should be backed up by receipts that can be presented to CRA in the event of an Audit.**

RRSP CONTRIBUTIONS AND OTHER CREDITS

- | | |
|--|--|
| <input type="checkbox"/> RRSP Contribution Slips | <input type="checkbox"/> Medical/Dental Receipts for yourself, spouse and dependents |
| <input type="checkbox"/> T2200 Declaration of Employment Conditions – For other employment expenses as well as home office and vehicle use, please provide details (A worksheet to assist you with this is available. Please ask us.) | <input type="checkbox"/> Receipts for Eligible Home Improvement Expenses for Seniors |
| <input type="checkbox"/> T2202 – Tuition for yourself, spouse and dependents | <input type="checkbox"/> Charitable/Political Donations Receipts |
| <input type="checkbox"/> Student Loan Interest Paid under the Canada Student Loan Act or provincial equivalent | <input type="checkbox"/> Public Transit Passes (January – June 2017) |
| | <input type="checkbox"/> First Time New Home Buyer Tax Credit |
| | <input type="checkbox"/> Eligible Educator School Supply Tax Credit |

FOR NEW CLIENTS

- Income Tax Installments paid for 2017, if applicable
- Please provide a copy of your 2016 Notice of Assessment and any Notice of Reassessment of other years, if received in 2017
- Please provide a copy of your 2016 Personal Tax Return
- Direct Deposit – Is your information current? If changed, please provide a VOID cheque or bank information.

ADDITIONAL INFORMATION/NOTES

Signature: _____

Date: _____