

T1 Personal Tax Return Year

To help you assemble your financial information for the preparation of your personal income tax return, please keep this checklist handy. The checklist should be completed and returned to us together with the financial information assembled.



Personal Contact

First Name: _____ Last Name: _____
 SIN Number: _____
 Date of Birth ____/____/____ MM / DD / YY
 Your Phone: _____
 Work Phone: _____
 E-Mail _____
 Address _____
 City _____
 Province/State _____ Postal Code _____
 Country _____
 Did you move in the year _____ ?

Spouse First Name: _____ Last Name: _____
 SIN Number: _____
 Date of Birth ____/____/____ MM / DD / YY
 Spouse Phone: _____
 Work Phone: _____
 E-Mail _____
 Address _____
 City _____
 Province/State _____ Postal Code _____
 Country _____

Marital Status: Married Common-Law Widowed Separated Divorced Single

Did your Marital Status change during the year? Yes No If Yes, Provide Date: ____/____/____ MM / DD / YY

Are we preparing a tax return for your spouse? Yes No

If we are NOT preparing a tax return for your spouse, please provide the following.

Universal Child Care Benefit from Line 117 on page 2 \$ _____

Income figure from Line 236 on page 3 \$ _____

List All dependants

Name	Relationship	Birthday MM/DD/Y Y	SIN #	Net Income During Year
_____	_____	____/____/____	_____	\$ _____
_____	_____	____/____/____	_____	\$ _____
_____	_____	____/____/____	_____	\$ _____
_____	_____	____/____/____	_____	\$ _____
_____	_____	____/____/____	_____	\$ _____

Do you or your spouse or any of your dependants qualify for the disability Tax Credit? _____ If Yes, Indicate whom _____



Other important matters (othrewise indicate we will assume the default response)

Did you receive CERB funds from the Government of Canada during COVID-19?	Yes	No
Do you own/hold foreign property with a total cost of more than CAN \$100,000?	Yes	No
Are you a Canadian Citizen?	Yes	No
Do you authorize CRA to provide information about you to Elections Canada?	Yes	No

(+) Have you made installment payments for the Tax year? Yes, No - If Yes, how much? \$ _____

Do you want your tax refund deposited directly to your bank account?

Yes (Attach a void cheque)

Direct deposit requested last year

No

If you have paid any rental expense and/or paid property taxes on your principal residence, please share with us details and we will claim ONBEN for you.

How do you want your tax return delievered once it has been completed by our staff? Check all that apply.

Electronic copy sent to my email above

Mail to my home address

Courier to my home address

Hold for pick-up

Other (please specify) _____

PLEASE PROVIDE A COPY OF YOUR NOTICE OF ASSESSMENT WITH THIS CHECKLIST & YOUE TAX RETURN FROM LAST YEAR.

Source of Income

(Check if you have any of the following sources of income and INCLUDE RECEIPTS in all cases.)

Source	Slips to attach
Employment income	T4
Commission income	T4 or T4A
Profit sharing income	T4PS
Taxable disability income	T4A
Old Age Security	T4(OAS)
Canada Pension Plan	T4AP
Other pensions/annuities	T4A
Universal Child Care Benefit	RC62
Employment Insurance benefits	T4E
Dividend income	T3 or T5
Interest income	T3 or T5
Limited partnership income	T5013
RRSP income	T4RSP
RRSP withdrawals	T4RSP
RRIF income	T4RIF
Scholarships & bursaries	T4A
Workers' Compansation benefits	T5007
Social assistance payments	T5007
Self-employed income	Summarize on page 3
Rental income	Summarize on page 4
Sale of investments	Summarize on page 4
Sale of real estate	Summarize on page 4
Spousal support received	\$ _____
Child support (taxable)	\$ _____
Tips & gratuities	\$ _____
Other _____	\$ _____
Other _____	\$ _____
Other _____	\$ _____
Other _____	\$ _____
Other _____	\$ _____

Deductions and Tax Credits Available

(Check if you have any of the following deductions and INCLUDE RECEIPTS in all cases.)

Source	Amount
RRSP contributions	
Union dues & professional fees	
Child care expenses	
Moving expenses	
Interest paid on investment loans	
Investment counseling fees	
Safety deposit box charges	
Children's Fitness amount	
Children's Arts amount	
Interest paid on student loans	
Tuition fees - Self T2202	
Tuition fees - Spouse/Children	
Charitable donations	
Political party contributions - Federal	
Political party contributions - Provincial	
First-time Home Buyer's amount	
Home Buyers Plan withdrawals/payments	
Lifelong Learning Plan withdrawals/payments	
Tax instalments paid to CRA	
Other _____	\$ _____

(Check if you have any of the following deductions and ensure that you have the receipts to support the following items. If unsure, attach receipts.)

Employment expenses	Summarize on page 3
Spousal support payments	\$ _____
Child support payments (ONLY if deductible)	\$ _____
Medical expenses	\$ _____
Other _____	\$ _____



Other Income and/or Deductions

If you have other income and/or deductions that are not listed above, please itemize below and attach supporting receipts.

Please tell us how many days you worked from home for COVID reasons? If you have high employment expenses to deduct, please send us a signed T2200 form along with supporting documents of your employment-related expenses.

Employment Expenses

Please include a signed T2200- Declaration of Employment Conditions from your employer.

Travel	\$ _____
Parking	\$ _____
Supplies (stationary, Other)	\$ _____
Telephone	\$ _____
Salaries paid to an assistant	\$ _____
Office Rent	\$ _____
Accounting & Legal (See * Below)	\$ _____
Advertising & Promotion (See * Below)	\$ _____
Meals & Entertainment (See * Below)	\$ _____
Rental of Office Equipment (See * Below)	\$ _____
Training (See * Below)	\$ _____
Vehicle Expenses	Summarized below
Home Office Expense	Summarized below

* Applies to commission employees only

Vehicle Expenses

Year, Make, & Model _____

Purchase/Sale Price \$ _____

Date of Purchase/Sale (See**Below) \$ _____

Date lease Began/Ended (See**Below) \$ _____

**If purchased, leased or sold in Year , include relevant agreements.

KMs driven for business purposes Year _____

Total KMs Driven Year _____

Expense

Fuel	\$ _____
Repairs & Maintenance	\$ _____
Insurance	\$ _____
Licensing & Registration Fees	\$ _____
Loan Intrest	\$ _____
Lease Payments	\$ _____
Car Washes	\$ _____
Parking	\$ _____
Other	\$ _____

Self-Employed Income & Expenses

Name of Business: _____

Types of Business: _____

Names of partners and % owned: _____%

SIN# of Partners: # _____

Revenue	\$ _____
Expense	\$ _____
Meals & Expense	\$ _____
Bad Debts	\$ _____
Insurance	\$ _____
Interest & Bank Charges	\$ _____
Licenses, dues, memberships & Subscriptions	\$ _____
Office Expense	\$ _____
Supplies	\$ _____
Legal, Accounting & Other Professional Fees	\$ _____
Rent	\$ _____
Repairs & Maintenance	\$ _____
Salaries	\$ _____
Travel	\$ _____
Telephone	\$ _____
Vehicle Expenses	Summarize Below
Equipment & Furniture Purchases	\$ _____
	\$ _____

GST Business Number _____

Do the above amounts including GST/HST? _____

Are we preparing your GST Return? _____ If Yes, attach return

Home Office (For Business & Employment)

% of home used for Business/Employment _____

Heat	\$ _____
Hydro	\$ _____
Water	\$ _____
Repairs & Maintenance	\$ _____
Insurance (See***Below)	\$ _____
Property Taxes (See***Below)	\$ _____
Rent	\$ _____
Mortgage Intrest (Self-Employed Only)	\$ _____

Applies to commission employees and self employed ONLY

Rental Property

Includes the Statement of Adjustmetns if purchased in Year _____

Address _____

City _____

Province/State _____ Postal Code _____

Country _____

Names of partners and % owned: _____%

SIN# of Partners: # _____

Rental Income \$ _____

Expense

Advertising \$ _____

Insurance \$ _____

Mortgage Intrest \$ _____

Office Expense \$ _____

Legal, Accoutning & Other professional Fees \$ _____

Management \$ Administration Fees \$ _____

Repairs & Maintenance \$ _____

Salaries, Wages & Benefits \$ _____

Property Taxes \$ _____

Travel \$ _____

Utilities \$ _____

Other: _____ \$ _____

Major Renovations & Purchases (i.e: Appliances) \$ _____

_____ \$ _____

_____ \$ _____

Sale of Real Estate

Includes the Statement of Adjustmetns for BOTH the sale and purchase.

Address _____

City _____

Province/State _____

Country _____

Names of partners and % owned: _____%

SIN# of Partners: # _____

Date Purchased: _____

Purchase Price : _____

Property Transfer Tax \$ _____

Legal costs paid on purchase \$ _____

Additions and/or major improvements _____

_____ \$ _____

_____ \$ _____

Date Sold _____

Sale Price \$ _____

Legal costs paid on sale \$ _____

Commission paid on sale \$ _____

Other \$ _____

Other \$ _____

Sale Of Investments (Not including investments held in your RRSP or other registered plans)

Include the following documents for ALL NON-RRSP or NON-Registered plans:

Dec 31st year end statements

Realized gain/loss report from broker

Brokers statement for both purchase and sale (only if realized gain/loss report is not available)

Name of Stock	Date of purchase MM / DD / YY	Date of Sale MM / DD / YY	US\$	# Shares Sold	Sale Proceeds \$	Commissions \$	Cost of Shares \$
_____	____/____/____	____/____/____	_____	_____	_____	_____	_____
_____	____/____/____	____/____/____	_____	_____	_____	_____	_____
_____	____/____/____	____/____/____	_____	_____	_____	_____	_____
_____	____/____/____	____/____/____	_____	_____	_____	_____	_____
_____	____/____/____	____/____/____	_____	_____	_____	_____	_____
_____	____/____/____	____/____/____	_____	_____	_____	_____	_____
_____	____/____/____	____/____/____	_____	_____	_____	_____	_____
_____	____/____/____	____/____/____	_____	_____	_____	_____	_____
_____	____/____/____	____/____/____	_____	_____	_____	_____	_____
_____	____/____/____	____/____/____	_____	_____	_____	_____	_____
_____	____/____/____	____/____/____	_____	_____	_____	_____	_____
_____	____/____/____	____/____/____	_____	_____	_____	_____	_____
_____	____/____/____	____/____/____	_____	_____	_____	_____	_____
_____	____/____/____	____/____/____	_____	_____	_____	_____	_____



1. Have you contributed more than your TFSA Limit? Yes No

Note:

1. Please make sure that you don't over-contribute in your TFSA account.
2. Please don't contribute to your TFSA account if you are a non-resident or you have declared your residency status as a non-resident. If you continue contributing to your TFSA account being a non-resident of Canada, you will be charged heavy penalties from the CRA. It is recommended that all non-residents must withdraw all amount from TFSA account and close the TFSA account before filing personal taxes.



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