**This information is used in the completion of your tax return. Please take the time to read and complete this form. If there is not sufficient space for all of your responses, please use a separate page.**

Name: Spouse:

|  |  |  |
| --- | --- | --- |
| **Yes** | **No** | **Personal Information** |
|  |  | Do we have your correct address, telephone number(s), email addresses, including your dependents? |
|  |  | Did your marital status change over the past year? |
|  |  | Did you make installment payments over the past year? If yes provide the final statement(s) |
|  |  | Have you provided us with your banking information for direct deposit? |
|  |  | Are we preparing your spouse's return? If no, please provide us with a copy of their return. |
|  |  | Do we have all of your dependents names, dates of birth, and social insurance numbers? |
|  |  | Are you and all family members, Canadian Citizens? U.S. Citizens? |
|  |  | Do you authorize CRA to provide certain information to Elections Canada? |
|  |  | Did you or any dependents pay property tax? If yes, provide a copy of your property tax bill. |
|  |  | Did you or any dependents pay rent?    paid annual rent of $ to\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *Name Annual Amount Name of Landlord*  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *Address of Rental Unit* |

Complete this section, **only if there are corrections, changes or you are adding new tax payers**

Name: Address

Telephone: Email:

Marital Status: □ Married, □ Separated, □ Divorced, □ Widowed, □ Common Law, Date of Change:

New Banking Information: Branch Number Institution Number Acct Number:

*5 Digits 3 Digits Maximum 12 digits*

| **Yes** | **No** |  |
| --- | --- | --- |
|  |  | Do you wish to pension split with your spouse? If yes, please both initial here: |
|  |  | At any time in the previous year, did you hold foreign property worth more than $100,000.00 (Cdn)? This includes foreign trusts, foreign investments and foreign bank accounts including in the USA. |
|  |  | Have you provided all of your "T" slips, including T4, T4A, T4A(P), T4AOS, T4RIF, T3, T5, T5013, etc?  *You should have received most of your slips and receipts by the end of February; however, T3, T5013, and T5013A slips do not have to be sent before the end of March.* |
|  |  | If you have investment income, have you provided us with the annual summaries from all of your brokers that shows the capital gains and losses, interest paid, etc., and the annual investment fees? |
|  |  | Have you provided all of your foreign income? |
|  |  | Do you have rental income? If yes, please complete our rental income and expense form. |
|  |  | Have you advised us of all of your income, including any worldwide income (even if you file taxes in another county) |
|  |  | Are you self employed? If yes, please complete our business income and expense form |
|  |  | Do you use your vehicle for business, if yes please complete a vehicle expense form. Please note that you must keep records of your expenses and mileage; although we don't require the records to complete your taxes. |
|  |  | Did your company require you to use your own vehicle, provide your own supplies, work from home? If yes, please ask your employer to provide you with a Form T2200 – Declaration of Conditions of Employment. We will need a copy of this form. |
|  |  | Did you pay or receive spousal support imposed by court order or written agreement? If yes, what was the annual amount: $ □ Paid □ Received |

|  |  |  |
| --- | --- | --- |
|  |  | Did you pay or receive child support imposed by court order or written agreement? If yes, what was the annual amount: $ ? □ Paid □ Received Was the court order issued prior to 1997? □ Yes □ No |
|  |  | Did you receive a Universal Child Care Benefit? If yes, provide RC62 |
|  |  | Did you make payments to an RRSP, please provide receipts. |
|  |  | Do you have a Tax-Free Savings Account (TFSA)? |
|  |  | Did you make renovations to your home to create a safer and more accessible environment for yourself (65+) or any others residing in your home? If yes, please provide an itemized list of renovations and the receipts. Please be specific about the renovation (i.e. non-slip flooring, shower grab bars, automatic garage door openers, etc.) |

* **Medical Expenses** If you have additional medical insurance (Not OHIP), including out-of-country (Travel Health Insurance), please provide an annual summary of claims and payments made by the insurance company during the year. This document is available on-line if you have an on-line account or by notifying your insurance company that you need a copy of this summary. If you pay out of pocket for medical insurance please indicate the annual premium $

If you are providing drug, dental or other medical procedures receipts, please ask your pharmacist, dentist, optician, etc. to provide an annual summary of your prescriptions, or procedures. Some procedures and over-the-counter drugs are no longer deductible. We check your receipts to ensure they are tax deductible.

* **Post Secondary School** Did you, your spouse or any of your children pay tuition? To obtain the receipt (T2202a), you must go online to your university/college website and log into your account to download your tuition receipt. If you made payments on your student loans, please include the amount of interest paid on the loan.
* **Transit Tax Credit** Please provide the bus passes. If you use a Presto card, please provide a Transit Usage report that is available online.
* **Charitable or Political donations**  To claim a deduction for charitable or political donations, please provide your receipts.
* **Children/Dependants** If you are claiming dependants, please provide the following information for each child.
  + - Name:
    - Date of Birth S.I.N.
    - Name:
    - Date of Birth S.I.N.
  + To claim childcare expenses, you must provide a receipt with the caregiver's name, social insurance number (if applicable) and address.
  + To claim fitness or arts credits, you must provide receipts that contain the following information. ($1000.00 max)
    - Organization's name and address, child's full name and date of birth, full name of the payer, name of the eligible program or activity, total amount paid, eligible amount paid and the date of the payment.
* How many days have you, your spouse or dependents spent in the U.S. over the past three years?

If you require forms (vehicle expenses, rental income and expenses, small business income and expenses, etc.) that we have not included in this package, please contact our office and we will mail/email them out to you.

Everyone is required to make their final payment for their 2015 income taxes by April 30, 2016. If you do not pay by this date, and/or did not make the proper installments as required in 2015, you will incur interest and/or penalties.

**If you are going to be away during the last two weeks of April, please advise my office as soon as possible.**