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Name: _____ Spouse: _____

Did you sell your home in 2017? Please provide the year of acquisition and the proceeds of the sale.

<input type="checkbox"/> Did you earn any type of income in 2017?	Provide all your "T" slips
<input type="checkbox"/> Did you earn income in 2017 That wasn't reported on a "T" slip?	Provide Details
<input type="checkbox"/> Did you make tax installments in 2017?	Provide Your final statement from CRA.
<input type="checkbox"/> Did you have investment income in 2017?	Provide the Complete Annual Tax Package From Your Bank or Investment Broker.
<input type="checkbox"/> Did you earn Foreign income in 2017?	Provide details and, if applicable, a copy of your foreign tax return.
<input type="checkbox"/> <u>At anytime in 2017</u> , did you hold foreign property totalling more than \$100,000.00 (Canadian). This includes foreign rental properties, trusts, investments and foreign bank accounts.	Provide the Complete Annual Tax Package From Your Bank or Investment Broker or details of the holdings.
<input type="checkbox"/> Did you contribute to your RRSP?	Provide Receipts
<input type="checkbox"/> Do you have a Tax-Free Savings Account?	Amount contributed in 2017:
<input type="checkbox"/> Do you wish to Pension Split with your spouse if it proves to be a tax advantage?	Both spouses initial here:
<input type="checkbox"/> Did you pay or receive Spousal and Child Support imposed by a court or written order?	Ensure we have a copy of the order. Amount paid/received in 2017:
<input type="checkbox"/> Were you a first-time homebuyer in 2017?	Provide the purchase documents as well as all related purchase expenses.
<input type="checkbox"/> Did you sell your principle residence in 2017?	
<input type="checkbox"/> Did you make charitable contributions?	Provide Receipts
<input type="checkbox"/> Did you have out-of-pocket medical expenses, such as; travel medical insurance premiums and other Non-OHIP medical insurance premiums, eye exams, eye glasses or contacts, dental and other medical procedures?	Provide Receipts. Your pharmacist can provide you with an annual printout for prescription costs.
<input type="checkbox"/> Did you pay property tax?	Provide Receipts
<input type="checkbox"/> Did you pay rent?	Provide annual rent, name and address of landlord, and the address of the rental unit.
<input type="checkbox"/> Are you a senior (65+) and use public transportation	Provide Receipts
<input type="checkbox"/> Did you have rental income	Please complete our Rental Income and Expense Form.
<input type="checkbox"/> Were you Self-Employed?	Please ask us for a Self-Employed Forms package or provide an electronic version of your bookkeeping.
<input type="checkbox"/> Did your employer require you to use your own vehicle, have a home office, or purchase your own supplies for work purposes?	Provide a Form T2200 "Declarations or conditions of Employment" completed by your Employer.
<input type="checkbox"/> Do you use public transportation to or from work or school?	Please "Presto" annual printout, your receipts or your paper passes.
<input type="checkbox"/> Did you pay tuition to a post-secondary institution?	Log-in to your online college/university account and print out Form T2202A. If your tuition covers mandatory public transportation, provide the value of the pass.
<input type="checkbox"/> Did you make payments on your student loan?	Provide "Interest Paid" Receipts

