

**NEW CLIENT  
 2016 PERSONAL INCOME TAX RETURN CHECKLIST**

Name: \_\_\_\_\_  
 S.I.N.: \_\_\_\_\_  
 Current address: \_\_\_\_\_  
 City and postal code: \_\_\_\_\_  
 Email address: \_\_\_\_\_  
 Birthdate: \_\_\_\_\_  
 Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_  
 Marital Status: Married \_\_\_ Divorced \_\_\_ Separated \_\_\_ Common-law \_\_\_

If your marital status has changed during 2016, the date of change \_\_\_\_\_

**A. FAMILY PROFILE**

**PLEASE COMPLETE THIS SECTION**

**SPOUSE/PARTNER**

Name \_\_\_\_\_  
 Birthdate \_\_\_\_\_  
 S.I.N. \_\_\_\_\_  
 2016 income \_\_\_\_\_

**CHILDREN**

	<u>1.</u>	<u>2.</u>	<u>3.</u>	<u>4.</u>
Name	_____	_____	_____	_____
Birthdate	_____	_____	_____	_____
2016 income	_____	_____	_____	_____
Infirmity (Yes or No)	_____	_____	_____	_____
Separate Return (Yes or No)	_____	_____	_____	_____

**OTHER DEPENDANTS**

	<u>1.</u>	<u>2.</u>	<u>3.</u>	<u>4.</u>
Name	_____	_____	_____	_____
Birthdate	_____	_____	_____	_____
2016 income	_____	_____	_____	_____
Infirmity (Yes or No)	_____	_____	_____	_____
Relationship to you	_____	_____	_____	_____

**B. INCOME**

**DID YOU RECEIVE ANY OF THE FOLLOWING TYPES OF INCOME IN 2016?**

	<u>YES</u>	<u>NO</u>	<u>INFORMATION SLIP(S)</u>
1. Salary/wages (Include commissions)	___	___	T4, T4A
2. Interest/dividends	___	___	T5, T4PS, T3, T600
3. Rental income	___	___	Details of revenue and expenses
4. Limited partnership	___	___	T5013, details
5. Income from: Self-employment	___	___	Financial statements or details of revenue and expenses
Partnership	___	___	
Farming	___	___	
Fishing	___	___	
6. Director/management fees	___	___	T4A
7. Pension income: C.P.P.	___	___	T4A(P)
O.A.S.	___	___	T4A(OAS)
R.P.P.	___	___	T4A or other
R.R.I.F.	___	___	T4(RIF)
Annuities	___	___	Various
Foreign	___	___	Details
8. Estate/trust/mutual fund	___	___	T3
9. E.I. benefits	___	___	T4E
10. Research grants/ scholarships/bursaries/ fellowships	___	___	T4A, details
11. Income from: R.R.S.P.	___	___	T4(RSP)
I.A.A.C.	___	___	
D.P.S.P.	___	___	T4(PS)
R.E.S.P.	___	___	T4(RESP)
R.R.I.F.	___	___	T4(RIF)
12. Alimony/maintenance	___	___	Separation agreement

**C. SALES**

**DID YOU SELL ANY OF THE FOLLOWING TYPES OF PROPERTIES IN 2016?**

	<u>YES</u>	<u>NO</u>	<u>DATE OF SALE(S)</u>	<u>INFORMATION</u>
				Details required:
1. Real estate (including principal residence)	___	___	_____	- Selling cost/statement of adjustments, etc.
2. Stock/ bonds/etc.	___	___	_____	- Original cost and selling costs (annual trading summaries)
3. Other	___	___	_____	

**Elections Canada** (This information can be used only for electoral purposes)

Are you a Canadian Citizen? Yes \_\_\_ No \_\_\_

If you are a Canadian Citizen, do you agree to the Canada Revenue Agency providing, over the next 12 months, your name, address, and date of birth to Elections Canada to keep your information current on the National Register of Electors?

Yes \_\_\_ No \_\_\_

**Specified Foreign Property**

Did you own or hold foreign property (including stocks, bonds, real estate) **at any time** in 2016 with a total cost of more than CAN\$100,000?

Yes \_\_\_

No \_\_\_

**D. DEDUCTIONS**

**DID YOU MAKE ANY OF THE FOLLOWING TYPES OF PAYMENTS IN 2016?**

	<u>YES</u>	<u>NO</u>	<u>INFORMATION SLIP(S)</u>
1. Investment expenses:			
Interest	___	___	Details and receipts
Management fees	___	___	Details and receipts
Accounting fees	___	___	Details and receipts
Investment counsel fees	___	___	Details and receipts
2. R.R.S.P.:			
- Contribution	___	___	Official receipt
- Repayment of home buyer's plan	___	___	Official receipt
3. Union dues	___	___	Receipt
4. Professional fees	___	___	Receipt
5. Tuition fees:			
Self	___	___	T2202, T2202A
Dependent	___	___	T2202(A) signed by dependent
6. Moving expenses	___	___	Original receipts/old location & New location of residence and Old location & new location of place of work
7. Employment expenses:			
Travel	___	___	T2200(signed by employer) Receipts
Entertainment	___	___	as above
Other	___	___	as above
8. Alimony/maintenance	___	___	Copy of separation agreement
9. Child care expenses	___	___	Payee/S.I.N./amount
10. Political contribution	___	___	Official receipt(s)
11. Charitable donation	___	___	Official receipt(s)
12. Medical expenses	___	___	Receipts
13. Tax instalments	___	___	Statement of account