



NEWMAN ACCOUNTING

PROFESSIONAL CORPORATION

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Personal Tax Information

Name _____ Taxation Year _____
 Address _____ SIN _____
 _____ Birth date _____
 _____ Telephone _____
 Email _____ Cell _____

Province of residence at December 31st _____

Self-employed (use checklist) Y / N Province of self-employment _____

If you became or ceased to be a Canadian resident in the tax year:

Date of entry into Canada _____ Date of departure from Canada _____

Status at December 31st:

Single Married Common-law
 Separated Divorced Widowed

If status changed during the tax year, enter date of change _____

Deceased Date deceased _____

Spouse information:

Name _____
 SIN _____
 Birth date _____
 Telephone _____
 Net income \$ _____
(Provide income if we are NOT preparing spouse's tax return)

Dependents - children / elderly parents / grandparents :

Name _____ Birth date _____ Relationship / SIN _____ Income _____
 Name _____ Birth date _____ Relationship / SIN _____ Income _____
 Name _____ Birth date _____ Relationship / SIN _____ Income _____
 Name _____ Birth date _____ Relationship / SIN _____ Income _____

Disability:

Are you or any of your dependents have a disability? _____
 Has a T2201 (Disability Tax Credit Certificate) been filed? _____

Personal Tax Information

- Are you a Canadian citizen? Y / N
- Did you own property outside of Canada over \$100,000? Y / N
- Is your child transferring post-secondary tuition amount to you? Y / N
If yes, please provide copy of signed T2202A slip
- Did you make tax installment payments during the year? How much? \$ _____ Y / N
- Did you participate in the Home Buyers Plan? Date _____ Amount \$ _____ Y / N
- Did you participate in the Lifelong Learning Plan? Amount \$ _____ Y / N
- Are you including your last year's Notice of Assessment? Y / N
- New clients - are you including your last year tax return and schedules? Y / N

Income

Personal	Investment
<input type="checkbox"/> T4 - Employment income	<input type="checkbox"/> T5/T3 – Interest and Dividend income
<input type="checkbox"/> Tips and gratuities	<input type="checkbox"/> T600 – Canada Savings Bonds
<input type="checkbox"/> T4A (OAS) – Old Age Security benefits	<input type="checkbox"/> T5008 – Statement of Security Transactions
<input type="checkbox"/> T4A (P) – Canada Pension Plan benefits	<input type="checkbox"/> T5013 – Limited Partnership income
<input type="checkbox"/> T4A – Pension and other income	<input type="checkbox"/> Rental income and expenses (use checklist)
<input type="checkbox"/> T4E – Employment Insurance benefits	<input type="checkbox"/> Capital gains or losses (stocks, bonds, mutual funds, etc.) <small>(Brokers statements / trading slips including cost and sale details)</small>
<input type="checkbox"/> T5007 – WCB or Social Assistance benefits	<input type="checkbox"/> Disposition of real estate (cost and proceeds of sale)
<input type="checkbox"/> T4 RSP – RRSP income	<input type="checkbox"/> Borrow money to earn investment income
<input type="checkbox"/> T4 RIF – RIF income	<input type="checkbox"/> Foreign interest or dividends
<input type="checkbox"/> RC 62 – Universal Child Care benefit	<input type="checkbox"/> Royalty or other investment income
<input type="checkbox"/> T3 – Mutual Fund and Other Trusts	
Other	
<input type="checkbox"/> Business income and expenses (use checklist)	<input type="checkbox"/> RRSP withdrawals
<input type="checkbox"/> Alimony received (include name & SIN of payer)	<input type="checkbox"/> Scholarships / bursaries
<input type="checkbox"/> Taxable child support (include name & SIN of payer)	<input type="checkbox"/> Foreign income and taxes paid

Deductions & Tax Credits

<input type="checkbox"/> RRSP contribution receipts	<input type="checkbox"/> Deductible legal fees
<input type="checkbox"/> Union or professional association dues	<input type="checkbox"/> Childcare receipts (includes pre-school fees)
<input type="checkbox"/> Alimony paid (include name & SIN of recipient)	<input type="checkbox"/> Eligible moving expenses
<input type="checkbox"/> Deductible child support paid (include name & SIN)	<input type="checkbox"/> Allowable business investment losses
<input type="checkbox"/> Safety deposit box charges	<input type="checkbox"/> Capital loss carry forwards
<input type="checkbox"/> Interest paid on monies borrowed for investments	<input type="checkbox"/> Non-capital loss carry forwards
<input type="checkbox"/> Investment counsel and accounting fees	<input type="checkbox"/> Limited partnership losses of other years
<input type="checkbox"/> Employment expenses (use checklist - T2200 required)	<input type="checkbox"/> Employment insurance benefit repayments
<input type="checkbox"/> T2201 – Disability Deduction	<input type="checkbox"/> Medical/dental/optical expenses (unreimbursed amount)
<input type="checkbox"/> T2202 – Tuition Fees / Education Credit	<input type="checkbox"/> Premiums paid to private medical insurance plans
<input type="checkbox"/> T2202 – Tuition Fees transfer from child (form signed)	<input type="checkbox"/> Adoption expenses
<input type="checkbox"/> Tuition fees over \$100 paid (post secondary)	<input type="checkbox"/> Attendant care expenses
<input type="checkbox"/> Interest paid on student loans	<input type="checkbox"/> Donations to registered charities
<input type="checkbox"/> Monthly public transit passes	<input type="checkbox"/> Political contribution receipts
<input type="checkbox"/> Children's arts / fitness receipts (\$500 max per child)	<input type="checkbox"/> Parent(s) over 65 or infirm relative live with you

Commission Employees

Do you have a signed Form T2200 - Declaration of Conditions of Employment → use the Employment Expenses checklist

Is there an amount in Box 42 of your T4 slip Y / N

Did you under your contract of employment have to pay for your own expenses. Y / N

Did you receive an allowance for the expenses? Amount \$ _____ Y / N

If so, is this allowance that was received included in your income? Y / N

You **cannot** deduct the cost of travel to and from work, or other expenses, such as most tools and clothing.

Allowable Expenses for Qualifying Employees

<input type="checkbox"/> Accounting and legal	<input type="checkbox"/> Annual license fees
<input type="checkbox"/> Advertising, promotion, gifts	<input type="checkbox"/> Lease costs (computers, cell phones, fax machines)
<input type="checkbox"/> Food & beverages (away for over 12 consecutive hrs)	<input type="checkbox"/> Training costs
<input type="checkbox"/> Entertainment	<input type="checkbox"/> Travel & lodging costs

Employed Tradesperson & Other

Cost of eligible tools bought in the year

<input type="checkbox"/> Apprentice mechanic tools expense
<input type="checkbox"/> Tradespersons' tools expenses

Tradesperson must spend over \$1000

Other eligible expenses

<input type="checkbox"/> Musical instrument expenses
<input type="checkbox"/> Artists' employment expenses

Other Information

Allow CRA to provide your name, address and date of birth to Elections Canada? Y / N

Are you a 1st time tax return filer? Y / N

Would you like to direct deposit your tax refund, GST credit and/or child tax benefit? Y / N

If YES, please attach VOID cheque

Has direct deposit information previously been supplied to CRA Y / N

Do you agree to income splitting your pensions with your spouse? Y / N

Has your last name changed? Y / N

Did you reside on Tilcho lands (NT) during the year? Y / N

Do you have foreign citizenship? Which country? _____ Y / N

Efile your personal tax return? Y / N

Please note, no items will be included onto your tax return without the proper documentation. In the event of an audit, the onus of proof is on the taxpayer; unsupported claims may be denied.

Signature: _____ Date: _____