**Personal Income Tax Questionnaire**

We have compiled the following list of questions in order to assist us in preparing your personal tax return. Please read and carefully answer each question below:

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | Please provide us with the most up to date information as listed below:  a. Full legal name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
|  | b. SIN: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
|  | c. Gender: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
|  | d. Mailing address: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
|  | e. Date of birth: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
|  | f. Email address: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
|  | g. Home phone #: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
|  | 1. Cell/work phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. Preferred method of contact: home phone cell/work phone email | | |
| 2. | Would you like your information provided to **Elections Canada**? Yes No | | |
| 3. | Did you own **foreign property** at any time in the year with a total combined original cost of more than $100,000? Yes No  If yes, please provide details \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *This can include cash held outside Canada, stocks, trusts, partnerships, real estate, tangible and intangible property, contingent interests, convertible property, etc.* | | |
| 4. | At December 31st of the current tax  Single | | year, were you:  Separated |
|  | Common law | | Divorced |
|  | Married | | Widowed |
|  | Was this the same status as you reported on your prior year tax return? Yes No  If no, what was the date of the change? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  If you are married or common law and we are **not** preparing your spouse’s tax return, please provide:   1. Spouse’s full legal name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. Spouse’s date of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3. Spouse’s SIN #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 4. Spouse’s Gender: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 5. Spouse’s taxable income for the current tax year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   *You are considered common law if you meet one of the following conditions: have been living together for at least 12 continuous months OR are living together and have a child together or have custody of a child together.* | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 5. | Do you have any **children under the age of 18** that live with you? Yes No If yes, please fill out their details in the chart below:   |  |  |  |  |  | | --- | --- | --- | --- | --- | | First name |  |  |  |  | | Last name |  |  |  |  | | Gender |  |  |  |  | | SIN |  |  |  |  | | Date of birth |  |  |  |  | | Is the dependant disabled or infirm? |  |  |  |  | | Was the dependent in child care during the year? |  |  |  |  | | Child care provider name or company? |  |  |  |  | | If child care provider is an individual, please provide SIN |  |  |  |  | | Number of weeks child care was provided during the year? |  |  |  |  | | Total child care cost |  |  |  |  | | Universal Child Care Benefit received for children under 6?  *(Please include RC62)* |  |  |  |  |   *If you are unsure of what can be claimed for child care please visit the following link, http://www.craarc.gc.ca/tx/ndvdls/tpcs/ncm-tx/rtrn/cmpltng/ddctns/lns206-236/214* |
| 6. | Please answer all the questions below. For those you answer yes, please provide us with the slips or details so we may record it appropriately.   1. Have you included all **information slips**? Yes No   *This includes T3, T4, T4A, T4A(OAS), T4A(P), T4E, T4PS, T4RIF, T4RSP, T5, T5013, and RC62. Note this is a list of common tax slips and does not include all possible slips. Some may not apply.*   1. Did you make any **RRSP** contributions for the current tax year? Yes No *Please note that the official slip is required to claim.* 2. Did you make any **charitable or political donations** in the year? Yes No   *To claim charitable donation, please provide the official donation receipt which must contain the following information: indicates “this is an official receipt for income tax purposes”, the name and address of charity, the date of the donation, the charity’s registration number (should end in RR0001) and the amount of the donation. To claim political donation, please provide the official receipt from the political organization.* |

|  |  |  |
| --- | --- | --- |
|  | Ě͘ | Were your dependent children involved in any extracurricular programs that may qualify for the **child fitness and art tax credits**? Yes No  *Please provide us with**receipts. This includes amounts paid for programs of physical, artistic, cultural, recreational or developmental activities for children under* ***age 16*** *at any time during the year (under*  *18 for children with disabilities). If you are unsure as to what can be claimed please visit the following links: http://www.cra-arc.gc.ca/fitness/* |
|  | Ğ͘ | Are there **medica**l expenses you have paid in the year for you or a dependent? Yes No  *Please provide us with receipts or if possible a summary of expenses paid in the year. If you are* [*unsure of what expenses are eligible please visit the following link: http://www.cra-arc.gc.ca/nwsrm/ txtps/2016/tfsk26-eng.html*](http://www.cra-arc.gc.ca/nwsrm/txtps/2016/tfsk26-eng.html) |
|  | Ĩ͘ | Did you purchase any **public transit** passes for you or your dependents? Yes No *Please provide us with the receipts/passes or a summary of amounts paid during the year.*  *Note that this only applies to monthly/annual passes; individual tickets are not eligible.* |
|  | Ő͘ | Did you pay or receive any **alimony and/or spousal support**? Yes No  *Please provide us with the total amount paid or received during the year. Please note that child support/maintenance does not apply.* |
|  | Ś͘ | Did you or any of your dependants attend a post **secondary institution**? Yes No  *Please provide the T2202, T2202A or T11A issued by the educational institution. Many educational institutions no longer mail out these slips but require you to go online and print them off. If you would like to* ***transfer*** *any education amounts to a spouse or parent please ensure the transferor (student) signs the transfer section on the back of the T2202A that is provided to us. Please note that grade school receipts are not eligible and textbook receipts are not required.* |
|  | ŝ͘ | Did you pay any **union/professional dues** that are not reported on your T4? Yes No  *Please provide us with your receipts or a summary of dues paid. If you are unsure of what union/ professional dues are deductible please visit the following link, http://www.craarc.gc.ca/tx/ndvdls/tpcs/ncm-tx/rtrn/cmpltng/ddctns/lns206-236/212* |
|  | ũ͘ | Did you pay any **student loan interest**? Yes No  *Please include the official tax receipt forms provided by the provincial and/or federal loan programs.*  *Interest on student line of credits and other such loans do not apply.* |
| 7. | Have you **moved** in the current year and do you meet the criteria described below?  Yes No  *In order to qualify to deduct moving expenses you are required to have moved a minimum of 40km to move closer to your place of employment, to start new employment, to start a new business, or to attend a post secondary educational institution.*  *If yes, please complete the “****Moving Expense Summary***”. | |

|  |
| --- |
| Yes No  If yes, did you pay any investment management fees? Yes No  Total amount of management fees paid in the year including GST \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  b. If yes, did you dispose of any holdings in the current tax year? Yes No |
| 9. Did you sell any real estate or other investment assets in the year    i. Year of purchase: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ii. Purchase price: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  iii. Proceeds of sale: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ iv. Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 10.  *property in the year please provide us with all the purchase details.* |
| 11. Do you have self employment income (not earned in a corporation)? Yes No  *If yes, please complete the* ***"Self-Employed Business Summary"*** *and answer the questions below:*  a. Are you a GST registrant? Yes No  If yes, would you like us to prepare and file your GST return? Yes No  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *http://www.cra-arc.gc.ca/selfemployed/* |
| 12. If you or your spouse received **pension income,**  refund or payable as a couple by splitting your pension income? Yes No |

|  |
| --- |
| 13. Do you or any of your dependents have a disability? Yes No  *Please provide Form T2201 - disability tax credit certificate completed by your doctor if you have not* *previously provided it to us. If you are unsure if you or your dependent qualifies please visit the following* *link: http://www.cra-arc.gc.ca/E/pbg/tf/t2201/README.html*  *If yes, have you incurred renovations to your dwelling to ehance mobility or reduce risk of harm for an* *individual who is either eligible for the Disability Tax Credit or 65 years of age or older?* *If yes,* *you may* *be may be eligible for the Home Accessibility Tax Credit. Please provide details of the* *renovations* *including type of renovation and amount paid.* |
| 14. Are you a **first-time home buyer** in 2016? Yes No  If yes, please provide the purchase date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *A tax credit based on $5,000 (@15% = $750) is available for qualifying homes acquired after January 27, 2009.* |
| 15. Are you a U.S. citizen, Green Card Holder, citizen of any other country or were you, or your parents born in the United States? Yes No  *If yes, you may have other filing obligations and should contact us for more information.* |
| 16. Are you eligible to claim **employment expenses?** Yes No  *Please provide us with a completed and signed T2200 from your employer and fill out the* ***“Employment* *Expense Summary”****.* |
| 17. Are you a teacher or early childhood educator? Yes No  *Please provide any receipts (up to $1000) for eligible school supplies purchased to be used or consumed in the school or regulated child care facility. Examples are construction paper, art supplies, durable goods such as games, puzzles, books, educational software ect. In addition, please provide certification from your employer attesting to the eligible supplies expense.* |
| 18. Have you spent 200 hours acting as a volunteer firefighter or a search and rescue volunteer? Yes No  *You may be eligible for a federal tax credit.* |
| 19. Have you provided us with a copy of your previous personal tax return (if prepared by someone other than us), and Notice of Assessment and any other correspondence from  Canada Revenue Agency (CRA)? Yes No  *If your return was prepared by someone other than us please include your prior year invoice so we may review for deductibility on your current year return.* |
| 20. Have you signed the following documents:  T183 – Consent for us to electronically file your return  Engagement letter  T1013 – Authorization for us to deal with CRA on your behalf **(only for new clients)** |
| 21. In what form would you like your tax return provided to you?  Paper  Electronic copy on USB card |

|  |
| --- |
| **To the best of my knowledge the above information is accurate and complete.**  **Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| How would you like your tax return and records:  Held for pickup (please bring debit, credit card or cheque with you to clear invoice at pickup)  Mailed  Please provide credit card information for invoice:  Type of card: Visa Mastercard  Credit Card Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Expiry date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name on Card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  I authorize Accounting Expertise to charge my credit card for my current year personal tax services invoice.  Signature for Credit Card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Direct Deposit**  CRA is phasing out providing refunds by cheque. If you are not set up for direct deposit with CRA, please complete the information below:  Branch #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (5 digits)  Institution #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (3 digits)  Account #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (9-12 digits)  Name on Account: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |