

Personal Tax Return Checklist



Personal Information:

	Name	SIN			Date of Birth
Taxpayer					
Spouse					
Address		New address?	Y	N	
Phone	Home:	Cell:	Work:	Email:	

Marital Status Single Married Common-Law Separated Divorced Widowed

Change of status in year? _____ If Yes - Date: _____ Did spouse file own T1? _____ Line 236 _____

Dependents:

Name	Relationship	Claim Child Amount	Date of Birth	SIN	Disability Amount	Tuition Tsf	Net Income
		Y / N					
		Y / N					
		Y / N					

If single and child is living with you - Claim as eligible dependent?	Y-Yes	Y-No	S-Yes	S-No
Is child living with different parents through the year?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Copy of custody agreement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you have infirm family member or other infirm dependents living with you? (Family Caregiver Tax Credit)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Are you a Canadian Citizen?	Y-Yes	Y-No	S-Yes	S-No
If so, update your name and address for Elections Canada?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did you/your spouse own/hold foreign property with an aggregate cost of \$100,000 CDN or more at any time in the year?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you interested in pension splitting?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Income reported on tax slips:

	You	Spouse		You	Spouse
T3	<input type="checkbox"/>	<input type="checkbox"/>	T4PS/WCB/T5007, etc.	<input type="checkbox"/>	<input type="checkbox"/>
T4	<input type="checkbox"/>	<input type="checkbox"/>	T5	<input type="checkbox"/>	<input type="checkbox"/>
T4A	<input type="checkbox"/>	<input type="checkbox"/>	T5013	<input type="checkbox"/>	<input type="checkbox"/>
T4A(P)	<input type="checkbox"/>	<input type="checkbox"/>	RC62 UCCB	<input type="checkbox"/>	<input type="checkbox"/>
T4A(OAS)	<input type="checkbox"/>	<input type="checkbox"/>	Apprenticeship Incentive Grant	<input type="checkbox"/>	<input type="checkbox"/>
T4RSP	<input type="checkbox"/>	<input type="checkbox"/>	US Social Security	<input type="checkbox"/>	<input type="checkbox"/>
T4RIF	<input type="checkbox"/>	<input type="checkbox"/>	Foreign pension	<input type="checkbox"/>	<input type="checkbox"/>

Year started _____
Country _____ Amount _____

Other income:

	You	Spouse		You	Spouse
Disposition of Capital Property	<input type="checkbox"/>	<input type="checkbox"/>	Business income - Schedule I	<input type="checkbox"/>	<input type="checkbox"/>
Mutual Funds*	<input type="checkbox"/>	<input type="checkbox"/>	Rentals - Scedule III	<input type="checkbox"/>	<input type="checkbox"/>
Stocks/T5008*	<input type="checkbox"/>	<input type="checkbox"/>	Farm income	<input type="checkbox"/>	<input type="checkbox"/>
Real Estate	<input type="checkbox"/>	<input type="checkbox"/>	Others (Tbills/ private loans)	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>			

Re: Disposition of Capital Property - Tax slips are NOT issued for Capital Property Transactions. Documentation required from taxpayers Include:

<p>For Securities or Mutual Fund dispositions:</p> <ul style="list-style-type: none"> - Capital Gains & Losses Report from investment broker - Annual gains & Losses Summary from individual funds reports for December - Securities purchases and sales receipts 	<p>For Real Estate dispositions:</p> <ul style="list-style-type: none"> - Purchase and sale documents (ie - Statement of adjustments from lawyer or notary - Receipts and/or invoices for capital improvements
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1994 Capital Gain Election form (if applicable)

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Deductions and credits:

	You	Spouse		You	Spouse
Union dues	<input type="checkbox"/>	<input type="checkbox"/>	Medical expenses	<input type="checkbox"/>	<input type="checkbox"/>
Professional dues	<input type="checkbox"/>	<input type="checkbox"/>	Medical travel	<input type="checkbox"/>	<input type="checkbox"/>
Child care expenses	<input type="checkbox"/>	<input type="checkbox"/>	Disability Amount (T2201)	<input type="checkbox"/>	<input type="checkbox"/>
Child Fitness Credit	<input type="checkbox"/>	<input type="checkbox"/>	Attendant/disability supports	<input type="checkbox"/>	<input type="checkbox"/>
Child Arts Credit	<input type="checkbox"/>	<input type="checkbox"/>	Adoption/In Vitro	<input type="checkbox"/>	<input type="checkbox"/>
Alimony or spousal support paid	<input type="checkbox"/>	<input type="checkbox"/>	Charitable donations	<input type="checkbox"/>	<input type="checkbox"/>
Child Support	<input type="checkbox"/>	<input type="checkbox"/>	Political donations	<input type="checkbox"/>	<input type="checkbox"/>
Student Loan Interest	<input type="checkbox"/>	<input type="checkbox"/>	Interest expense (investing)	<input type="checkbox"/>	<input type="checkbox"/>
Tuition/Education (T2202)	<input type="checkbox"/>	<input type="checkbox"/>	Investment advisor Fees	<input type="checkbox"/>	<input type="checkbox"/>
Tuition transfer from child	<input type="checkbox"/>	<input type="checkbox"/>	Accounting fees (special cases)	<input type="checkbox"/>	<input type="checkbox"/>
RRSP Contributions	<input type="checkbox"/>	<input type="checkbox"/>	Legal fees (special cases)	<input type="checkbox"/>	<input type="checkbox"/>
RRSP Limit (Notice of assessment)	<input type="checkbox"/>	<input type="checkbox"/>	Transit pass	<input type="checkbox"/>	<input type="checkbox"/>
Life-Time Learning Plan	<input type="checkbox"/>	<input type="checkbox"/>	New Home Buyer's Tax Credit	<input type="checkbox"/>	<input type="checkbox"/>
Home Buyers Plan	<input type="checkbox"/>	<input type="checkbox"/>	Safety deposit box	<input type="checkbox"/>	<input type="checkbox"/>
Labour Sponsored Funds (T5006)	<input type="checkbox"/>	<input type="checkbox"/>		\$	_____

	You	Spouse	
Employment expenses - Schedule II (T2200)	<input type="checkbox"/>	<input type="checkbox"/>	You must have a signed T2200 from your employer
Transport employee (TL2)	<input type="checkbox"/>	<input type="checkbox"/>	Requires overnight trips
Tools for trades (> \$1060)	<input type="checkbox"/>	<input type="checkbox"/>	Please supply receipts
Apprenticeship program (T1014)	<input type="checkbox"/>	<input type="checkbox"/>	You must provide support for level completed
Firefighter credit	<input type="checkbox"/>	<input type="checkbox"/>	
Moving expenses - Schedule IV	<input type="checkbox"/>	<input type="checkbox"/>	
Moving expenses - employer letter	<input type="checkbox"/>	<input type="checkbox"/>	

Tax Instalments \$ _____