LAKE COUNTRY
Accounting & Tax

55 Nottawasaga Street
Orillia, ON, L3V 3J5
Tel: 705-326-4125
www.lakecountryaccounting.ca

PERSONAL INCOME TAX CHECKLIST

All information provided on this form should be supported with receipts which you should keep in event of an audit.

Name _____

Social Insurance Number _____ **Date of Birth** _____
DD/MM/YY

Telephone _____ **Telephone** _____
Home Business

Cell _____ **Fax** _____

E-mail _____

Address _____
Street (number and name) City Province Postal Code

Please select marital status ☐ **Single** ☐ **Married** ☐ **Common-law** ☐ **Other** _____

Spouse/ Partner Name _____
First Name Last Name

Social Insurance Number _____ **Date of Birth** _____
DD/MM/YY

Number of Dependents _____

Dependent 1 Name _____

Social Insurance Number _____ **Date of Birth** _____
DD/MM/YY

Dependent 2 Name _____

Social Insurance Number _____ **Date of Birth** _____
DD/MM/YY

Dependent 3 Name _____

Social Insurance Number _____ **Date of Birth** _____
DD/MM/YY

Dependent 4 Name _____

Social Insurance Number _____ **Date of Birth** _____
DD/MM/YY

Date of Marriage (if within tax year) _____

Date of separation or divorce (if within tax year) _____

Date of Death (if within tax year) _____

Province of residency on December 31 _____

LAKE COUNTRY
Accounting & Tax

55 Nottawasaga Street
Orillia, ON, L3V 3J5
Tel: 705-326-4125
www.lakecountryaccounting.ca

Has any of the above information changed from previous years? ☐ Yes ☐ No
E-File Returns (Select one) ☐ Yes ☐ No

Delivery ☐ Courier to me (courier charges to apply) ☐ Call me for pick up ☐ Email to me

Are you a Canadian citizen? ☐ Yes ☐ No

As a Canadian Citizen, do you authorize CRA to provide your information to Elections Canada?
☐ Yes ☐ No

Do you own foreign assets (stocks in foreign companies or real estate) greater than $100,000 CDN during the year? ☐ Yes ☐ No

If yes, please provide a description _____

Have you given or received assets to/from a foreign trust (i.e. a trust from a foreign relative) ☐ Yes ☐ No

If yes, please provide a description _____

Do you own shares in a foreign company ☐ Yes ☐ No

If yes, please provide a description _____

Are you a first time homebuyer in the year? ☐ Yes ☐ No

Attach copy of previous year notice of assessment ☐ Yes ☐ No

Do you wish to split your pension income with your spouse, if applicable? ☐ Yes ☐ No

Would you like to provide us authorization to speak to the CRA on your behalf? ☐ Yes ☐ No

---

Please check all items you have attached and the number of slips forwarded (if applicable)

Income

- ☐ Employment – T4, T4A — No. of slips _____
- ☐ Old Age Security – T4A (OAS)
- ☐ Canada Pension Plan Benefits – T4A(P)
- ☐ Other Pensions – T4A, T4A(P) — No. of slips _____
- ☐ Employment Insurance – T4E
- ☐ Interest, Dividends and other Investment Income – T5/T60 — No. of slips _____
- ☐ Mutual Funds and other Trust Income – T3 — No. of slips _____
- ☐ Limited Partnership – T5013 or financial statement — No. of slips _____
- ☐ RRSP or RRIF withdrawal – T4RSP, T4RIF — No. of slips _____
- ☐ Registered Disability Savings Income Plan – T4A — No. of slips _____

LAKE COUNTRY
Accounting & Tax

55 Nottawasaga Street
Orillia, ON, L3V 3J5
Tel: 705-326-4125
www.lakecountryaccounting.ca

☐ Worker's Compensation Benefits – T5007 No. of slips _____

Income (Cont'd)

☐ Interest or dividend income – T5

☐ Universal Child Care Benefit – RC62

☐ Alimony or Child Support Payments Received

☐ Business or Professional (attach Financial Statements or Business Checklist)

No. of businesses _____

☐ Income from self-employment or professional income (include details see Business Checklist)

☐ Rental Properties (include details see Rental Property Checklist) No. of Properties _____

☐ Capital Gain/Loses

Did you sell or transfer shares to a related person at a loss? ☐ Yes ☐ No

Did you sell shares of small business corporation in the year? ☐ Yes ☐ No

Are you claiming an allowable business investment loss (ABIL)? ☐ Yes ☐ No

If yes to any of the above questions, please provide additional details.

☐ Other Income (i.e. Stock options, Annuities, scholarships, bursaries, research grants etc)

No. of slips _____

Deductions

☐ RRSP contributions (attach receipts) No. of slips _____

☐ Annual union, professional dues (attach receipts) No. of slips _____

☐ Public Transit Passes (June 2018 and prior only)

☐ Child Care Expense (attach receipts) No. of slips _____

☐ Individual Provider SIN _____

Address _____

☐ Summer Camp No. of weeks _____

☐ Attendant Care Expense (attach receipts) No. of slips _____

☐ Interest Paid on Student Loan No. of slips _____

☐ Tuition Amount – T2201/T2202A No. of slips _____

☐ Moving Expenses (attach Receipt) km moved _____

☐ Alimony or Separation allowance paid (provide legal documentation, first time claim or changed from previous years)

Name of Recipients _____

Recipients' Address _____

LAKE COUNTRY
Accounting & Tax

55 Nottawasaga Street
Orillia, ON, L3V 3J5
Tel: 705-326-4125
www.lakecountryaccounting.ca

Deductions (Cont'd)

- ☐ Medical Expenses (attach receipts) No. of slips _____
- ☐ Donations No. of slips _____
- ☐ Political Donations No. of slips _____
- ☐ Apprentice Training Tax Credit
- ☐ Co-op Tax Credit
- ☐ Labour Sponsored Funds – T5006 No. of slips _____
- ☐ Disability Deductions (First time claim, provide T2201 signed by physician)
- ☐ Interest Paid on Student Loan (attach slips) No. of slips _____
- ☐ Adoption Expenses
- ☐ Carrying Charges and Interest (investment fees, safety deposit box fee, etc)
- ☐ Motor Vehicle Expense (attach Motor Vehicle Checklist)
- ☐ Home Office Expense (attach Home Office Checklist)

Other

- ☐ Property Tax paid on personal residence (if applicable) $ _____
- ☐ Rent paid on personal residence (if applicable) $ _____
- ☐ Personal Tax Instalments paid for year (attach receipts) Total remitted $ _____
- ☐ Sale of Principal Residence during the year?
  If so, what was it sold for $ _____
  What year did you buy it? _____
- ☐ Other Deductions and/or Expenses (please specify)

_____
_____
_____
_____
_____
_____

If you have any questions, please contact my office.