

Island Tax & Bookkeeping Personal Tax Return Checklist

DATE:

New Client **Yes or No**

Personal Information

Taxpayer 1	SIN	DOB
Email:	Cell Phone:	

Taxpayer 2	SIN	DOB
Email:	Cell Phone:	

Martial Status: Single Married Common-Law Divorced Separated Widowed

Has marital status changed in the tax year? If yes, please provide date: _____ Spouse net income if not filing together: _____

Address: _____

Dependents

Name	Relationship	Date of Birth	Income	SIN	Transfer Tuition? Other?
		MM/DD/YYYY			
		MM/DD/YYYY			
		MM/DD/YYYY			

Residence **Elections Canada**

Province or territory of residence on December 31 for tax filing year: _____ Did the taxpayer immigrate to or emigrate from Canada during the year? yes or no If yes, provide date of entry or departure: _____ Spouse's or common-law partner's net income while the taxpayer is living in of Canada: _____ Spouse's or common-law partner's net income while the taxpayer is living outside of Canada: _____ Canadian sourced non-resident income: _____ Foreign sourced non-resident income: _____	Is the taxpayer a Canadian citizen? <p style="text-align: center;">yes or no</p> If yes, do you authorize CRA to update your address with National Register of Electors? <p style="text-align: center;">yes or no</p>
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Real Estate ***New* Renter's Credit**

Did the taxpayer sell any real estate including principal residence during the tax year? yes or no If Yes: What year did you originally buy the residence? _____ If Yes: What was the sale price of the residence? _____ If Yes: Did you co-own the home with someone else? Who? _____ If Yes: Was the residence your ONLY primary principal residence the entire time? yes or no If Yes: Did you ever rent out the residence? _____ Address of sold real estate: _____	Did the tax payer rent for at least 6 months during the year? <p style="text-align: center;">yes or no</p> Was rent paid to an arm's length party? (Payments to relatives are not eligible) <p style="text-align: center;">yes or no</p> Rent paid: \$ _____ Number of months: _____ Name of landlord: _____ Address: _____
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***New* FHSA**

Did you open a First Home Savings Account (FHSA)? **yes or no**

Pension **Foreign Reporting**

Does the taxpayer elect to split eligible pension income with spouse? yes or no Foreign pension income? Please provide details yes or no Foreign tax paid? Please provide details yes or no	Did the taxpayer own or hold foreign property or cash with a total cost of more than \$100,000? Including Bank Accounts and Investments in foreign stocks. If yes, please provide details with any foreign income earned.
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Self Employment/ Rental Income

Do you have self employment income ? **yes or no**
 Does a GST return need to be filed for your proprietorship? **yes or no**
 Do you have rental income? **yes or no**

CERTIFICATION

I CERTIFY THAT THE INFORMATION GIVEN ON THIS FORM AND DOCUMENTS INCLUDED IS, TO THE BEST OF MY KNOWLEDGE, CORRECT AND COMPLETE.

X

Client Notes/Comments

PLEASE LET US KNOW ABOUT ANY CHANGES, QUESTIONS OR CONCERNS. Any additional documentation can be emailed to: info@islandtax.ca

If you would like to **set up** direct deposit, or change banking information, please include a void cheque. **yes or no**

Internal Use Only

Client Phoned / message left:	New Clients - Signed Auth?	Auto Fill Complete?
Notes:		
Client signature upon completed tax return pick up		