

PERSONAL INFORMATION			
First Name:	Last Name:	SIN:	Date of Birth (YYYY/MM/DD):
Spouse First Name:	Last Name:	SIN:	Date of Birth (YYYY/MM/DD):
Address:			
City:		Province:	Postal code:
Tel:		Email:	
Martial Status: <input type="checkbox"/> Married <input type="checkbox"/> Common law <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed			
Do you own foreign property with aggregate cost \$100,000 Canadian? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, complete T1135)			
<input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> New Immigrant, Canada Arrival Date:			
Do any of your family members qualify for the disability tax credit T2201? <input type="checkbox"/> Yes <input type="checkbox"/> No (Provide CRA approvals letter copy)			
MINOR, INFIRM, OR ELDERLY DEPENDANTS INFORMATION			
Name	SIN	Date of Birth (YYYY/MM/DD)	Net Income; if any
			\$
			\$
INCOME		INCLUDED	SLIPS REQUIRED
Salaries, Commissions, Gratuities, Foreign employment income		<input type="checkbox"/>	T4, T4A Slips, RL1 and/or Foreign income country name
Pension income (CPP / OAS / RRSP / RRIF / Foreign Pension)		<input type="checkbox"/>	T4A, T4AP, T4A(OAS), RL2, T4RSP, T4RIF
Employment insurance, ACWB, (EI), Covid19 benefits		<input type="checkbox"/>	T4E, T4A, RL1, RC210
Investment Income		<input type="checkbox"/>	T3, T5, RL3
Partnership Income		<input type="checkbox"/>	T5013 or Details
Self-Employment Income (Business, Commission, Contractor)		<input type="checkbox"/>	Complete Table #3, #4, #5 OR The separate form see website
Rental Income and Expenses		<input type="checkbox"/>	Complete Table #2 OR The separate form see on website
Taxable Capital Gain or Losses		<input type="checkbox"/>	T5008 slip, RL3, Realized capital gain/loss summary from broker
Spousal Support Payment Made		<input type="checkbox"/>	Details (spouse name, SIN and address)
Sale of Principal Residence (Reply to this <input type="checkbox"/> Yes <input type="checkbox"/> No)		<input type="checkbox"/>	Purchase Year, Sale Date and Proceed **Election Required**
Change in use of principal residence to Rental and Vice Versa IMP		<input type="checkbox"/>	Details **Election Required** (Separate Filing is Required)
DEDUCTIONS		INCLUDED	SLIPS REQUIRED
RRSP and/or FHSA Contribution		<input type="checkbox"/>	Official RRSP and/or FHSA contribution receipts
Moving Expenses		<input type="checkbox"/>	Details of expense
Spousal Support		<input type="checkbox"/>	Name, address, payee, amount paid
Interest Expenses, Investment Expenses, Carrying Charges		<input type="checkbox"/>	Details of expenses
DayCare Expenses		<input type="checkbox"/>	Caregiver name, SIN, Total paid (receipts)
Employment Expenses		<input type="checkbox"/>	Copy of T2200 signed by employer and complete Table # 1
Donations		<input type="checkbox"/>	Official receipts
Caregiver and Home Accessibility For Seniors/Disabled		<input type="checkbox"/>	Details and renovation summary with amount paid
Medical, Dental, Physio, Eye Glasses Expenses		<input type="checkbox"/>	Summary or statement from pharmacy
Interest Paid on Student Loan		<input type="checkbox"/>	Official receipt
Digital News Subscription Expenses		<input type="checkbox"/>	Receipt or email copy or summary

NEWCOMER TO CANADA		INCLUDED	SLIPS REQUIRED
Canadian sourced non-resident income		<input type="checkbox"/>	Income earned from abroad after immigrating to Canada
Foreign source non-resident income		<input type="checkbox"/>	Income earned abroad before immigrating to Canada
EMPLOYMENT EXPENSES (TABLE # 1) Signed T2200 from your employer is required. Complete the table, required. Keep for 7 years.			
Accounting and Legal	\$	Parking	\$
Advertising and Promotion	\$	Supplies, Postage, office	\$
Automobile	Complete Table # 4	Tools	\$
Lodging	\$	Other	\$
Meals (report 100%)		Apprenticeship Level Passed	
RENTAL INCOME (TABLE # 2) Keep your receipts for 6 years			
Property Address:		Owner Name:	SIN:
Co - Owner name:	SIN:	Gross Rental Income	
Advertising		Insurance	
Mortgage Interest		Repairs & Maintenance	
Property Taxes		Utilities + Heat + Hydro	
Renovations		Strata + management fee	
SELF-EMPLOYMENT/BUSINESS/PROFESSIONAL INCOME/CONTRACTOR (TABLE # 3) Keep your receipts for 6 years.			
Register for GST	<input type="checkbox"/> Yes <input type="checkbox"/> No	Want NTC to Prepare GST	<input type="checkbox"/> Yes <input type="checkbox"/> No
GST Number		Are all numbers GST inclusive	<input type="checkbox"/> Yes <input type="checkbox"/> No
SALE / REVENUE	\$	Advertising expense	\$
Meals expense (100%)	\$	Business license/membership	\$
Office expense, supplies	\$	Office rent (NOT home office)	\$
Repairs and maintenance	\$	Salaries & Wages	\$
Travel	\$	Insurance	\$
Bank charges	\$	Automobile	COMPLETE TABLE # 4
Utilities and Property taxes	\$	All Other expenses	\$
AUTO EXPENSES (TABLE # 4) Keep your receipts for 6 years.			
Bought a new vehicle last year	<input type="checkbox"/> Yes <input type="checkbox"/> No	Lease a new vehicle last year	<input type="checkbox"/> Yes <input type="checkbox"/> No
Purchase documents included	<input type="checkbox"/> Yes <input type="checkbox"/> No	Lease documents included	<input type="checkbox"/> Yes <input type="checkbox"/> No
Fuel	\$	Insurance	\$
Repairs & maintenance	\$	Leasing cost (entire year)	\$
Business KM driven last year		Total KM driven last year	
HOME OFFICE EXPENSES (TABLE # 5) Keep your receipts for 6 years.			
Office SQ FT		Total Home SQ FT	
BC Hydro	\$	Fortis	\$
Insurance	\$	Mortgage Interest Only	\$
Home Rent	\$	Property Taxes	\$
Maintenance	\$	Utilities (Water & Sewer)	\$
Other	\$	Other	\$