# Personal tax update form

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| --- |
| **Primary Contact** |
| Name |  |
| Has your phone, email or address changed? [ ]  No [ ]  Yes |  |
| **Spouse / Common-Law Partner (after 12 months of co-habitation)** |
| Name |  |
| Has your phone, email or address changed? [ ]  No [ ]  Yes |  |
| Will Creekside Accounting be filing a tax return for this person? [ ]  Yes [ ]  No | If no, what is their net income: |

# service preferences

|  |  |
| --- | --- |
| Preferred contact method: | [ ]  Phone [ ]  Email [ ]  Text |
| Records format preference: | [ ]  Paper [ ]  Electronic / PDF Download Required by Client |
| Would you like a wrap up meeting (to review, sign, and pickup)? | [ ]  Yes – In Person [ ]  Yes – By Phone [ ]  No – By Portal/Email/Mail – recommendations will be provided in email format |

# high risk tax issues

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| **Principal Residence Inquiries** |
| Have you sold a property in the past 18 months? |  [ ]  Yes [ ]  No | If yes, provide the **purchase** and **sale** Statements of Adjustment |
| Was this home your principal residence (PR)? | [ ]  Yes [ ]  No | Did you own any other property during the time you are designating this home as your PR?  | [ ]  Yes [ ]  No |
| **Income Inquiries** |
| Do you own any foreign property or foreign investments (including US stocks) with a total cost of more than $100,000? |  [ ]  Yes [ ]  No |
| Are you collecting rental income |  [ ]  Yes [ ]  No | Is any of this short term (rented by the day) |  [ ]  Yes [ ]  No |
| Address of rental property: |  |
| Do you have any other income (skip the dishes, serving tips, crowdfunding recipient, etc.)? | If yes, please detail: |

# life events

|  |  |  |
| --- | --- | --- |
| Has your marital status changed? [ ]  No [ ]  Yes  | Date of change:  | New status: |
| Do you have any new dependents? [ ]  No [ ]  Yes | Name, DOB, SIN, Relationship: |  |
| Have you moved more than 40kms for work? |  [ ]  Yes [ ]  No | Approximate date of move |  |
| Did you own the home you previously lived in? |  [ ]  Yes [ ]  No | If yes, are you renting out this home? |  [ ]  Yes [ ]  No |

## Questions / concerns for the accountant?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_