

### CHARTERED PROFESSIONAL ACCOUNTANTS

To help us better serve you and to ensure you fully benefit from the deductions to which you are entitled, we invite you to take a few minutes to complete this questionnaire. You can return the completed questionnaire to us either electronically or with your tax information.

Please complete the information below. **If you are returning clients, please complete your names only, unless there is a change.**

#### Personal Information

Taxpayer's first name	<input type="text"/>	Spouse's first name	<input type="text"/>
Last name	<input type="text"/>	Last name	<input type="text"/>
SIN	<input type="text"/>	SIN	<input type="text"/>
Date of birth	<input type="text"/>	Date of birth	<input type="text"/>
Marital status	<input type="text"/>		
Date of change of marital status (dd-mm)	<input type="text"/>		

#### Address (for returning clients, complete only if changed from 2016)

Number  Street  Apt

City  PO Box  RR

Province  Postal code

Indicate the moving date (dd-mm)

#### If Principal Residence Sold in 2017:

Year of acquisition

Proceeds of disposition \$

#### Phone number

Home  Cellular  Work  Ext.  Fax

Email

#### Dependants' Information (children/other) (for returning clients, complete for new dependants only) *Add another page if required*

First name	Relationship	Date of birth (dd-mm-yyyy)	SIN	Net income	Disability, if any	Post-secondary	Child care
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

#### Prior Year Tax Return Information (for new clients only)

Please provide last year's tax return and corresponding notice of assessment. If possible, we would like to receive the last three year's tax returns and/or corresponding notices of assessment will be provided.

#### General Information Required to File the Return (please check to confirm)

Please carefully read this section, which gathers information required to file your income tax return, and mark the columns Yes or No.

	Taxpayer	Spouse
• Elections Canada: You are Canadian citizen.	<input type="text"/>	<input type="text"/>
• If yes, you authorize the Canada Revenue Agency to give your name, address, date of birth, and citizenship to Election Canada to update the National Register of Electors.	<input type="text"/>	<input type="text"/>
• You own or hold foreign property at any time in 2017 with a total cost of more than CDN \$100,000 (excluding personal use property).	<input type="text"/>	<input type="text"/>
• You spent a significant amount of time outside of Canada in the last year.	<input type="text"/>	<input type="text"/>
If yes, please indicate (dd-mm-yyyy):      Date of departure from Canada <input type="text"/> Date of return to Canada <input type="text"/>	<input type="text"/>	<input type="text"/>
• You will elect to split pension income if beneficial.	<input type="text"/>	<input type="text"/>
• You paid instalments for the 2017 taxation year.	<input type="text"/>	<input type="text"/>
If yes, please indicate the amount paid.      Federal <input type="text"/> Québec <input type="text"/>	<input type="text"/>	<input type="text"/>
• You want to start direct deposit or change account information.	<input type="text"/>	<input type="text"/>
If yes, please attach a void cheque.	<input type="text"/>	<input type="text"/>

**Please attach all tax slips received for the 2017 tax year, including T4s, T5s, T3s, T4As, T4RIFs, etc.**

Do you have any additional income amounts that are not reported on tax slips? Please indicate which of the following may apply.

	Check (✓)		Check (✓)
Interest or other investment income	_____	Personal property sales	_____
Taxable benefits not on the T4 slip	_____	Real estate sales or purchases	_____
Foreign income/taxes	_____	Tax shelter sales or purchases	_____
Stocks/bonds/mutual fund sales	_____	Other (specify) _____	_____

**Applicable Deductions/Tax Credits**

Please indicate which of the following deductions or credits you may be eligible for and provide appropriate receipts.

	Taxpayer	Spouse		Taxpayer	Spouse
RRSP contributions	_____	_____	RPP contributions	_____	_____
Home Buyers' Plan withdrawals	_____	_____	Home Buyers' Plan reimbursement	_____	_____
Lifelong Learning Plan withdrawals	_____	_____	Lifelong Learning Plan reimbursement	_____	_____
Tuition fees	_____	_____	Tuition transfer (T2202 from the children)	_____	_____
Interest paid on student loans	_____	_____	Union/professional or like dues	_____	_____
Medical expenses	_____	_____	Charitable donations	_____	_____
Support payments made	_____	_____	Political contributions	_____	_____
Carrying charges	_____	_____	Employee GST rebate	_____	_____
Employment expenses	_____	_____	Moving expenses	_____	_____
Northern residents deductions	_____	_____	Home Renovation receipts (seniors only)	_____	_____

**Additional Potential Benefits**

Please indicate which of the following items you have paid and provide details or receipts as they may represent additional tax benefits.

	Check (✓)		Check (✓)
Deductible employment expenses (T2200)	_____	First time disability credit	_____
Claim for meals and lodging expenses (TL2)	_____	Tax shelter purchases	_____
Accountant/legal fees	_____	First-time home buyer	_____
Property taxes or rent paid	_____	First-time donor	_____
Interest paid on related investments	_____	Other (specify) _____	_____
Teacher and ECE school supply tax credit	_____	Other (specify) _____	_____

**Additional Notes**

**Statement of Business or Professional Activities (if applicable)**

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Business name

<b>Income</b>	<b>2017</b>		<b>2017</b>
Sales and commissions	<input type="text"/>		
<b>Expenses</b>			
Advertising	<input type="text"/>		Meals and entertainment <input type="text"/>
Insurance	<input type="text"/>		Dues, licences <input type="text"/>
Interest and bank charges	<input type="text"/>		Supplies <input type="text"/>
Office expenses	<input type="text"/>		Management fees <input type="text"/>
Professional fees	<input type="text"/>		Maintenance and repairs <input type="text"/>
Rent	<input type="text"/>		Property taxes <input type="text"/>
Salaries	<input type="text"/>		Telephone and utilities <input type="text"/>
Traveling expenses	<input type="text"/>		Motor vehicle expenses <input type="text"/>

**Statement of Real Estate Rentals (if applicable)**

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Address of property

<b>Income</b>	<b>2017</b>		<b>2017</b>
Gross rents	<input type="text"/>		Other related income <input type="text"/>
<b>Expenses</b>			
Advertising	<input type="text"/>		Insurance <input type="text"/>
Interest	<input type="text"/>		Office expenses <input type="text"/>
Professional fees	<input type="text"/>		Management fees <input type="text"/>
Maintenance and repairs	<input type="text"/>		Salaries <input type="text"/>
Property taxes	<input type="text"/>		Traveling expenses <input type="text"/>
Utilities	<input type="text"/>		Motor vehicle expenses <input type="text"/>