

2017 PERSONAL INCOME TAX CHECKLIST

NAME: _____

PHONE # HOME: _____

EMAIL: _____

PHONE # OFFICE: _____

GENERAL

	<u>X'</u>	<u>DETAILS</u>
Do you want to receive a full copy of your tax return by email?	<input type="checkbox"/>	_____
Change in Marital Status or Name?	<input type="checkbox"/>	_____
Dependants		

Name	SIN	Date of Birth	Relationship	Net Income
_____	- -	_____	_____	_____
_____	- -	_____	_____	_____
_____	- -	_____	_____	_____

Are you a Canadian citizen?	<input type="checkbox"/>	_____
Do you authorize CRA to provide your information to Elections Canada?	<input type="checkbox"/>	_____
Did you move in 2017?	<input type="checkbox"/>	_____
Did you acquire a house in 2017?	<input type="checkbox"/>	_____
Is it your first house?	<input type="checkbox"/>	_____
Please provide		
Rent or property tax paid for 2017 <i>[Please provide rent / property tax receipt]</i>	<input type="checkbox"/>	_____
2017 Instalment Payment Summary from CRA	<input type="checkbox"/>	_____
Notice of (RE)Assessment for 2016	<input type="checkbox"/>	_____
Notice of (RE)Assessment for other years if not already provided	<input type="checkbox"/>	_____

FOREIGN

Do you own foreign property with a cost greater than CDN \$100,000 but less than \$250,000?	<input type="checkbox"/>	_____
If yes, please provide details of foreign properties.		
Do you own foreign property with a cost greater than CDN \$250,000?	<input type="checkbox"/>	_____
If yes, please provide details of foreign properties (monthly investment statements if applicable)		

Foreign Property includes:

- Shares and Bonds of foreign companies / foreign governments (held in Canadian or foreign investment account)
- Funds in foreign bank accounts
- Real estate situated outside Canada (except if owned exclusively for personal use)
- Interest in non-resident trusts / Interest or units in offshore mutual funds

Are you a Citizen or Resident of the United States? Please provide details.	<input type="checkbox"/>	_____
Did you work in the United States in 2016?	<input type="checkbox"/>	_____
If yes to either of the above, is a US Tax Return being filed?	<input type="checkbox"/>	_____

INCOME

Employment/ Commission (T4, T4A, T4PS)	<input type="checkbox"/>	_____
Investment (T3, T5, T5013, T5008)	<input type="checkbox"/>	_____
Pension (T4A, T4RSP, T4RIF, T4AOAS, T4AP, Foreign, Other)	<input type="checkbox"/>	_____
Universal Child Care Benefit(RC 62)	<input type="checkbox"/>	_____

- Disposition of Investments (eg. shares, bonds)? _____
- Please provide Realized Gains / Losses Summary from broker. _____
- Other income. Please provide details. _____
- Rental Income. Is income and expense summary attached? _____
- [Please call us at (905) 598-3728 to obtain template if needed.]*
- Business Income. Is income and expense summary attached? _____
- [Please call us at (905) 598-3728 to obtain template if needed.]*

DEDUCTIONS

- Employment expenses. Please provide summary and a signed T2200. _____
- [Please call us at (905) 598-3728 to obtain template if needed.]*
- RRSP Contribution. Please provide contribution slips. _____
- Home buyers plan – Withdrawal / Repayment _____
- Childcare Expenses _____
- Support Payments _____
- Union or professional dues (if not included on T4 already) _____
- Accounting Fees _____
- Investment Carrying Costs - Interest Expense _____
- Investment Carrying Costs - Investment Management Fees _____
- If you moved in 2017, please provide a summary of moving expenses incurred. _____

CREDITS

- Monthly Transit Passes / Presto Card. Please provide summary. _____
- Interest on eligible Student Loan _____
- Tuition Fees / Examination Fees (T2202) _____
- Tuition Fees / Examination Fees from dependent (T2202) _____
- [If you are planning to transfer tuition credits from your child to yourself, please have the child sign the T2202]*
- Eligible Fitness / Arts / Activity Program for child under age 16 _____
- [Please ensure the receipt acknowledges payment and clearly identifies that the activity is eligible for the fitness / arts / activity]*
- Charitable Donations / Political Contributions (Please provide summary) _____
- Is it the first time you or your spouse are claiming donations since 2007? _____
- Medical Expenses for self and dependents** (Please provide summary) _____
- Disability Tax Credit for self or dependents (signed T2201 if first time of claim) _____
- [Please note that LONG & QIN LTD. will retain all 2016 medical expense and donation receipts for one year]*

Please read carefully, date and sign below:

I certify that the information given to **LONG & QIN LTD.** to prepare my income tax return and any documents attached are correct, complete and fully disclose my income and deductions to which I am entitled. I am aware it is a serious offence to give false or misleading information. I understand that I am responsible for retaining copies of my tax returns and supporting documentation. I understand that I bear responsibility for tax, interest or penalties assessed by CRA due to the disallowance of any deductions or exclusions, or the taxation of any unreported income. I understand that **LONG & QIN LTD.** will not audit, review or otherwise attempt to verify the accuracy or completeness of this information.

Signature: _____ Date: _____

The objective of this checklist is to help you keep your tax affairs organized. This checklist is not intended to provide, and should not be construed as providing, individual, tax, legal or investment advice, nor is it meant to cover all of your tax or other relevant considerations.

**Medical expenses include private health plans, prescriptions, attendant care costs and nursing homes