

Please complete all sections where there have been changes **PLUS** all mandatory (\*) fields.

### TAXPAYER'S INFORMATION

\*Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 \_\_\_\_\_ YYYY/MM/DD  
 SIN: \_\_\_\_\_

\*Marital Status: \_\_\_\_\_

\*Did your status change in 2019 Y  N  Date of Change: \_\_\_\_\_  
 \_\_\_\_\_ YYYY/MM/DD

Are you a US Citizen Y  N

### SPOUSE'S INFORMATION

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 \_\_\_\_\_ YYYY/MM/DD

SIN: \_\_\_\_\_

Net Income (if filing separately): \$ \_\_\_\_\_

### DEPENDANT'S INFORMATION

Name: \_\_\_\_\_ M  F  Date of Birth: \_\_\_\_\_  
 \_\_\_\_\_ YYYY/MM/DD

Name: \_\_\_\_\_ M  F  Date of Birth: \_\_\_\_\_  
 \_\_\_\_\_ YYYY/MM/DD

Name: \_\_\_\_\_ M  F  Date of Birth: \_\_\_\_\_  
 \_\_\_\_\_ YYYY/MM/DD

### CONTACT INFORMATION

Address: \_\_\_\_\_ \*Phone / Cell: \_\_\_\_\_  
 \_\_\_\_\_ Work: \_\_\_\_\_

City / Province: \_\_\_\_\_ \*Email: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Spouse's Email: \_\_\_\_\_

 Please complete all questions in the following sections.

### \*PRINCIPAL RESIDENCE

Did you sell your principal residence during the year?  Y  N

IF YES      Sale Price:      \$      \_\_\_\_\_

                    Year of Purchase:      \_\_\_\_\_

Has there been any change in the use of your principal residence? (ie. Rental)  Y  N

### \*OTHER INFO

Did you own foreign property at any time during the year that was worth more than \$100,000, including investments?  Y  N

Rental Income:  Y  N  
(attach statement of rental income)

Self Employed:  Y  N  
(attach statement of business income)

### \*TAX CREDITS / DEDUCTIONS

Charitable Donations:  Y  N

Child Care Expenses:  Y  N

Employment Expenses:  Y  N  
(needs signed T2200 – attach automobile and home office schedules)

Medical and Dental Expenses:  Y  N

Membership Dues:  Y  N

RRSP Contributions:  Y  N

Tuition Fees:  Y  N

Do you claim the disability amount?  Y  N

If yes, is this the first year that it is being claimed?  Y  N

Property Taxes / Rent Paid:      \$      \_\_\_\_\_

Tax Paid by installments:      \$      \_\_\_\_\_

### \*QUESTIONS TO ANSWER

Y    N

- 1. Did you receive **interest, dividends**, or **benefits** from a business in which a relative is a key party (in terms of ownership or involvement)?
- 2. Are you **or any of your dependants disabled**? If so, provide Form T2201, Disability Tax Credit Certificate.  

The **transfer rules** allow claims for certain dependent relatives. In addition, are you, or would you like to provide support to a disabled person? Tax planning opportunities may be available, such as the establishment of a Registered Disability Savings Plan. Persons with **disabilities** may also receive tax relief for the cost of **disability supports** (e.g. sign language services, talking textbooks, etc.) incurred for the purpose of **employment** or **education**. If you or your dependants are disabled but do not have a T2201 Form, please provide details so we can explore whether you are eligible for special credits or benefits.
- 3. Are you the **caregiver** for any infirm family members? Did you provide **in-home care** for an infirm **dependent relative**?
- 4. Did you provided **in-home care** for a **parent or grandparent** (including in-laws) 65 years of age or over, or an infirm dependent relative? A federal tax credit may be available. Certain provincial credits may also be available. Also, the caregiver may claim related **training costs** as a medical expense credit.
- 5. Do you want your **tax refund** deposited directly into your account at a financial institution?



**Y N**

6. If you have children up to the age of 17, have you received Canada Child Benefit (CCB)?
7. Did you purchase a new home in 2019? If so, you may be eligible for the new **residential property GST/HST rebate**. Also, are you a first-time **home buyer** in 2019? A federal tax credit based on \$5,000 (@15% = \$750) may be available.
8. Are you a **U.S. citizen, Green Card Holder**, or were you, or your parents **born in the United States**? You may have U.S. filing obligations.
9. Did you incur costs to access **medical intervention** required in order to **conceive a child** which was not previously allowed as a medical expense? Amounts may be claimed in respect of any such expense for the previous 10 years (if amounts were incurred in 2009, a claim must be made by the end of 2019).
10. Have you spent more than 200 hours acting as a **volunteer firefighter** or a **search and rescue volunteer**? You may be eligible for a federal tax credit.
11. Are you an **aboriginal person**? Special tax rules may apply.
12. Do you authorize CRA to give your name, address, date of birth, and citizenship to **Elections Canada** to update the National Register of Electors?
13. Have you made any contributions to a **gifting tax shelter**?
14. Did you receive any **significant prizes or awards** from your, or a related person's place of employment?
15. Did you receive a retroactive **lump-sum payment** over \$3,000 (for example, spousal support)? In certain cases, some tax relief may be available.
16. Have you organized or managed a **crowdfunding campaign**? In some cases, there are tax implications.
17. **Other provincial and territorial tax credits** may be available in your jurisdiction such as certain property taxes and residential rent paid in Ontario.
18. **Do you have a will? When was it last updated?** \_\_\_\_\_