

# STERLING STANFORD

CHARTERED PROFESSIONAL ACCOUNTANTS

## PERSONAL INCOME TAX RETURN ORGANIZER

NAME \_\_\_\_\_ SPOUSE NAME \_\_\_\_\_  
EMAIL \_\_\_\_\_ EMAIL \_\_\_\_\_  
PHONE \_\_\_\_\_ PHONE \_\_\_\_\_  
SIN \_\_\_\_\_ SIN \_\_\_\_\_  
BIRTH DATE (YYYY/MM/DD) \_\_\_\_\_ BIRTH DATE (YYYY/MM/DD) \_\_\_\_\_

SAME AS LAST YEAR

MAILING ADDRESS \_\_\_\_\_

CITY/PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

PROVINCE OF RESIDENCE AT DECEMBER 31, IF NOT BC \_\_\_\_\_

MARITAL STATUS (ON DEC 31)  MARRIED  SINGLE  SEPARATED  
 COMMON LAW  WIDOWED  DIVORCED

IF MARITAL STATUS CHANGED THIS YEAR, ON WHAT DATE? \_\_\_\_\_

DEPENDANT NAME	BIRTH DATE (YYYY/MM/DD)	SIN	NET INCOME
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- |  | TAXPAYER   | SPOUSE   |
|--|--|--|
| 1. DO YOU, OR A DEPENDANT, QUALIFY FOR THE DISABILITY TAX CREDIT OR HAVE A PHYSICAL OR MENTAL IMPAIRMENT?            | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 2. THE QUESTIONS BELOW MUST BE ANSWERED BEFORE YOUR RETURN CAN BE FILED:   |  |  |
| a) ARE YOU A CANADIAN CITIZEN?   | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| b) ARE YOU A US CITIZEN?   | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| c) DO YOU AGREE TO PROVIDE YOUR INFORMATION TO ELECTIONS CANADA FOR THE NATIONAL REGISTER OF ELECTORS?               | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| d) DID YOU HOLD FOREIGN ASSETS WITH A COST IN EXCESS OF \$100,000, AT ANY TIME IN THE YEAR? IF YES, PROVIDE DETAILS. | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 3. DID YOU SELL (OR CHANGE USE) OF YOUR PRINCIPAL RESIDENCE IN THE YEAR?   | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| IF YES: DATE PURCHASED _____ DATE SOLD _____   |  |  |
| SALE PROCEEDS _____  |  |  |

SIGNATURE \_\_\_\_\_ SPOUSE SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_ DATE \_\_\_\_\_

#307 - 1625 Oak Bay Avenue, Victoria, BC V8R 1B1

250-480-0558

SterlingStanford.ca

## PERSONAL INCOME TAX RETURN CHECKLIST

### INCOME

- T4 - EMPLOYMENT INCOME/TIPS
- T4A - PENSION; ANNUITY; OTHER INCOME
- T4A(OAS) - OLD AGE SECURITY INCOME
- T4A(P) - CPP BENEFITS
- T4E - E.I. AND OTHER BENEFITS
- T4RIF - PROCEEDS FROM RRIF
- T4RSP - PROCEEDS FROM RRSP
- T5 - BANK INTEREST; TAXABLE DIVIDENDS
- T3 - STATEMENT OF TRUST INCOME
- T5007 - WCB BENEFIT/SOCIAL ASSISTANCE
- T5013 - PARTNERSHIP INCOME
- FOREIGN PENSION INCOME
- SPOUSAL SUPPORT RECEIVED
- RENTAL PROPERTY INCOME AND EXPENSES **Provide schedule**
- SELF-EMPLOYMENT INCOME AND EXPENSES **Provide schedule**
- CAPITAL GAIN AND LOSS REPORTS
- TIPS, GRATUITIES

### OTHER INFORMATION

- NOTICE OF ASSESSMENT FROM LAST YEAR
- NOTICES OF REASSESSMENT (IF ANY)
- TAX INSTALMENT PAYMENT RECEIPTS
- DETAILS OF FOREIGN PROPERTY HOLDINGS

### DEDUCTIONS AND CREDITS

- RRSP CONTRIBUTION RECEIPTS
- MEDICAL RECEIPTS
- PRIVATE HEALTH INSURANCE PREMIUMS
- CHARITABLE/POLITICAL DONATIONS
- UNION OR PROFESSIONAL DUES
- MOVING EXPENSE RECEIPTS
- T2202A - STUDENT TUITION RECEIPTS
- INTEREST ON STUDENT LOANS
- CHILD CARE RECEIPTS
- INTEREST ON INVESTMENT LOANS
- SPOUSAL SUPPORT PAID
- INVESTMENT MANAGEMENT FEES
- HOME BUYERS PLAN REPAYMENT
- LIFE LONG LEARNING PLAN REPAYMENT
- FIRST TIME HOME BUYERS - PURCHASE DETAILS
- EMPLOYMENT EXPENSES  
(T2200, MILEAGE LOG, HOME OFFICE)
- VOLUNTEER FIREFIGHTER  
(OR SEARCH AND RESCUE)
- HOME ACCESSIBILITY / BC RENOVATION TAX CREDIT
- SCHOOL SUPPLIES TAX CREDIT  
(FOR TEACHERS)
- TRADESPERSON TOOLS
- APPRENTICE LEVEL COMPLETED
- HOME OFFICE - EMPLOYEES  
# OF DAYS WORKED AT HOME \_\_\_\_\_