



HENDERSON PARTNERS, LLP
2014 Personal Tax Questionnaire

Phone: (905) 829-3701
Fax: (905) 829-1454

To help us prepare your tax returns, please complete this as required and return it to us as soon as possible
Please call us at (905) 829-3701 for an appointment.

I. PERSONAL AND FAMILY DATA

Your Name _____ Spouse's Name _____
Your Date of Birth _____ Spouse's Date of Birth _____
Your Place of Birth _____ Spouse's Place of Birth _____
Country of Citizenship _____ Spouse's Country of Citizenship _____
Your SIN _____ Spouse's SIN _____
Your US SSN/ITIN _____ Spouse's US SSN/ITIN _____
Occupation _____ Occupation _____
Home Address _____
Business Address _____
Telephone #: Residence _____ Business _____ Cell _____
Email Address: _____ Business email address _____

Dependant Children (indicate if by previous marriage of you or your spouse, or by adoption)

<i>Name</i>	<i>Date of Birth</i>	<i>SIN</i>	<i>US SSN or ITIN</i>	<i>Income of Child</i>

Other Dependents (if any)

<i>Name</i>	<i>Date of Birth</i>	<i>Income</i>	<i>Relationship</i>

1. If your marital status changed in 2014, please provide details: _____

Date of change: _____ Separation Agreement: Yes ☐ No ☐
(please provide us with a copy of separation agreement, if applicable)

2. If we do not prepare your spouse's return, please provide us with their net income for 2014 \$ _____

3. Do you wish to be contacted by Henderson Partners in May regarding any of the following services we offer:

- | | | |
|----------------------------|------------------------------|-----------------------------|
| 1. Financial check-up | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. Tax and estate planning | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. Review of investments | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4. Retirement planning | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 5. Review of insurance | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 6. US tax filings | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

II. REQUIRED INFORMATION

1. Please indicate your preference regarding delivery of your completed tax return:

PDF via Email ☐ FedEx-home ☐ FedEx-business ☐ You will pick up ☐ Other: _____

2. Do you want Canada Revenue Agency to forward your name, address and date of birth to Elections Canada for updating of the National Register of Electors? Yes ☐ No ☐

3. Do you have direct deposit instructions in place? Yes ☐ No ☐

If you would like to set up direct deposit with the Canada Revenue Agency, please let us know and we will contact you to obtain the information required: Please contact me to set up direct deposit: Yes ☐ No ☐

4. If you have the following items, please indicate and provide them for our review:

- ☐ Copy of your 2013 return (if Henderson Partners did not prepare it)
- ☐ Copy of your 2013 Notice of Assessment
- ☐ RRSP contribution limit advice notice if separate from your assessment notice
- ☐ Correspondence received from Canada Revenue Agency during 2014
- ☐ GST/HST return for self-employed individuals
- ☐ Instalment confirmation/reminder received for March 2015 – Total 2014 instalments \$ _____
- ☐ Details of any stock options exercised during 2014
- ☐ 2014 realty tax bill for residence and/or amount of rent paid for residence
- ☐ **Details of any foreign property owned in the year if total cost exceeds \$100,000. Please note that failure to report foreign property holdings on Form T1135 on an annual basis could result in significant penalties being assessed. Foreign property holdings include (among other things): (1) funds in foreign bank accounts (2) shares of foreign corporations (public or private) (3) foreign rental property (4) debts owed by non-residents (5) other foreign assets (contact us to discuss)**

III. INCOME

Please indicate if the following sources of income apply to you for 2014. Please enclose all tax reporting and other information slips supporting these sources of income.

- ☐ Employment and related (T4), (W-2 (US)), etc. If no slip, provide amount: \$ _____
- ☐ Old Age Security (T4A(OAS))
- ☐ Canada Pension Plan (T4A(P))
- ☐ RRSP Income (T4RSP) ,(T4RIF)
- ☐ Other Pensions (T4A)(T4A-RCA)
- ☐ Universal Child Care Benefit (RC62)
- ☐ Employment Insurance (T4E)
- ☐ Interest, Dividends and other investment income (T3) (T5) (T5008) (1042-US) (1099-US) etc. (if joint accounts, please segregate)
- ☐ Partnership Income (T5013 slips, financial statements, etc.)
- ☐ Alimony or Child support received – Details: _____
- ☐ Capital Gains or Losses - If you disposed of any property during 2014 (such as real estate, stocks, bonds, etc.), please provide us with a description of the property, year of acquisition, cost of acquisition, proceeds of disposition and costs of disposition. Also provide original purchase and sale documentation if available. Copies of your broker's trade summaries for the year of purchase(s) and sale(s) may also be provided.
- ☐ **Foreign Property Transactions/Reporting** - Please provide details of the following: (1) any income or realized gains/losses from foreign property, (2) any loans or transfer of funds to a non-resident trust in the year, (3) any funds or property received from a non-resident trust of which you were beneficially interested, (4) an interest in a foreign corporation where you together with related persons hold a greater than 10% equity percentage and/or (5) any ownership interest in the shares/units of a foreign entity (corporation, trust or partnership) that is not publicly traded. Details: _____
- ☐ Any other sources of income: Please provide details _____
- ☐ Rental Income – Please provide financial statements or complete schedule (page 5)
- ☐ Business (self employed) income - Please provide financial statements or complete schedule (page 6 & 7)

IV. DEDUCTIONS/TAX CREDITS

Please indicate if the following deductions/tax credits apply to you for 2014. Please enclose all tax reporting and other information slips supporting these deductions/tax credits.

- ☐ RRSP Contributions - please provide original contribution receipts for all contributions made during 2014 and the first 60 days of 2015. In addition, if you participate in an RRSP homebuyer's plan, please provide annual statement or details of withdrawal. If you have over contributed to your RRSP and require a Form T1-OVP to be filed, please let us know so that we may file for you before the March 31 deadline.
- ☐ Union Dues and Professional Association Fees
- ☐ Attendant Care expenses
- ☐ Child Care Expenses – If a T4 or receipt is not being provided, please include the name, address and social insurance number of the childcare provider:
 - o Name: _____
 - o Address: _____
 - o SIN: _____
 - o Amount paid: \$ _____
- ☐ Spousal or Child Support Paid – Provide copy of the agreement (if there has been a change or amendment).
 - o Spousal support \$ _____
 - o Child support \$ _____ (may not be deductible if agreement made or varied after April 30, 1997)
- ☐ Carrying charges and other costs related to earning investment income
 - o Interest paid to earn investment income \$ _____
 - o Accounting or investment counsel fees \$ _____
 - o Other related expenses: _____ \$ _____
- ☐ Moving Expenses \$ _____

Please provide details (i.e. receipts, employer reimbursements, etc) of moving expenses related to business, professional, employment and/or education transfers including costs of maintaining vacant former residence. The move should be in excess of 40 km closer to new place of employment or business.
- ☐ Legal Expenses \$ _____

Please provide information related to any legal costs you incurred in order to earn or receive employment, pension or other amounts due to you.
- ☐ Employment/Commission Expenses – please complete the schedule on page 4. **Please provide us with a copy of the signed form T2200 from your employer which is required to claim employment expenses.**
 - o Other expenses – Details: _____ \$ _____
- ☐ Tuition and Education Amounts – please have Form T2202/T2202A "Tuition, Education and Textbook Amounts Certificate" signed by the student if tuition amount is to be transferred from a child or grandchild.
- ☐ Students attending a university outside of Canada should complete Form TL11A "Tuition, Education and Textbook Amounts Certificate – University Outside Canada".
- ☐ Charitable and Political donations
- ☐ Medical Expenses - provide original receipts for amounts paid for medical services, devices, prescriptions and provide details of any medical insurance you are paying. If any of the expenses were reimbursed by an insurance company, please provide details of the amount reimbursed. Where you are paying for an attendant to provide care in the home, please provide the name, address, and SIN of the recipient.
- ☐ Disability amounts – please provide a signed form T2201 if you or dependent is claiming disability because of mental or physical impairment.
- ☐ Interest on student loans – provide 2014 Interest Summary from financial institution.
- ☐ Public Transit – provide public transit passes/receipts from January to December 2014
- ☐ Child Fitness/Activities/Arts Tax credit – provide all receipts from organizations that provide prescribed programs of physical/artistic activity for children who are under the age of 16.
- ☐ First-time Home Buyers' Tax Credit – did you or your spouse purchase your first home between January 1, 2014 and December 31, 2014? Yes ☐ No ☐
- ☐ Other federal and provincial tax credits: Details: _____ \$ _____

COMMISSION EXPENSES/EMPLOYMENT EXPENSES

Advertising, promotion and gifts	\$ _____
Meals & Entertainment - please provide 100% of the costs (50% deductible)	\$ _____
Office supplies (stationary, publications, etc)	\$ _____
Communications (cell phone, pager, email,)	\$ _____
Business telephone (separate line)	\$ _____
Professional fees (legal, accounting)	\$ _____
Professional development (training, etc)	\$ _____
Salaries or commissions paid	\$ _____
Travel and lodging	\$ _____
Other: _____	\$ _____

AUTOMOBILE EXPENSE

(a)	Acquisition cost vehicle (if purchased in 2014) (if applicable)	\$ _____
	Please provide us with a copy of purchase or lease agreement if entered into in 2014	
	Proceeds from disposal of old car during 2014 (if applicable)	\$ _____
(b)	Total kilometres driven during 2014	_____
	Number of kilometres which pertain to business use	_____
(c)	Details of car expense including the following:	
	Gas/oil/fluids	\$ _____
	Repairs/maintenance	\$ _____
	Insurance	\$ _____
	Licence and registration	\$ _____
	Car Loan interest	\$ _____
	Lease payments	\$ _____
	Car wash / CAA / 407 ETR	\$ _____
	Parking	\$ _____
(d)	Car allowance/mileage reimbursements received if any	\$ _____

Note: Non-commission employees require form T2200 to be signed by your employer.

WORK SPACE IN THE HOME**Expenses**

(a)	Heat	\$ _____
	Electricity	\$ _____
	Water	\$ _____
	Maintenance and repairs	\$ _____
	Insurance - property	\$ _____
	Property Tax	\$ _____
	Other : _____	\$ _____
(b)	Total square footage of home	_____
	Square footage of home used for business	_____
	Percentage use for business	_____

Note: Insurance and property tax deductible only by commission employees.

STATEMENT OF RENTAL OPERATIONS

Address of rental property: _____

Ownership of the property (taxpayer, spouse, joint, other parties (include%): _____

Number of Days of Personal use of the rental property (if any): _____

INCOME

Gross rents received (excluding deposits) \$ _____

Other related income: _____ \$ _____

EXPENSES

- Advertising \$ _____
- Insurance \$ _____
- Interest \$ _____
- Maintenance and repairs \$ _____
- Management and Administration fees \$ _____
- Motor vehicle \$ _____
- Legal, accounting and professional fees \$ _____
- Property taxes \$ _____
- Salaries, wages and benefits \$ _____
- Travel \$ _____
- Utilities \$ _____
- Condo fees \$ _____
- Other: _____ \$ _____
- Other: _____ \$ _____

Details of asset acquisitions (i.e. furniture, appliances, paving, capital improvements, etc) during 2014:

Asset: _____ \$ _____

Asset: _____ \$ _____

Asset: _____ \$ _____

If the property was acquired in 2014, please provide the following:

Acquisition price (include copy of the purchase agreement) \$ _____

Land Transfer Tax, legal and other costs relating to acquisition \$ _____

Allocation of purchase price between land/building (%) _____

If the property was disposed of in 2014, please provide the following:

Selling price of property (include copy of sales agreement) \$ _____

Real Estate Commissions paid \$ _____

Legal expenses \$ _____

Other expenses: _____ \$ _____

STATEMENT OF BUSINESS ACTIVITIES

Name of Business: _____

Description of Business: _____

Is the business registered for GST/HST? Yes ☐ No ☐

Canada Revenue Agency Business Number (BN#) : _____

GST/HST Return: Prepared by client: Yes ☐ No ☐ To be prepared by HP: Yes ☐ No ☐ N/A _____

Address of Business (if different from address on tax return): _____

Were there any sales outside of Ontario (i.e. other provinces, foreign sales, etc)? Yes ☐ No ☐

	Net Amount (before HST)	HST 13%	TOTAL (incl. HST)
INCOME			
Sales, commissions or fees	\$ _____	\$ _____	\$ _____
COST OF GOODS SOLD			
Opening inventory	\$ _____	\$ _____	\$ _____
Purchases	\$ _____	\$ _____	\$ _____
Direct wage costs	\$ _____	n/a	n/a
Sub-contracts	\$ _____	\$ _____	\$ _____
Less: Closing inventory	\$ _____	\$ _____	\$ _____
EXPENSES			
Advertising and promotion	\$ _____	\$ _____	\$ _____
Meals and Entertainment (enter 100%)	\$ _____	\$ _____	\$ _____
Bad Debts	\$ _____	\$ _____	\$ _____
Insurance	\$ _____	n/a	n/a
Interest	\$ _____	n/a	n/a
Business tax, licenses, dues, memberships, subscriptions	\$ _____	\$ _____	\$ _____
Office expenses	\$ _____	\$ _____	\$ _____
Supplies	\$ _____	\$ _____	\$ _____
Legal and accounting	\$ _____	\$ _____	\$ _____
Management and Administration fees	\$ _____	\$ _____	\$ _____
Rent	\$ _____	\$ _____	\$ _____
Maintenance and repairs	\$ _____	\$ _____	\$ _____
Salaries, wages and benefits	\$ _____	n/a	n/a
Property tax	\$ _____	n/a	n/a
Travel expense	\$ _____	\$ _____	\$ _____
Telephone	\$ _____	\$ _____	\$ _____
Utilities	\$ _____	\$ _____	\$ _____
Delivery, freight and express	\$ _____	\$ _____	\$ _____
Motor Vehicle Expenses (see below on page 7)	\$ _____	\$ _____	\$ _____
Private health services plan premiums	\$ _____	n/a	n/a
Other: _____	\$ _____	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____	\$ _____
Business use of home expenses (see below on page 7)	\$ _____	\$ _____	\$ _____

DETAILS OF ASSET ACQUISITIONS DURING 2014

<i>Description of Asset</i>	<i>Date Acquired</i>	<i>Amount</i>	<i>GST/HST</i>	<i>Total</i>

DETAILS OF ASSET DISPOSITIONS DURING 2014

<i>Description of Asset</i>	<i>Date Disposed</i>	<i>Amount</i>	<i>GST/HST</i>	<i>Total</i>

AUTOMOBILE EXPENSE	Net Amount (before HST)	HST 13%	TOTAL (incl. HST)
Acquisition Cost (if purchased in 2014) (provide copy of purchase or lease agreement)	\$ _____	\$ _____	\$ _____
Proceeds from disposal of vehicle during 2014 (if applicable)	\$ _____	\$ _____	\$ _____
Total kilometres driven during 2014:	_____		
Number of kilometres which pertain to business use:	_____		

EXPENSES	Net Amount (before HST)	HST 13%	TOTAL (incl. HST)
Gas/oil/fluids	\$ _____	\$ _____	\$ _____
Repairs/maintenance	\$ _____	\$ _____	\$ _____
Insurance	\$ _____	n/a	n/a
License and Registration	\$ _____	n/a	n/a
Interest on car loan	\$ _____	n/a	n/a
Lease payments	\$ _____	\$ _____	\$ _____
Car wash/CAA/407 ETR	\$ _____	\$ _____	\$ _____
Parking	\$ _____	\$ _____	\$ _____
Car allowance/reimbursement received, if any	\$ _____	\$ _____	\$ _____

BUSINESS USE OF HOME EXPENSES	Net Amount (before HST)	HST 13%	TOTAL (incl. HST)
Heat	\$ _____	\$ _____	\$ _____
Electricity	\$ _____	\$ _____	\$ _____
Insurance	\$ _____	n/a	n/a
Maintenance	\$ _____	\$ _____	\$ _____
Mortgage interest	\$ _____	n/a	n/a
Property taxes	\$ _____	n/a	n/a
Other: _____	\$ _____	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____	\$ _____

Total square footage of home: _____

Square footage of home used for business: _____

Percentage of home used for business: _____