2012 PERSONAL TAX INFORMATION CHECKLIST

| 1. PERSONAL INFORMATION | | | |
|---|--|--|--|
| | Did you move house during the year? Yes/No | | |
| Canadian Citizen? Yes/No US Citizen? Yes/No Do you authorize CRA to provide your name, address and date of birth to Elections Canada for the purpose of updating the National Register of Electors? [yes/no]: | | | |
| Name | | | |
| [First name, middle initial, last n | name j | | |
| City/Prov | Postal Code | | |
| Telephone (home) | Telephone (work) | | |
| Fax (home) | Fax (work) | | |
| E-mail (home) | | | |
| SIN | Birth date [dd/mm/yy] | | |
| Marital Status | Occupation | | |
| | | | |
| 2. SPOUSE (including common-law If marital s | w) status changed during the year, enter date of change: | | |
| Name Birth d | date [dd/mm/yy] SIN Net Income (line 236)* | | |
| | | | |
| 3. DEPENDANTS (children, paren | nts and others dependant on you for financial support) | | |
| Name Relationship | Birth dateSINNet IncomeLive with[dd/mm/yy](line 236)*you ** | | |
| | | | |
| For any dependant listed in 2 or 3 who is infi | ïrm, please identify dependant and describe nature of infirmity: | | |
| * Provide details of income and deducti | ions only if we are not preparing the tax return. | | |

** Indicate whether dependant lived with you during the year [yes/no]

4. INCOME TAX REFUND AND GST CREDIT

Complete banking information to have your income tax refund and GST/HST credit payments deposited into your bank account.

Branch Number (5-digits) Institution Number (3-digits) Account Number (maximum 12-digits)

| 5. T-SLIPS (INCOME) <i>These are the standard prescribed forms on which Canadian income is reported:</i> | | Attached | |
|--|------------------------------|----------|--|
| Employment income | | | |
| Employment/commission income | T4, T4A | | |
| Director's fees | T4, T4A | | |
| Employee profit sharing | T4PS | | |
| Pension/retirement income | | | |
| Pension/annuity income | T4A, T4A(OAS), T4A(P) | | |
| Income from RRSP or RRIF | T4RSP, T4RIF | | |
| Investment income | | | |
| Interest & dividends | Τ5 | | |
| Mutual funds and other trusts | T3 | | |
| Other sources | | | |
| Income from RESP | T4A | | |
| Partnership income | T5013 | | |
| Employment insurance benefit | T4E | | |
| Universal Child Care Benefit | RC62 | | |
| Working Income Tax Benefit advance | RC210 | | |
| Purchase and sale of securities | T5008 | | |
| Tax shelters | T101, T5013 | | |

6. OTHER INCOME

Details of all other income including pensions received, directors fees, scholarships, etc.

7. INVESTMENTS (Income / Expenses)

Interest and other carrying charges paid to earn income from investments (including safety deposit box, accounting, and investment counsel fees).

Gains or losses from selling securities or other capital property–e.g. stocks, bonds, mutual funds, real estate (including broker's trading summaries or a transactions list showing <u>date of</u> <u>each purchase and sale</u>, currency, original cost and transaction fees). Also include Dec 31 Portfolio details for non RRSP account holdings.

Detailed listing of income and expenses from **rental properties** (request worksheet, if necessary), on a property by property basis (indicate ownership split).

Details regarding your interest in property held outside Canada (i.e. **foreign property**) –including bank accounts, investments, U.S. securities, trusts and real estate. (*Please consult me if you are unfamiliar with the reporting requirements*)

ALSO INCLUDE:

- 2011 Notice of Assessment/ Reassessment.
- Copy of 2011 personal tax return (if you are a first year client).

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8. DEDUCTIONS/TAX CREDITS

Please provide the receipts/forms received for these deductions/credits:

| For self <i>only</i> : | | |
|---|-------------------------------|--|
| RRSP contributions | | |
| Home Buyers Plan withdrawals or repayments | | |
| Lifelong Learning Plan withdrawals or repayments | | |
| Charitable donations (provide details for in-kind donatio | ons, such as shares of stock) | |
| Political donations | | |
| Professional/union dues | | |
| Disability supports expenses | | |
| Attendant care (if you claim the disability tax credit) | | |
| Interest paid on student loans | | |
| Property taxes or rent paid (see Note 7) | | |
| Legal fees (see Note 1) | | |
| Moving expenses (see Note 2) | | |
| Alimony, maintenance or child support paid or received | (see Note 3) | |
| Income tax installments (see Note 4) | | |
| For self and dependants: | | |
| Disability tax credit | T2201 | |
| Medical expenses (see Note 5) | | |
| Tuition fees and Education deduction (see Note 6) | T2202/2202A | |
| Public transit pass expenses | | |
| Childcare or adoption expenses (see Note 8) | | |
| Children's activity amount (see Note 9) | | |
| | | |

- **Note 1** If you incurred **legal expenses** in connection with employment termination, or claiming spousal or child support, please provide details.
- **Note 2** If you moved at least 40 kilometers closer to a new place of work or school, please contact me to request form T1-M.
- **Note 3** The amount of **alimony, maintenance or child support** paid or received in the year and the name, SIN, and address of the recipient, if applicable.

Note 4 Details regarding **income tax instalment** payments made during the year (include recent CRA Statement of Account or cancelled cheques).

- **Note 5** Include receipts for all **medical and health related expenses** including nursing, nursing home, prescription eyewear and drugs, supplemental health insurance premiums, medical devices and orthotics, ambulance, travel expenses, dental, chiropractic, naturopath, homeopath and other medical treatments, or cost of specialized services required because of a medical or physical impairment. If any of these expenses were covered by insurance, please provide copies of all claims reports issued by the insurer.
- Note 6 Dependant must complete and sign form T2202 if the credit is being transferred to a supporting person.
- Note 7 In some circumstances, property tax and/or rent paid results in a claim for Ontario tax credits.
- **Note 8** Details regarding **child care expenses** for children 16 & under, including the name of the provider; social insurance number, if an individual; fees for camps, programs and lessons.
- **Note 9** Fees paid for registering a child in a program of physical, artistic or developmental activity.

3

9. SELF-EMPLOYMENT OR UNINCORPORATED BUSINESS (Complete Parts A & B) EMPLOYMENT EXPENSES (Complete Part B Only–<u>Attach T2200 from Employer</u>)

PART A

| Registered business name: | Partnership [yes/no]: | |
|--|------------------------------------|--|
| Date business commenced [mm/yy]: | Fiscal year-end [dd/mm/yy]: | |
| GST registered [yes/no]: | Business #: | |
| Summary of income and expenses by | Attached | |
| Detailed listing of capital assets purchased or disposed of during the year (including furniture, equipment, computers). | | |
| Detailed listing of GST collected on revenue and GST paid on expenses, including copies of any GST returns filed (or not filed) and installments paid. | | |
| List of revenue billed at year-end, but not collected ("accounts receivable"). | | |
| List of expenses owing at year-end, b | out not paid ("accounts payable"). | |

PART B

Automobile expenses (<u>total</u> operating costs by category; parking, gas, maintenance and repairs, insurance, etc.; lease payments if leased *or* purchase date, finance agreement and all in cost, interest on car loan).

[Complete page 6]

Work space in the home expenses: (provide total expense where applicable)

[Complete page 6]

[Employees Only]

Detailed listing of **other employment expenses** *not* reimbursed by your employer (including meals, lodging, travel, parking, promotion, supplies, cell phone/telephone charges–*NOTE: restrictions apply and vary depending on whether you are a commissioned salesperson*).

SELF EMPLOYED or UNINCORPORATED BUSINESS Statement of income and expenses

Income

| TAL * <u>GST/HST*</u> incl excl |
|------------------------------------|
| |
| |

^{*} If you are using the HST Quick Method, *or* you have not tracked GST/HST separately, show expenses *including* the GST/HST. If you are claiming input tax credits (ITCs) *and* you have tracked GST/HST separately, then show expenses *excluding* GST/HST, and record related GST/HST paid in the column to the right.

^{**} Include telephone charges for a separate business or fax line, and business related long distance charges.

AUTOMOBILE EXPENSES: (provide <u>total</u> expense (do not prorate) for each vehicle used for business purposes during the year)

| | Vehicle 1 | Vehicle 2 |
|--------------------------------------|-----------|-----------|
| Make of vehicle | | |
| Date of acquisition | | |
| Date of disposition (if in the year) | | |
| | | |
| Cost before GST and PST * | | |
| GST and PST | | |
| | | |
| Km driven for business | | |
| Km driven in year (total) | | , |
| | | |
| Total expenses incurred | | |
| Fuel and oil | | |
| Maintenance and repairs | | |
| Insurance | | |
| License and registration | | |
| Interest | | |
| Monthly lease cost | | |
| Auto club (CAA) | | |
| Car washes | | |
| Parking | | , |
| Other (provide details) | | |

* Please provide purchase agreement (showing purchase price, trade-in value and down payment), or lease term sheet (showing Manufacturers List Price and down payment), as applicable.

WORK SPACE IN THE HOME: (provide <u>total</u> expense – do not prorate)

NOTE: restrictions apply and vary depending on whether you are self-employed or a commissioned salesperson.

| Office area (s.f.) | | |
|--------------------------|------|--|
| Total area (s.f.) | | |
| | | |
| Electricity | | |
| Water | | |
| Heat | | |
| Repairs and maintenance | | |
| Insurance | | |
| Property taxes | | |
| Mortgage interest | | |
| Rent | | |
| Security | | |
| Landscaping/snow removal | | |
| Other (provide details) | | |
| | | |

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