



**CANADIAN PERSONAL TAX RETURN QUESTIONNAIRE  
FOR A NON-RESIDENT OF CANADA  
2013**

<b>Name</b>				<b>Spouse Name</b>			
<b>Marital Status</b> as of December 31	Single <input type="checkbox"/>	Engaged <input type="checkbox"/>	Married <input type="checkbox"/>	Separated <input type="checkbox"/>	Common-law <input type="checkbox"/>	Divorced <input type="checkbox"/>	Widowed <input type="checkbox"/>
<b>Date of Birth</b> (yyyy-mm-dd)				<b>Date of Birth</b> (yyyy-mm-dd)			
<b>Social Insurance Number (SIN)</b>				<b>Social Insurance Number (SIN)</b>			
<b>Address</b> (CAN)				<b>Address</b> (outside Canada)			
<b>Telephone</b> (Business)				<b>Telephone</b> (Mobile or home)			
<b>Telephone</b> (Home)				<b>Fax</b>			
<b>Email Address</b>							

**If you meet all three (3) criteria below, you are exempt from Canadian tax under an income tax treaty.** You most likely do not need to complete any of the following pages. Simply complete this page and attach your Canadian income slips.

- 1) I was a US citizen or resident, or resident of another country with which Canada has a tax treaty;
- 2) I was not a resident of Canada; and
- 3) The only income I earned in Canada\* was **either**:
  - a) Self-employment income, and I had no permanent establishment in Canada (for a definition of Permanent Establishment, see "Self-Employment" on page 3), **OR**
  - b) Employment income from personal services. The amount earned was less than C\$10,000, or I met **both** of the following criteria:
    - i) I was physically present in Canada for less than 183 days during any 12-month period beginning or ending during the year, **and**
    - ii) The payment to me was not borne by a "permanent establishment" of my employer in Canada. "Borne by" generally means deducted by your employer in calculating income for tax purposes. You will have to check this question with your employer.

Signed \_\_\_\_\_

Dated \_\_\_\_\_

\* In most cases you can ignore interest, dividends, royalties and capital gains (except those on real estate).

If you had this	Please attach this	Check if applicable
You filed a Canadian return previously	All notices of (re)assessment for the most recent Canadian return.	<input type="checkbox"/>
We did not complete your Canadian return last year	A copy of the return.	<input type="checkbox"/>
Income tax instalments	A list of amounts and dates paid. CRA generally sends a statement in January.	<input type="checkbox"/>

**The following each relate to Canadian income & expenditures only:**

If you had this	Please attach this	Check if applicable
Employment	T4, RL-1 slips.	<input type="checkbox"/>
	If the income slip covers work you performed in more than one province, and/or outside of Canada, indicate how many days in each province, and outside Canada	<input type="checkbox"/>
Retirement income	NR4, T4A, T4A (OAS), T4A(P), T4PS, T4RSP, T4RIF slips.	<input type="checkbox"/>
Disposition of capital property (e.g. real estate)	Description of the property, sale proceeds, cost of acquisition, selling costs. Please also include the dates of acquisition and sale.	<input type="checkbox"/>
	Clearance certificate, comfort letter or application (T2062 T2062A, T2062C).	<input type="checkbox"/>
Disposition of property that was used as a principal residence	The value as of 1981-12-31, if it was owned then.	<input type="checkbox"/>
	Details of the purchase and sale of all other principal residences owned at the same time as this one.	<input type="checkbox"/>
Disposition of capital property owned before 1972	The value as of 1971-12-31.	<input type="checkbox"/>
Reserves from last year	The amount of the proceeds still unpaid at December 31.	<input type="checkbox"/>
Partnership	T5013, financial statements and other tax information.	<input type="checkbox"/>
	Details of expenses incurred outside of the partnership (e.g. auto, supplies, interest, office-in-home). If the partnership is a GST registrant, please indicate which expenses include GST.	<input type="checkbox"/>

If you had this	Please attach this	Check if applicable
Self-employment	I had a Permanent Establishment (“PE”) in Canada. Indicate which province(s): _____.  PE generally means any of the following:  -A physical location where you or your employees have rights to manage the premises (typically you would have leased or purchased the property);  -A person who regularly exercised the ability to conclude contracts; and  -For residents of some countries, including the US:  (a) You were physically present in Canada for 183 days or more in a 12-month period beginning <u>or</u> ending in the year, <u>and</u>  (b) During that 12-month period, the Canadian revenue exceeded 50% of the gross active business revenues.	<input type="checkbox"/>
	Financial statements or a list of receipts and expenditures (including health insurance premiums), and form T4A-NR.	<input type="checkbox"/>
	Capital asset (land, buildings, furniture, equipment, etc.) additions and disposals in the year.	<input type="checkbox"/>
	The original cost of all capital assets and year acquired;	<input type="checkbox"/>
	Portion of home used for personal purposes: _____ %;	<input type="checkbox"/>
	Undeducted home office expenses from last year.	<input type="checkbox"/>
RRSP contributions	RRSP receipts and Revenue Canada's “RRSP Contribution Limit Statement” (from most recent notice of assessment).	<input type="checkbox"/>
401(k) contributions	W2 or Statement as of December 31 that confirms your contributions and your employer’s contributions for the year (if applicable).	<input type="checkbox"/>
Professional, union dues	Receipts.	<input type="checkbox"/>
Canadian charitable donations	Receipts	<input type="checkbox"/>
Spousal support/alimony	Name of recipient	<input type="checkbox"/>
	Canadian SIN (if any)	<input type="checkbox"/>
	Amount paid & currency	<input type="checkbox"/>

If you had this	Please attach this	Check if applicable
Child or attendant care	Amount paid, name, address and Canadian SIN of each caregiver. This applies only if you are a single parent, or the lower income spouse.	<input type="checkbox"/>
Employment expenses	Form T2200 signed by your employer; a list of your expenses (e.g. auto, supplies, interest, office-in-home).  If your employer is a GST registrant, please indicate which expenses include GST.	<input type="checkbox"/>
Automobile expenses	Distance driven for employment and personal use, cost of gas, oil, insurance, license, interest, maintenance, automobile club.  <b>First year:</b> Original cost of car, undepreciated capital cost, lease cost, year bought/leased. If leased, list the manufacturer's suggested list price.	<input type="checkbox"/>
Work in Quebec	Confirm that you are not a Canadian citizen, or were covered by a drug plan while working in Canada. Otherwise, indicate the months you were not covered.	<input type="checkbox"/>

**The following are relevant only if your Canadian source net income is close to or above 90% of your worldwide net income, or if you are filing this return to report Canadian retirement income. In these cases, you can claim amounts paid outside Canada.**

If you had this	Please attach this	Check if applicable
World income	Income earned outside of Canada (please provide detail, such as W-2 and US form 1040 pages 1 and 2 and Schedule A).	<input type="checkbox"/>
Infirm dependants	Name, Canadian SIN, relationship, birth date, and income and infirmity of each dependant for the year.	<input type="checkbox"/>
Children's fitness	Amount paid, name of payee, name of child, detail of the expenses.	<input type="checkbox"/>
Medical expenses	Receipts for medical expenses for you, your spouse and dependants.  If you paid <u>private</u> health care insurance premiums, these can be credited.	<input type="checkbox"/>
Tuition fees and full-time educational attendance	TL11A, T2202 or T2202A slips. If the claim is in respect of a dependant, s/he must complete the form.	<input type="checkbox"/>
Disability	If this is your first year claiming a disability credit, you must complete Form T2201 (please contact our office if you require a blank copy of the form).	<input type="checkbox"/>

## Canadian Rental Property (C\$ unless noted)

### Address


### Usage

Days rented at fair market value  
 Days used personally  
 Days available but not rented out  
 Total


### Ownership

Co-owner or partner's name and address  
 Percentage of ownership


If financial statements are available, please attach a copy. Otherwise, provide the following information:

### Revenue

Rent  
 Other related income (i.e premiums and leases,  
 sharecropping)  
 Total


### Expenses

Advertising  
 Insurance  
 Interest  
 Office Expenses  
 Legal, accounting, and other professional fees  
 Management and administration fees  
 Maintenance and repairs  
 Salaries, wages, and benefits  
 Property taxes  
 Travel  
 Utilities  
 Motor vehicle expenses (not including capital  
 cost allowance)  
 Other expenses  
 Other expenses  
 Total


### Capital assets

Land\*  
 Building \*  
 Furniture

**Date Acquired**      **Cost**


\* Please ensure you provide the percentage split between building & land (i.e. 80/20 or 95/5)