

# PERSONAL TAX CHECKLIST

PLEASE ENSURE THAT EMAIL ADDRESSES AND CELL PHONE NUMBERS ARE UNIQUE TO EACH TAX PAYER

**Primary Contact Information**

Name: \_\_\_\_\_  
 Social Insurance No: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

**Spouse Information (if applicable)**

Name: \_\_\_\_\_  
 Social Insurance No: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

How would you like to receive your tax return?  Electronically by email  Paper

How do you prefer to sign your T183 and other forms?  Electronically via DocuSign  Paper

Current mailing address: \_\_\_\_\_

Did you move during the year?  Yes  No

Previous address if you moved during the year: \_\_\_\_\_

Date of move: \_\_\_\_\_ Province of Residence on December 31<sup>st</sup> \_\_\_\_\_

Did either of the following change during the year?

Marital Status: \_\_\_\_\_  Last Name: \_\_\_\_\_  
*(if yes, provide date of change)* *(if yes, provide new last name)*

Northern residents' deduction to claim:  Full  Half  None

Dependent Name	Relationship	Social Insurance No.	Date of Birth		
			Year	Month	Day
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

	Primary	Spouse
Are you a Canadian citizen?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you authorize CRA to give your name, address, date of birth and citizenship to Elections Canada to update the National Register of Electors?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you own foreign property with a cost of \$100,000 or more at any time during the year? (includes U.S. property and investment portfolios with stocks or mutual funds with U.S. or International holdings)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you sell property (principal residence, rental property, vacation home, etc.) during the year?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were you the legal owner (i.e. your name is on title with Land Titles) of a residential property in Canada, other than your principal residence, on December 31, 2022?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you guaranteed or co-signed any residential mortgages?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Do you have, or share custody of a child after a relationship breakdown? Does this child live with you? If yes, how often?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has your banking information changed since your last direct deposit from CRA? If yes, please provide a VOID cheque or a Direct Deposit form from your bank.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you pay personal tax installments during the year? If yes, \$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you withdraw RRSP's to buy a home or to finance full-time education for you or your spouse?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you earn any tips in 2022? If yes, \$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Internet Business Activity: Do you have a webpage or websites from which you earn income? If yes, provide website address: Percentage of gross income generated from the website: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you repay any COVID benefits in 2022? If so, please provide details.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
In 2022, have you spent more than 200 hours acting as a volunteer firefighter or a search and rescue volunteer?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Northern Residents Travel Benefit/Medical Travel**

Please include details for trips you and/or your family members took in 2022. Trips may include camping, weekend getaways, family vacations, travel for medical purposes, etc. Please provide at least TWO trips for each family member.

	Dates of Trip		Destination and reason for travel	Cost of total travel expenses	Cost of accommodation only	Names of family members in your household who travelled
	From (MM,DD,YY)	To (MM,DD,YY)				
Trip 1	_____	_____	_____	\$ _____	\$ _____	_____
Trip 2	_____	_____	_____	\$ _____	\$ _____	_____
Trip 3	_____	_____	_____	\$ _____	\$ _____	_____
Trip 4	_____	_____	_____	\$ _____	\$ _____	_____
Trip 5	_____	_____	_____	\$ _____	\$ _____	_____
Trip 6	_____	_____	_____	\$ _____	\$ _____	_____
Trip 7	_____	_____	_____	\$ _____	\$ _____	_____
Trip 8	_____	_____	_____	\$ _____	\$ _____	_____

Check the boxes below that are applicable to you and your spouse's tax return and include any additional details.

<b>Income</b>	<b>Primary</b>	<b>Spouse</b>
T4 - Employment Income	<input type="checkbox"/>	<input type="checkbox"/>
T4A - Other Income	<input type="checkbox"/>	<input type="checkbox"/>
T4AP - CPP Benefits	<input type="checkbox"/>	<input type="checkbox"/>
T4A OAS - Old Age Security	<input type="checkbox"/>	<input type="checkbox"/>
T4E - Employment Insurance Benefits	<input type="checkbox"/>	<input type="checkbox"/>
T4RSP - RRSP Income	<input type="checkbox"/>	<input type="checkbox"/>
T4RIF - RRIF Income	<input type="checkbox"/>	<input type="checkbox"/>
T5 - Interest and Dividend Income	<input type="checkbox"/>	<input type="checkbox"/>
T3 - Estate / Trust / Mutual Funds Income	<input type="checkbox"/>	<input type="checkbox"/>
T5007 - Social Assistance / WCB	<input type="checkbox"/>	<input type="checkbox"/>
T5008 - Statement of Security Transactions - provide cost when purchased	<input type="checkbox"/>	<input type="checkbox"/>
T5013 - Limited Partnership Income	<input type="checkbox"/>	<input type="checkbox"/>
Alimony / Spousal Support received	<input type="checkbox"/>	<input type="checkbox"/>
Scholarship, Fellowship, Bursary	<input type="checkbox"/>	<input type="checkbox"/>
Foreign sources	<input type="checkbox"/>	<input type="checkbox"/>
Capital Gains / Losses - provide an investment statement from your advisor	<input type="checkbox"/>	<input type="checkbox"/>
Bitcoin or other cryptocurrency transactions	<input type="checkbox"/>	<input type="checkbox"/>
Income from sources of the sharing economy such as Skip the Dishes, Airbnb, VBRO, Uber, Tappcar or other online or social media activity	<input type="checkbox"/>	<input type="checkbox"/>
Other slips: _____	<input type="checkbox"/>	<input type="checkbox"/>
<b>Deductions, Tax Credits and Expenses</b>	<b>Primary</b>	<b>Spouse</b>
RRSP contribution receipts	<input type="checkbox"/>	<input type="checkbox"/>
Union, professional and like dues	<input type="checkbox"/>	<input type="checkbox"/>
Child care expense	<input type="checkbox"/>	<input type="checkbox"/>
Employment expenses – T2200 required	<input type="checkbox"/>	<input type="checkbox"/>
Moving expenses	<input type="checkbox"/>	<input type="checkbox"/>
Spousal and/or child support paid	<input type="checkbox"/>	<input type="checkbox"/>
Adoption related expenses	<input type="checkbox"/>	<input type="checkbox"/>
Charitable and/or political donations	<input type="checkbox"/>	<input type="checkbox"/>
Tradesperson's tools acquired by employee	<input type="checkbox"/>	<input type="checkbox"/>
Tools acquired by apprentice mechanics	<input type="checkbox"/>	<input type="checkbox"/>
T2201 Disability Tax Credit	<input type="checkbox"/>	<input type="checkbox"/>
T2202 Tuition and education	<input type="checkbox"/>	<input type="checkbox"/>
T2202 Tuition transferred from dependent	<input type="checkbox"/>	<input type="checkbox"/>
Interest paid on Student Loans	<input type="checkbox"/>	<input type="checkbox"/>
Are you a first-time home buyer?	<input type="checkbox"/>	<input type="checkbox"/>
Caregiver amount	<input type="checkbox"/>	<input type="checkbox"/>
Investment counsel and management fees	<input type="checkbox"/>	<input type="checkbox"/>
Eligible educator school supply tax credit: Teachers / Early Childhood Educator school supplies	<input type="checkbox"/>	<input type="checkbox"/>
Interest on money borrowed to purchase investments	<input type="checkbox"/>	<input type="checkbox"/>
Pension Split: Spouses may jointly elect to split certain pension income reported by the other spouse	<input type="checkbox"/>	<input type="checkbox"/>
Medical expenses	<input type="checkbox"/>	<input type="checkbox"/>
Premiums paid to a private health plan e.g. Alberta Blue Cross	<input type="checkbox"/>	<input type="checkbox"/>
Digital News Subscription Tax Credit: If you subscribe to a Qualifying Digital News Subscription, please provide a receipt.	<input type="checkbox"/>	<input type="checkbox"/>
Canada Training Tax Credit: Provide details on tuition and your receipt if you took a course to improve your skills in an occupation.	<input type="checkbox"/>	<input type="checkbox"/>
Home Accessibility Tax Credit: Home renovations for disabled person or senior citizen	<input type="checkbox"/>	<input type="checkbox"/>
<b>New:</b> Labour mobility deduction for eligible tradespeople and apprentices working in the construction industry at a temporary work location	<input type="checkbox"/>	<input type="checkbox"/>
<b>New:</b> Purchase or upgrades to HVAC systems or purchases of stand-alone devices designed to filter air	<input type="checkbox"/>	<input type="checkbox"/>
<b>New:</b> Costs paid for surrogate mothers and fertility treatments	<input type="checkbox"/>	<input type="checkbox"/>