



Income Tax Return Organizer Checklist for Individuals

Personal Information

Name _____

Spouse (if applicable) _____

Address _____

Address (if Different) _____

Home Phone _____ Cell Phone _____

Home Phone _____ Cell Phone _____

Email _____

Email _____

Date of Birth _____ Citizenship _____

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- If I did not prepare your return last year, please ensure I have a copy of your previous year return.
- If I am not preparing your spouse's return and it will be filed separately, please enclose a copy of the return.

Important Questions

- Any changes in marital status since we last filed your taxes? Yes No Date of Change _____
- Did you or your spouse make tax installments for the current tax year? Yes No (If yes, please provide me with statements showing payment)
- **Are you set up with online access to CRA?** If not, consider registering as this will be necessary going forward
- If you are claiming any dependents, please provide name(s), date of birth(s) (attach a separate sheet if space is not sufficient) _____
- Do you wish to pension split with your Spouse? Yes No If yes, both need to initial: _____
- Full information on any new dependents (provide personal information full name and SIN) _____
- Did you pay property tax or rent during the tax year? Yes No If yes, Property Tax or Rent Amount paid was \$_____ and was paid to: _____
- **Did you sell your home in 2023?** Yes No If yes, contact me to discuss filing requirements.
- **Are you an employee working from home in 2023?** If yes, complete the employment expense worksheet.
- Are you, your spouse or your dependent eligible for a Disability Credit? Yes No If this is new, please contact me to discuss form requirements.

Did you or your spouse hold or own foreign property or hold an interest in a Foreign Trust, at any time in the tax year, with a total cost of more than \$100,000.00(Cdn). (Foreign Investment held by a Canadian Broker are also included)

I DID ___ DID NOT ___ HOLD OR OWN FOREIGN PROPERTY COSTING MORE THAN \$100,000.00

Initials of Self (& Spouse if applicable)

PLEASE CHECK THE CORRECT WORDING AND INITIAL AT THE END OF THE DECLARATION.

Details of Income and Expenses

Please check if applicable:

	Self	Spouse	
Business or Partnership Income	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Provide Details
Canada (or Quebec) Pension Plan	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	T4A (P)
Canada Revenue Agency Refund Interest	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Tax Assessment Notice
Capital Gains (Losses)	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Provide Details
Investment Income – Interest, dividends	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	T3, T5, T4PS, T5013, T5008
Employment Insurance Income	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	T4E
Employment Income (Salary)	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	T4, T4A
Foreign Pensions	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Provide Details
Guaranteed Income Supplements, Social Assistance, Worker’s Compensation Payments	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	T5007/ Provide Details
Old Age Security	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	T4A(OAS)
Other Employment Income not on T4	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Provide Details
Other Pension or Superannuation	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	T4A
Rental Income	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Provide Details of income & expenses
RRSP/RIF Income	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	T4RSP or T4RIF
Spousal Support Payments	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Provide Details
Employee Profit Sharing Plan	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Provide Details
EXPENSES			
Allowable Business Losses	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Provide Details
Attendant Care Expenses	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Provide Details
CERB Canada Emergency Relief Benefit Repaid	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	
Charitable Donations	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Receipts
Child Care Expenses	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Receipts
Digital News Subscription	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Receipts
Employment Expenses including GST/HST portion, i.e., car, office at home, etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Receipts/Form T2200/Form GST370
Interest Expense on monies borrowed to earn investment income or on Student Loans	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Provide Details
Management Fees paid for investments	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Provide Details
Medical Expenses (incl. insurance premiums)	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Receipts
Pension Contributions	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	T4/T4A
Political Donations	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Receipts
RRSP Contributions (incl. Jan 1 to Feb 29, 2024)	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Receipts
RRSP Homebuyer/Lifelong Learning Plan	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	
Withdrawal or Repayment Information	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	T1137
Seniors (over 65) home renos for healthy living	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Provide Details
Spousal Support Payments	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Provide Details
Tradespersons – Eligible Tool Expense	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Receipts
Tuition Fees (self, spouse, dependents)	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Receipts/Form T2202
Union or Professional Dues	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	T4 or Receipts
Other	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Details

NOTES
