

Gregory, Harriman & Associates LLP

Please ensure all 3 pages have been reviewed

Personal Tax Checklist 2016

(One form per couple/Children over 18 complete their own)

Our Personal Tax Checklist is designed to help you make this process as easy and efficient as possible. It also assists us, your accountants in ensuring that we are as complete and accurate as possible. Please review the checklist and put together the relevant slips and information. You can attach the slips and send in a hardcopy or scan the information and email to us at mailbox@gh-a.com, plus checklist.

Personal Tax Returns will NOT be efiled without payment and required signatures.

How do you want your prepared Personal Tax Return for 2016 returned to you?

Pick up at GH&A Send by Express Post (cost of \$40.00) Email with password - email address _____

PERSONAL & FAMILY INFORMATION

Name: _____ Spouse: _____

If you have moved in 2016/2017 please provide new address: _____

Have you sold a real estate property in 2016? (including principal residence) Yes No

If yes, what were the gross sale proceeds? _____ Date of Purchase? _____

Marital Status: Married Widowed Divorced Common-law Separated Single

If Marital status has changed during the year, provide date of change (YY-MM-DD): _____

If we are not preparing your spouse's return, provide his/hers net income : _____ (from line 236)

List any Dependents who were born/adopted in 2016:

Name	Date of Birth	Son/daughter

Should any of your dependents who are not filing income tax returns earn income; please provide a summary of their earnings to us. Yes N/A

Do you, your spouse or any of your dependents qualify for the Disability Tax Credit? Yes No

INFORMATION SLIPS – Ensure all T-Slips are provided

Employment and Other Income - T4, T4A Government – (T4A, T4, T4(P), T4E), T4,(OAS), RC62, T5007
 Do you have any Tips & Gratuities to report? \$ _____ Investment/Interest (T5, T3, T5013 partnership income, T101)
 Pension Retirement (T4RSP, T4RIF) Foreign Slips – Investment/Employment/Pension

Do you expect to receive any additional slips? Yes No - If yes, please provide as soon as you receive them

SELF-EMPLOYMENT INCOME (FARMING/BUSINESS/PROFESSIONAL/RENTAL) go to page 3 or to www.gh-a.com
Farming Reminder Checklist Business/Professional Income Checklist Rental Income Checklist GST Filing

INVESTMENTS N/A

Trading Summaries from Broker for realized gains/losses Interest paid on investment loans
 Investment Counseling/Management fees Income/Gains/Losses for Securities held outside brokerage

Can we contact your investment advisor: Yes No * If yes, please provide advisor's information:

Name : _____ phone number: _____ email: _____

DEDUCTIONS AND CREDITS - IF APPLICABLE ALL RECEIPTS/SLIPS MUST BE PROVIDED

<input type="checkbox"/> RRSP Contributions up to March 1, 2017	<input type="checkbox"/> Union and Professional Dues
<input type="checkbox"/> Public Transit	<input type="checkbox"/> Donations (<i>charitable/political</i>)
<input type="checkbox"/> Home Accessibility Tax Credit (<i>over 65 years or disabled</i>)	
<input type="checkbox"/> Tuition Slip & Exam fees (T2202 – outside of Canada TL11A) – <i>If the credit is to be transferred advise: spouse</i> <input type="checkbox"/> <i>parent</i> <input type="checkbox"/> <i>grandparent</i> <input type="checkbox"/>	
<input type="checkbox"/> Student Loan Interest	<input type="checkbox"/> Child Care (including day/summer camps)
<input type="checkbox"/> Children's Fitness Credit (<i>Limit decreased - \$500/child</i>)	<input type="checkbox"/> Children's Arts Credit (<i>\$250/child</i>)
<input type="checkbox"/> Alimony/Maintenance-Exclude Child Support	<input type="checkbox"/> Family Caregiver Amount
<input type="checkbox"/> First Time Home Buyers Credit	<input type="checkbox"/> Volunteer Firefighter Credit (<i>over 300 hours</i>)
<input type="checkbox"/> Medical Expenses (<i>see below checklist</i>)	<input type="checkbox"/> Educator School Supply Credit
<input type="checkbox"/> Moving Expenses – <i>Employment/Business/ Students (GH&A will need to determine if you are eligible)</i>	
<input type="checkbox"/> Employment Expenses (<i>a signed T2200 must be provided</i>)-GH&A LLP will need to review to advise what is available for deductions	

Medical Expense Checklist

<input type="checkbox"/> Private Health Care Costs/Attendant Care & Group Home (attach receipts)
<input type="checkbox"/> Other Dental & Medical (receipts of health plan expense coverages)
<input type="checkbox"/> Travel Costs (if over 40 km one way) – provide listing of trips, dates and mileage
<input type="checkbox"/> Meals (if travel over 80 km one way) – provide listing of trips, dates and mileage
<input type="checkbox"/> Prescriptions – (detailed listing from pharmacy including RX#, Drug Name, DIN #, & Doctor's Name)
<input type="checkbox"/> Other Medical Expenses (attach receipts) – see www.gh-a.com for listing of eligible medical expenses and authorized medical practitioners

OTHER IMPORTANT MATTERS

Do you authorize CRA to provide information to Elections Canada : YES NO
(Information to be provided : date of birth, address and citizenship)

Are you a Canadian citizen? YES NO
 Is your spouse a Canadian citizen? : YES NO
 If no, please state what other citizenship you/spouse hold: _____

Have you spent more than 120 days in the United States in any of the last 3 years? If yes, please provide the number of days per calendar year :
 2016 _____ 2015 _____ 2014 _____
 GHA LLP to prepare IRS form 8840 if required Client will be filling out their own 8840 form

Do you and/or spouse own/hold foreign property/securities for the purpose of generating income with a total cost of more than a \$100,000 Canadian total?
 YES * NO *(does not include RRSP assets)* * (If yes, form T1135 will be required at an additional cost)

CONSENT TO USE PERSONAL AND/OR FINANCIAL INFORMATION

Gregory, Harriman & Associates LLP uses and discloses your personal and/or financial information to their employees in accordance with their Privacy Policy for employees to prepare and complete your personal tax return for the year 2016

Your personal and financial information may include, but not limited to, your name, home address, home telephone number, date of birth, social insurance number, name of your spouse, name of your dependents, current employment status, name of your employer, employer's address, employer's telephone number, employment income information, business income information, investment income information, other income information, and any other relevant information that Gregory, Harriman & Associates LLP, may require to complete your personal tax return.

YES NO

Gregory, Harriman & Associates LLP is authorized to retain the current personal and/or financial information and historical personal and/or financial information for as long as it may be required by legislation, i.e. the Income Tax Act, and/or as may be required to document future support program applications and/or future external financing applications and doing so thereafter for a reasonable period of time.

I acknowledge my right to access the applicable personal and financial information collected by Gregory, Harriman & Associates LLP by contacting the Privacy Officer.

Date: _____ Client Signature _____

Date: _____ Client Signature _____

