RESET ALL

Abdullah CPA Professional Corporation

T1 Personal Tax Return

To help you assemble your financial information for the preparation of your personal income tax return, please keep this checklist handy. The checklist should be completed and returned to us together with the financial information assembled.

Personal Information

Name: _____

SIN Number: _____

Date of Birth:____/____/____(MM/DD/YY)

Home Phone #: _____

Cell Phone #: _____

E-mail: _____

Address: _____

City: _____

Province/State:_____Postal Code:_____

Country: _____

Did you: ○ Emigrate from Canada ○ Immigrate to Canada ○ N/A

Emigration date: ____/____/____ MM DD YY

Immigration date: ____/____/____ MM DD YY

Spouse Information (If Applicable)

Name of Spouse:_____

SIN Number:_____

Date of Birth:____/____/____(MM/DD/YY)

Home Phone #: _____

Cell Phone #: _____

E-mail:_____

Address: _____

City:_____

Province/State:_____Postal Code:_____

Country: _____

Did you: ○ Emigrate from Canada ○ Immigrate to Canada ○ N/A

Emigration date: ____/____/____ MM DD YY

Immigration date: ____/____/____ MM DD YY

Marital Status: ○ Single ○ Married ○ Common-Law ○ Separated ○ Divorced ○ Widowed

Did your marital status change from last year's tax return? ○ Yes

Date status changed: ____/____/____ MM DD YY ○ No

Are we preparing a tax return for your spouse? ○ Yes ○ No ○ N/A

If we are NOT preparing a tax return for your spouse, please provide: *Income figure from Line 236 on page 3* $_____

Please list all dependants below:

Name	Relationship	Birthday (MM/DD/YY)	SIN #	*Net Income During* Year
		/ /		$
		/ /		$
		/ /		$
		/ /		$
		/ /		$

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

If yes, please indicate whom: _____

Please provide the following documents:

1. ***Latest Notice of Assessment***
2. ***Last year's tax return <u>OR</u> a copy of the last return you filed***

Other Important Matters

Are you a Canadian citizen? ○ Yes ○ No

Do you authorize the CRA to provide information about you to Elections Canada? ○ Yes ○ No

Do you own/hold foreign property with a total cost of more than $100,000 (CAD)? ○ Yes ○ No

Have you made installment payments for the tax year? ○ Yes ○ No
If yes, how much?: $_____

Do you want your tax refund deposited directly to your bank account?

○ Yes (*please provide* a void cheque) ○ Direct deposit requested last year ○ No

How do you want your tax return delivered once it has been completed by us? (Please check all that apply)

☐ Electronic copy sent to your email

☐ Mailed to your home address

☐ Courier to your home address

☐ Hold for pick-up

Other (please specify): _____

Source of Income

If you have any of the following sources of income, please check all those that apply. Please send ***tax slips*** to us in all cases.

Source:	Slips to attach:
☐ Employment income	T4
☐ Commission income	T4 or T4A
☐ Profit sharing income	T4PS
☐ Taxable disability income	T4A
☐ Old Age Security	T4(OAS)
☐ Canada Pension Plan	T4AP
☐ Other pensions/annuities	T4A
☐ Employment insurance benefits	T4E
☐ Dividend income	T3 or T5
☐ Interest income	T3 or T5
☐ Limited partnership income	T5013
☐ RRSP income	T4RSP
☐ RRSP withdrawals	T4RSP
☐ RRIF income	T4RIF
☐ Scholarships & bursaries	T4A
☐ Worker's compensation benefits	T5007
☐ Social assistance payments	T5007
☐ Self-employed income	Summarize on page 3
☐ Rental income	Summarize on page 4
☐ Sale of investments (T5008)	Summarize on page 4
☐ Sale of real estate	Summarize on page 4
☐ Spousal support received	$_____
☐ Child support	$_____
☐ Tips & gratuities	$_____
☐	
☐	

Deductions and Tax Credits Available

Other: $_____

Other: $_____

Other: $_____

Other: $_____

Other: $_____

If you have any of the following deductions and tax credits, please check all those that apply. Please *include receipts* or supporting documents in all cases.

Deductions and Tax Credits:

- ☐ RRSP contributions
- ☐ RRSP contributions - Spouse
- ☐ Union dues & professional fees
- ☐ Child care expenses
- ☐ Moving expenses
- ☐ Interest paid on investment loans
- ☐ Investment counseling fees
- ☐ Interest paid on student loans
- ☐ Tuition fees - Self T2202
- ☐ Tuition fees - Spouse/Children
- ☐ Charitable donations
- ☐ Political party contributions - Federal/Political
- ☐ First-time home buyer's amount
- ☐ Home Buyer's Plan withdrawals/payments
- ☐ Lifelong Learning Plan withdrawals/payments
- ☐ Employment expenses — Summarize on page 3
- ☐ Spousal support payment — $_____
- ☐ Medical expenses — $_____
- ☐ Other — $_____
- ☐ Other — $_____
- ☐ Other — $_____

Notes

If you need to clarify any of your income and/or deductions OR have any other income and/or deductions that are not listed on the previous page that you need to explain, please write them in the box below. *Please attach supporting receipts*.

Employment Expenses

Please provide us with a signed T2200 - Declaration of Conditions of Employment from your employer.

Travel $_____

Parking $_____

Supplies (stationary, other) $_____

Telephone $_____

Salaries paid to an assistant

$

_____

Office rent $_____

Vehicle expenses Summarize on this page

Home office expenses Summarize on this page

The following expenses apply to commission employees only:

Accounting & legal $_____

Advertising & promotion $_____

Meals & entertainment $_____

Rental of office equipment $_____

Training $_____

Self-Employed Income & Expenses

Name of Business: _____

_____

Type of Business: _____

_____ Name of Partner:_____% owned:_____

% SIN # of Partner: _____

Business Number:_____(if applicable) Access Code #:__(For HST/GST Return)

Are we preparing your GST/HST Return? Yes No

Loan interest $_____

Lease payments $_____

Car washes $_____

Parking (for business purposes only) $_____

Other $_____

Vehicle Expenses

Year, make & model: _____

Purchase/sale price: $_____

Date of purchase (MM/DD/YY):____/____/____

OR Date lease began (MM/DD/YY):____/____/____

Kilometres (km) driven for business purposes in the year:

_____km

Total kilometres (km) driven in the year:_____km

Expenses (Annual Amount):

Fuel $_____

Repairs & maintenance $_____

Insurance $_____

Licensing & registration fees $_____

(*If yes, please attach copy of previous year's return)*

Do the following amounts below include GST/HST?

○ Yes ○ No

Revenue $_____

Expenses:

HST on sales collected $_____

Meals & entertainment $_____

Insurance $_____

Interest & bank charges $_____

Licenses, dues, memberships & subscriptions $_

Office expenses $

_____

Supplies $_____

Legal, accounting & other professional fees .. $_____

Rental $

_____ Salaries

$

_____

Travel $_____

Telephone $_____

Vehicle expenses Summarize on this page

_____..... $_____

Home Office (For Self-Employed & Employment Expenses)

Total % of home used for business/employment:_____

% Total square feet of home:_____sqft

Heat $_____

Hydro $_____

Water $_____

Repairs & maintenance $_____

Insurance $_____

Property taxes $_____

Rent $_____

Mortgage interest (self-employed only) $_____

Home Office Expenses (During the COVID-19 Pandemic)

Please select one of the following options that you would like to claim:

- ☐ 1) A temporary flat rate of $2.00 for each day you worked from home in 2022 due to the COVID-19 pandemic, up to a maximum of $400.00 to cover all of your home office expenses
- ☐ 2) Home office expenses you paid while working at home due to the COVID-19 pandemic, and you have supporting documents
- ☐ 3) Home office expenses, and may have other employment expenses to claim (such as motor vehicle expense), and you have supporting documents

Conditions of Employment:

- ☐ 1) Did this employee work from home due to COVID-19?
- ☐ 2) Did you or will you reimburse this employee for any of their home office expenses?
- ☐ 3) Was the amount included on this employee's T4 Slip?

Please Select One of the Following Options:

- ☐ **1) Simplified Method**
  - o $2.00 x Total Number of Days You Worked From Home Due To COVID-19
- ☐ **2) Detailed Method:**
  - o Worked more than 50% of the time from home for a period of at least a month (four consecutive weeks) in 2022. The period can be longer than a month.
  - o Have a completed and signed T2200 Form, Declaration of Conditions of Employment for working from home due to COVID-19, from your employer
  - o Kept all your supporting documents

Expenses :

- Electricity, heat, water, Internet fees _____
- Maintenance (cleaning supplies, light bulbs etc) _____
- Home insurance (applies to commission employee only) _____
- Property Taxes _____
- Office supplies (postage, stationery supplies etc) _____
- Other expenses (rent etc) _____

Principal Residence Exemption

Did the taxpayer dispose of a principal residence in the current taxation year for which he or she claims the total or partial exemption?

Yes No

Did you stay in Ontario in an eligible accommodation between January 1 and December 31, 2022, for leisure purposes, and you lived in Ontario during the year?

Yes No

☐

Did you (or your spouse or common-law partner) acquire a qualifying home and you did not live in another home that you (or your spouse or common-law partner) owned in the year of the acquisition or in any of the four preceding years

(first-time home buyer)? ☐

Yes No

Rental Property

Includes the Statement of Adjustments for purchase

Please indicate if you are the sole owner of the property or if you have a co-owner:

○ I'm the sole owner ○ I have a co-owner

If you have a co-owner, please provide their details below:
Name: _____
SIN #:_____owned:_____%

Date Rental Started (MM/DD/YY):____/____/____
Date of Purchase (MM/DD/YY):____/____/____
Address: _____
City:_____Province/State: _____
Postal Code:_____Country: _____

Total rental income $_____

Expenses (Total Annual Amount)

Advertising $_____
Insurance $_____
Mortgage Interest $_____
Office expenses $_____
Legal, accounting & other professional fees $_____
Management & administration fees $_____
Repairs and maintenance $_____
Salaries, wages & benefits $_____
Property taxes $_____
Travel $_____
Utilities $_____
Other: $_____
Major renovations & purchases (i.e. appliances):
_____..... $_____
_____..... $_____

Sale of Real Estate

Includes the State of Adjustments and Trust Leger for <u>BOTH</u> the sale and purchase. Also include the sale agreement and purchase agreement.

Please indicate if you are the sole owner of the property or if you have a co-owner:

○ I'm the sole owner ○ I have a co-owner

If you have a co-owner, please provide their details below:
Name: _____
SIN #:_____owned:_____%

Address:_____
_____ City:
_____Province/State:
_____ Postal Code:
_____Country:
_____

Date purchased (MM/DD/YY):____/____/____
Total purchase price $_____
Land transfer tax $_____
Legal costs paid on purchase $_____
Adjustments and/or major improvements during ownership:
_____..... $_____
_____..... $_____

Date sold (MM/DD/YY):____/____/
Sale price $_____
Legal costs paid on sale $_____
Commission paid on sale $_____
Other selling expense:
_____..... $_____

Sale of Investments (not including investments held in your RRSP/TFSA or other registered plans)

If you have slip T5008, please fill in the details for each transaction, or summarize each portfolio.
Include the following documents for <u>ALL NON-RRSP</u> or <u>NON-Registered plans</u>:

- December 31st year end statements
- Realized gain/loss report from broker, cost of book value from broker
- Brokers statement for both purchase and sale (only if realized gain/loss report is not available)

Name of Stock	Date of Purchase (MM/DD/YY)	Date of Sale (MM/DD/YY)	Currency	# of Shares Sold	Sale Proceeds	Commissions	Cost of Shares
	/ /	/ /			$	$	$
	/ /	/ /			$	$	$
	/ /	/ /			$	$	$
	/ /	/ /			$	$	$

	/ /	/ /			$	$	$