

**STAN W. LEE**  
 CHARTERED ACCOUNTANT  
 AN INCORPORATED PROFESSIONAL

**PERSONAL INCOME TAX CHECKLIST**

Name \_\_\_\_\_ SIN \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone (Residence) \_\_\_\_\_ (Business) \_\_\_\_\_

Telephone (Cell) \_\_\_\_\_ (Fax) \_\_\_\_\_

Birth date \_\_\_\_\_ Marital status \_\_\_\_\_

Spouse's name \_\_\_\_\_ Spouse's SIN \_\_\_\_\_

Spouse's birth date \_\_\_\_\_

If Change in Marital Status, provide date of change \_\_\_\_\_

If Residency has changed for tax purposes, provide date of change \_\_\_\_\_

Income Sources:

	<u>Yourself</u>	<u>Spouse</u>
- Did you earn any employment or commission income? If so, please attach all T4 and T4A slips	<input type="checkbox"/>	<input type="checkbox"/>
- Did you receive any Old Age Security, Canada Pension Plan benefits or other pensions or superannuation? If so, please attach T4A (OAS), T4A (P) and T4A slips.	<input type="checkbox"/>	<input type="checkbox"/>
- Did you receive Universal Child Care benefits? Please attach RC62 slip.	<input type="checkbox"/>	<input type="checkbox"/>
- Did you receive any employment insurance benefits? If so, attach T4E slip.	<input type="checkbox"/>	<input type="checkbox"/>
- Did you earn any interest or dividend income? If so attach T5, T3 and/or T600 slips.	<input type="checkbox"/>	<input type="checkbox"/>
- Did you own any Canada Saving Bonds? Please ensure that I have the series number and face value of all bonds.	<input type="checkbox"/>	<input type="checkbox"/>

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	<u>Yourself</u>	<u>Spouse</u>
- Did you make any investments in limited partnerships? If so, please attach T5003, T5013 slips and related interest expense on money borrowed to invest in partnerships.	<input type="text"/>	<input type="text"/>
- Did you own any rental properties? Please ensure that I have the gross rental incomes as well as all related expenses including: property taxes, repairs and maintenance, mortgage interest, insurance, utilities, strata fees, advertising and management fees.	<input type="text"/>	<input type="text"/>
- Did you buy or sell any mutual funds, stocks, precious metals, etc. if so, please provide details as to acquisition cost, sales proceeds, commissions paid, dates acquired and sold.	<input type="text"/>	<input type="text"/>
- Did you sell any real estate properties? If so, please provide acquisition date, cost, sales proceeds, commissions and legal expenses incurred.	<input type="text"/>	<input type="text"/>
- Did you receive any child support, alimony or separation allowance? If so, how much and what portion if non-taxable?	<input type="text"/>	<input type="text"/>
- Did you withdraw funds from your R.R.S.P. plan? If so, attach T4RSP slip.	<input type="text"/>	<input type="text"/>
- Did you withdraw any funds from a registered disability savings plan. If so, include T4A slip.	<input type="text"/>	<input type="text"/>
- Did you receive any scholarships, bursaries, and research grants or directors fees? Please provide details.	<input type="text"/>	<input type="text"/>
- Did you earn any self-employed or commission income? Please provide details as to income and all related business expenses. I will be able to assist you in explaining which expenses you can write off.	<input type="text"/>	<input type="text"/>
- Did you operate a farm or a fishing boat? If so, provide details of income and expenses.	<input type="text"/>	<input type="text"/>
- Did you receive any WCB benefits or social assistance benefits? If so, please attach T5007 slips.	<input type="text"/>	<input type="text"/>
- Did you claim a reserve on self-employed income as a result of conversion to a December 31st year-end? If so, please provide details.	<input type="text"/>	<input type="text"/>

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	<u>Yourself</u>	<u>Spouse</u>
- Did you make any R.R.S.P. contributions? If so, please attach receipts.	<input type="text"/>	<input type="text"/>

Deductions:

- Were you required to pay union, professional or association dues? If so, attach receipts.	<input type="text"/>	<input type="text"/>
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- Did you pay any childcare expenses? If so, please ensure that I have amounts paid, name, address and SIN of recipient. Please indicate which child expenses relate to.	<input type="text"/>	<input type="text"/>
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- Did you incur any attendant care expenses? If so provide name, SIN and amount.	<input type="text"/>	<input type="text"/>
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- Have you made any loans to or investments in Canadian controlled private corporations from which you have lost money? If so, provide details.	<input type="text"/>	<input type="text"/>
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- Did you move from another city to take on a job or attend post secondary school? If so, please provide former address and all related moving costs including 15 days temporary lodging and meals at new location, and real estate commissions, mortgage penalty, legal fees and other cost of selling home at former location.	<input type="text"/>	<input type="text"/>
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- Did you pay any child support, alimony or separation allowance? If so, please provide amount, name and social insurance number of payee.	<input type="text"/>	<input type="text"/>
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- Did you borrow money for investment purposes? If so, how much interest did you pay?	<input type="text"/>	<input type="text"/>
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- Did you pay any investment counsel fees, safety deposit rental charges, or accounting fees? Please provide details.	<input type="text"/>	<input type="text"/>
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- Were you required by your employer to use your own automobile to carry out employment duties or maintain an office in home? If so, please attach form T2200 and provide details of all expenses including auto lease payments or purchase price of vehicle, interest expense on auto loan, auto insurance premiums, gas, repairs and maintenance, etc.	<input type="text"/>	<input type="text"/>
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- |   | <u>Yourself</u>      | <u>Spouse</u>        |
|---|----------------------|----------------------|
| - Did you incur any capital losses or non-capital losses in prior taxation years? If so, please ensure that I have details.   | <input type="text"/> | <input type="text"/> |
| - Did you incur any expenses for disability support services or purchased devices that were used because of your impairment. Examples include attendant care services, Braille, deaf, speech or other similar devices   | <input type="text"/> | <input type="text"/> |
| - Do you live in a prescribed area of Northern British Columbia? Please contact me about the Northern deduction.  | <input type="text"/> | <input type="text"/> |
| - Do you have any children or other dependants, which you support? If so, please ensure that I have the names, birth dates and income of all dependants. Please note that the "caregiver amount" will provide credit for dependents including parents or grandparents over of 65 years old. | <input type="text"/> | <input type="text"/> |

\_\_\_\_ Name      \_\_\_\_ Birth date      \_\_\_\_ Net Income

- |   |                      |                      |
|---|----------------------|----------------------|
| - Did you, your spouse or dependent children under 19 years of age, take public transit regularly? Include cost of monthly or annual public transit passes. Keep all receipts in case the tax department asks to see them.  | <input type="text"/> | <input type="text"/> |
| - Did you adopt a child during the year? Please provide details of adoption expenses.   | <input type="text"/> | <input type="text"/> |
| - Did you have children under the age of 16 (or under 18 if disabled), who participated in activities which involve significant physical activity for at least an eight week period with a minimum of one session per week? Please provide details for each child and costs incurred. | <input type="text"/> | <input type="text"/> |
| - Are you making a claim for the disability amount? If so, please ensure that a Form T2201 has been filed.  | <input type="text"/> | <input type="text"/> |
| - Are you claiming a "caregiver amount" credit for supporting other dependents? If so, please provide name, SIN, and net income of dependent.   | <input type="text"/> | <input type="text"/> |
| - Did you pay any interest on student loans? If so, how much.   | <input type="text"/> | <input type="text"/> |

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	<u>Yourself</u>	<u>Spouse</u>
- Did you attend any courses? If so, please attach tuition fee receipt or T2202.	<input type="text"/>	<input type="text"/>
- Did your children attend post secondary courses and were unable to fully utilize their tuition fee receipts? Please explain.	<input type="text"/>	<input type="text"/>
- Did you incur any dental or medical expenses? Please attach receipts. Medical expenses include optical, prescriptions, extended health insurance, travel insurance, chiropractic, hospital fee, etc.	<input type="text"/>	<input type="text"/>
- Did you make any charitable or political donations? Please attach receipts.	<input type="text"/>	<input type="text"/>
- Did you pay any personal tax installments? If so, please attach form PD7DR - tax installment receipt.	<input type="text"/>	<input type="text"/>
- Did you or will you incur any renovation expenses for the period from January 27, 2009 to February 1, 2010? Please retain all agreements, invoices and receipts for work performed. These should be submitted with your 2009 tax records to apply for the 2009 home renovation tax credit.	<input type="text"/>	<input type="text"/>
- Do I have a copy of your most recently filed personal tax return? If not, please attach.	<input type="text"/>	<input type="text"/>
- Do I have a copy of your most recent Notice of Assessment? If not, please attach.	<input type="text"/>	<input type="text"/>
- Does the total of your investment assets held "Offshore" exceed \$100,000 at any time since 1996? Did you own or control 10% or more of the shares in a foreign company since 1996? Did you receive a loan from and or are a beneficiary of a foreign trust(s) since 1996? If any are applicable, please contact my office for filing requirements and deadlines.	<input type="text"/>	<input type="text"/>