



### 2018 Personal Tax Organizer

Thank you for the opportunity to support you during tax time. Please use the below checklist to assist in gathering important information for preparation in filing your taxes.

PERSONAL			
Name:			
Address with postal code:			
Phone	Home:	Business:	Cell:
Email:			
What is the best way to reach you? <input type="checkbox"/> email <input type="checkbox"/> home phone <input type="checkbox"/> business phone <input type="checkbox"/> cell			
Marital status as of December 31, 2018? <input type="checkbox"/> single <input type="checkbox"/> common-law <input type="checkbox"/> Married			
Dependents or other important information?			

- Would you like elections Canada to have your information for voting purposes?  YES  NO
- Would you prefer an electronic or paper copy of your finished return?  YES  NO
- Did you sell any capital items – stocks, bonds, property?  YES  NO
- Did you sell your personal residence?  YES  NO

FOREIGN PROPERTY	
Are you a Canadian citizen	<input type="checkbox"/> yes <input type="checkbox"/> no If no, please specify
Please confirm each of the following for 2018 tax year. If you answer yes, an additional CRA declaration form is needed.	
<input type="checkbox"/> YES. I <u>did own</u> or have an interest in any foreign property with a cost of more than CAN \$100,000	<input type="checkbox"/> NO. I did not own any foreign property with a cost of more than CAN \$100,000
<input type="checkbox"/> YES. I transferred or loaned money to a foreign trust, or received a loan or distribution from a foreign trust in 2018	
<input type="checkbox"/> NO.	

INCOME	
Personal	Investment
<input type="checkbox"/> T4, T4PS T4A - Salaries and Employment Income	<input type="checkbox"/> T3 - Mutual Fund Income
<input type="checkbox"/> Other Employment Benefits	<input type="checkbox"/> T5, T4PS - Interest and Dividends
<input type="checkbox"/> T4A(OAS) - Old Age Security Benefits	<input type="checkbox"/> T600 - Canada Savings Bonds
<input type="checkbox"/> T4A(P) - Canada Pension Plan Benefits	<input type="checkbox"/> T5013 - Limited Partnership Income (Loss)
<input type="checkbox"/> T4A - Other Pensions or Superannuation	<input type="checkbox"/> T5008 - Statement of Security Transactions
<input type="checkbox"/> T4RIF- RRIF Income	<input type="checkbox"/> Capital Gains / Losses (summary schedule)
<input type="checkbox"/> T4RSP - RRSP Income/Home Buyer's Plan withdrawal	<input type="checkbox"/> Rental Income (summary schedule)
<input type="checkbox"/> T4E – Employment Insurance Benefits	<input type="checkbox"/> Foreign Income
	<input type="checkbox"/> T5007 – WCB Benefits/Social Services Benefits

Other	Business
<input type="checkbox"/> Alimony Received	<input type="checkbox"/> Self - Employed Earnings
<input type="checkbox"/> Taxable Child Support Received	<input type="checkbox"/> Self - Employed Commission Earnings Information
<input type="checkbox"/> Scholarships / Bursaries	<input type="checkbox"/> Professional Earnings Information
<input type="checkbox"/> Other - Specify	<input type="checkbox"/> Farming / Fishing Earnings Information

Other Deductions	Non-Refundable Credits
<input type="checkbox"/> RRSP Receipts	<input type="checkbox"/> Married Amount - Spouses Net Income \$ _____
<input type="checkbox"/> Union, Professional Dues	<input type="checkbox"/> Equivalent to Married Amount (Full Details Required)
<input type="checkbox"/> Child Care Expenses (Full Details Required)	<input type="checkbox"/> Social Benefit Repayments
<input type="checkbox"/> Disability Support Deductions	<input type="checkbox"/> Public transit passes amount
<input type="checkbox"/> Allowable Business Investment Loss	<input type="checkbox"/> Children's Fitness and Arts receipts
<input type="checkbox"/> Moving Expenses (Full Details Required)	<input type="checkbox"/> Homebuyers Credit
<input type="checkbox"/> Alimony Paid	<input type="checkbox"/> Adoption Expenses
<input type="checkbox"/> Deductible Child Support Paid	<input type="checkbox"/> Disability Tax Credit Certificate
<input type="checkbox"/> Safety Deposit Box Charges	<input type="checkbox"/> Caregiver amount (Full Details required)
<input type="checkbox"/> Interest and Carrying Charges on Investments	<input type="checkbox"/> Interest Paid on Student Loans
<input type="checkbox"/> Investment Counsel & Accounting Fees	<input type="checkbox"/> T2202/T2202A - Tuition Fees / Education/Textbook
<input type="checkbox"/> Deductible legal fees	<input type="checkbox"/> Medical/ Dental/Vision Receipts
<input type="checkbox"/> Employment Expenses (summary)	<input type="checkbox"/> Attendant Care Expenses
<input type="checkbox"/> T2200 - Declaration of Conditions of Employment	<input type="checkbox"/> Charitable Donations (official tax receipts)
<input type="checkbox"/> Tradespersons Tools Expenses	<input type="checkbox"/> Political Contribution Receipts
<input type="checkbox"/> Premiums paid to Private Medical Insurance plans	<input type="checkbox"/> Apprentice Job Creation Credit

OTHER INFORMATION	
<input type="checkbox"/> 2017 Notice of Assessment (CRA)	<input type="checkbox"/> Summary of 2017 Tax Instalment Payments

GENERAL
Please indicate whether you are willing to authorize Canada Revenue Agency to provide your name, address, and date of birth to Elections Canada to update your information for the National Register of Electors.
Taxpayer <input type="checkbox"/> yes <input type="checkbox"/> no                                Spouse <input type="checkbox"/> yes <input type="checkbox"/> no
For additional information, please use the following area: