

## 2016 PERSONAL INCOME TAX QUESTIONNAIRE

This questionnaire is designed to assist you in compiling the information necessary to prepare your 2016 personal tax return.

### PERSONAL INFORMATION

INFORMATION	TAXPAYER A	TAXPAYER B
<i>Title</i>	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Other _____	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Other _____
First name and Initial		
Last Name		
Telephone (residence)		
Telephone (work)		
Telephone (cellular)		
Fax		
E-Mail Address		
Address		
City, Province		
Postal Code		
Old address if changed in 2016		
SIN (Social Insurance Number)		
Birth Date (yyyy/mm/dd)		
Gender :	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
Marital status:	<input type="checkbox"/> Married <input type="checkbox"/> Common-Law <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Single	<input type="checkbox"/> Married <input type="checkbox"/> Common-Law <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Single
Marital Status, if changed in 2016, indicate change and date		
<p>Commencing with the 2016 tax year, individuals <b>MUST</b> now report on their T1 return the disposition of a principal residence. If this has occurred during 2016, please provide the date of acquisition, cost of the property, proceeds of disposition and a description of the property. If the disposition is not reported, the CRA will deny the principal residence exemption and additionally the unreported disposition may never become statute-barred.</p>		

### SPOUSAL INFORMATION

Name \_\_\_\_\_

Birth Date \_\_\_\_\_

yyyy/mm/dd

SIN \_\_\_\_\_

Net Income (2016) \_\_\_\_\_ **COMPLETE ONLY IF NOT SUBMITTING INFORMATION**

### DEPENDANT INFORMATION

Name	SIN #	Net Income	Birth Date	Relationship	Disability (if any)

**2016 PERSONAL INCOME TAX QUESTIONNAIRE**  
**Page 2**

---

*Please indicate items that you have attached.*

**INCOME**

**Tax Payer**

**A   B**

- Employment – T4
- Old Age Security – T4A(OAS)
- Canada Pension Plan benefits – T4A(P)
- Other Pensions – T4A
- Employment Insurance – T4E
- Interest, Dividends and other Investment Income – T5/T60
- Mutual Funds and other Trust Income – T3
- Limited Partnership – T5013
- Business or Professional income and receipts, GST information and filings or T5013
- Rental Property (attach details of income, expenses, purchases and sales)

\* Capital Gains/Losses

Did you dispose of any capital properties this year?, transfer to RRSP's?  
(attach copies of sales detail and original purchase documentation)

- Yes
- No
- Child support (provide copy of post-April 30, 1997 agreement or election, if changed or not previously provided)
- Alimony (provide copy of agreement)
- Other Income (e.g., stock options, annuities, research grants and bursaries, RRSP's – T4RSP, Worker's Compensation benefits).

\* Did you receive shares or cash upon demutualization of life insurance companies?

- Yes
- No

**DEDUCTIONS**

**Tax Payer**

**A   B**

- Registered Retirement Savings Plan contributions (attach receipts)
- Annual union, professional dues (attach receipts)
- Child care expense (attach receipts)
- for individual providers, include S.I.N. and address \_\_\_\_\_  
A: \_\_\_\_\_  
B: \_\_\_\_\_
- for summer camps, indicate number of weeks that were in-residence  
A: \_\_\_\_\_  
B: \_\_\_\_\_

**2016 PERSONAL INCOME TAX QUESTIONNAIRE**  
**Page 3**

---

*Please indicate items that you have attached.*

**DEDUCTIONS - continued**

**Tax Payer**

**A   B**

- Attendant care expenses (attach receipts)
- Allowable business investment losses (refer to Capital Gains/Losses above)
- Moving expenses (attach receipts). Indicate distance moved to new employment and I identify new employer \_\_\_\_\_  
A : \_\_\_\_\_  
B : \_\_\_\_\_
- Alimony or separation allowances paid (include name(s) and address(es) of recipients; attach copy of agreement or court order which was signed on or after May 1, 1997 or election if changed or not previously provided)  
A : \_\_\_\_\_  
B : \_\_\_\_\_
- Child support
- Commission and employment expenses (include details and T2200 or TL2)
- Carrying charges (interest on money borrowed to earn dividend and interest, investment counselling fees, interest for limited partnerships, safety deposit box, legal fees)
- Northern Residence allowance from employer, if yes, please provide details of trips
- Other deductions and expenses (attach receipts)
- Federal and provincial political contributions (attach receipts)
- Charitable donations (attach receipts)
- Medical expenses (attach receipts) and details of private health insurance premiums, including amounts paid while travelling and travel insurance
- Disability deduction for you or dependant (if first time claim, attach T2201 signed by physician)
- Care giver information (name, SIN, date of birth, income)
- Tuition fees (attach T2202/T2202A including amounts that can be transferred from dependants)
- Labor-sponsored funds – T5006
- Interest paid on student loans (attach reporting slip)
- For wholly-dependent persons, please attach list and indicate for each dependant: name, address if different, relationship, birth date, S.I.N., and net income. Note infirmity, if any.

**2016 PERSONAL INCOME TAX QUESTIONNAIRE**  
**Page 4**

---

*Please indicate items that you have attached.*

**OTHER**

**Tax Payer**

**A**    **B**

- 2016 Installments (attach February notice).  
  
Total remitted: A: \$ \_\_\_\_\_ B: \$ \_\_\_\_\_
  
- Attach copy of 2015 assessment notices
- Attach details of RRSP – Home Buyers’ Plan or Lifelong Learning Plan withdrawals and/or CCRA’s Statement of Account concerning these plans, if received
  
- \* Do you keep a vehicle log? If no, substantiate claim with written documentation
- Yes
- No
- Substantiate regular and continuous meetings with clients for business use of home office
- Details of carry forwards from previous years including losses, donations, forward averaging amounts
  
- \* Update register of Electors? (if unanswered, you will be registered)
- Yes
- No