

2018 INCOME TAX RETURN CHECKLIST

(Please complete and return with your tax information)

Please use this checklist to help organize all the items required to complete your tax return. Please check off appropriate boxes. Please be sure to advise us of any changes in address or marital status.

If you, or a family member, have become disabled during the year you may be eligible for additional tax credits.

Name:							
Name:							
Children							
DI							
Phone:	(during day)	(home)	(cel	l phone)			
Email:							
NOTE:	Canada Revenue Agency (CRA) requires that if you owned foreign income producing property with a cost of more than \$100,000 (Cdn) at any time during 2018 you must provide certain information on your tax return. Please advise us if this applies to you.						
	CRA now requires taxpayers to report the sale of any real estate. This rule will apply even if the property is your principal residence. Please advise us if you sold any property in 2018.						
NCOME			<u>'X'</u>	Additional information			
INCOME: Employment:	(T4, T4A)						
Investment/inte	rest/dividends: (T3, T5, T5013)						
Pensions:	RRSP/RRIF/Annuities	T4RSP, T4RIF,T4A					
	Canada Pension	T4A(P)					
	Old Age Security	T4OAS					
	Employer	T4A		<u></u>			
	Foreign sources						
Business (compl	lete schedule which can be found	at www.blrcpa.ca):					
Rental property	(complete schedule which can be	e found at www.blrcpa.ca):					
Capital gains/los	sses:						
	- Sale of investments - provide	e information on					
	original cost, proceeds, expe	nses, dates					
	- Broker statements or summ	aries would be very helpful					
	- Annual statements from Mur	tual Fund companies					
Other income (please provide details on separate	e page):					
	- Spousal support						
	- Other sources of income for	r which no slips					
	were received.		-				

CHECKLIST CONTINUED:		'X'	Additional inforr	mation
DEDUCTIONS				
RRSP contributions: receipts required				
Union or professional dues: (if not included on your T4)				
Child care: Provide name, address and SIN of caregiver, if a	pplicable			
If your child attended an overnight camp	FF			
provide the number of weeks at camp.				
Carrying charges: interest management fees				
Employment/commission expenses (complete employment e	expense schedule (www.hlrcpa.c	ra)		
- include T2200 from your employer)				
Spousal and child support payments (provide breakdown be	tween child and spousal suppor	t)		
Moving expenses (contact us if you moved 40 kms closer to				
NON-REFUNDABLE TAX CREDIT INFORMATION	<u>N</u>			
Tuition fees for self or dependants				
- have dependants sign T2202A where requested		-		
Medical expenses paid, including health insurance premiums				
- enclose all receipts				
- for prescriptions consider obtaining a summa	ry from your pharmacy			
- all pages are required				
First-time home buyers' credit (include agreement of purcha	ise and sale)			_
Charitable donations (include receipts) Political donations (include receipts)				
Interest paid on student loans (official statement required)				
PROVINCIAL TAX CREDIT INFORMATION				
TROVINCIAL TAX CREDIT INFORTATION				
Rent or property tax paid on principal residence				
(obtain and include receipts displaying address and landlord's	s name if you rent)			
(provide copy of final property tax bill if you own)				
INCOME TAX INSTALMENTS MADE DURING TH	IE YEAR			
Are you a U.S. citizen, a U.S. green card holder or were you	born in the U.S.? Yes		No	
CRA, in conjunction with Elections Canada, asks whether or give your consent to provide Elections Canada with your na	-	nly.		
I am a citizen of Canada	Yes		No	
The purpose of this is to keep the National Register of Elect	ors up to date for future election	ons. Would		
you please indicate your decision on this matter below.	•			
	Yes, consent given		No, consent denied	