

2009 Personal Tax Organizer

Thank you for choosing EPR Coquitlam to manage your personal tax planning needs. This checklist will help you get your tax records organized. If any personal information has changed since last year, please include this form with your tax package.

PERSONAL

Name:			
Address & postal code:			
Phone: (home):	(bus):	(cell):	
Email:			
What is the best way for us to reach you during business hours?	<input type="checkbox"/> email	<input type="checkbox"/> home phone	<input type="checkbox"/> business phone <input type="checkbox"/> cell
Has your marital status changed?	<input type="checkbox"/> no	<input type="checkbox"/> yes	

Dependent information

Names	SIN	Birthdates	Net income (if any)

INCOME

Personal	Investment
<input type="checkbox"/> T4, T4PS T4A - Salaries and Employment Income	<input type="checkbox"/> T3, T5, T4PS - Interest and Dividends
<input type="checkbox"/> Other Employment Benefits	<input type="checkbox"/> T5008 - Statement of Security Transactions
<input type="checkbox"/> T4E - Employment Insurance Benefits	<input type="checkbox"/> T3 - Mutual Fund Income
<input type="checkbox"/> T5007 - WCB Benefits/Social Services Benefits	<input type="checkbox"/> T5013 - Limited Partnership Income (Loss)
<input type="checkbox"/> RC62 - Universal Childcare benefit	<input type="checkbox"/> T600 - Canada Savings Bonds
<input type="checkbox"/> T4RSP - RRSP Income/Home Buyer's Plan withdrawal	<input type="checkbox"/> Capital Gains / Losses (summary schedule)
<input type="checkbox"/> T4A(P) - Canada Pension Plan Benefits	<input type="checkbox"/> Summary of Investment Contract Holdings
<input type="checkbox"/> T4A(OAS) - Old Age Security Benefits	<input type="checkbox"/> Rental Income (summary schedule)
<input type="checkbox"/> T4A - Other Pensions or Superannuation	<input type="checkbox"/> Annuities
<input type="checkbox"/> T4RIF- RRIF Income	<input type="checkbox"/> Foreign Income
<input type="checkbox"/> T1032 Joint Election to Split Pension Income	

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



Deductions and Credits

Non-Refundable Credits	Other Deductions
<input type="checkbox"/> Married Amount - Spouses Net Income \$ _____	<input type="checkbox"/> RRSP Receipts
<input type="checkbox"/> Equivalent to Married Amount (Full Details Required)	<input type="checkbox"/> Union, Professional Dues
<input type="checkbox"/> Tax Credit for Children	<input type="checkbox"/> HRTC Home Renovation Tax Credit (receipts)
<input type="checkbox"/> Disability Deductions	<input type="checkbox"/> T2200 - Declaration of Conditions of Employment
<input type="checkbox"/> T2202/T2202A - Tuition Fees / Education/Textbook Credit	<input type="checkbox"/> Employment Expenses (summary)
<input type="checkbox"/> Interest Paid on Student Loans	<input type="checkbox"/> Child Care Expenses (Full Details Required)
<input type="checkbox"/> Children's Fitness amount	<input type="checkbox"/> Alimony Paid
<input type="checkbox"/> Dependant Data (For GST Credit, Child Tax Benefit, Child Tax Credit and Child Fitness Amount)	<input type="checkbox"/> Deductible Child Support Paid
<input type="checkbox"/> Medical/ Dental/Vision Receipts	<input type="checkbox"/> Attendant Care Expenses
<input type="checkbox"/> Charitable Donations (official tax receipts)	<input type="checkbox"/> Safety Deposit Box Charges
<input type="checkbox"/> Public transit passes amount	<input type="checkbox"/> Employment Insurance Benefit Repayments
<input type="checkbox"/> Caregiver amount (Full Details required)	<input type="checkbox"/> Moving Expenses (Full Details Required)
<input type="checkbox"/> Apprentice Job Creation Credit	<input type="checkbox"/> Interest and Carrying Charges on Investments
<input type="checkbox"/> Adoption Expenses	<input type="checkbox"/> Investment Counsel and Accounting Fees
<input type="checkbox"/> Political Contribution Receipts	<input type="checkbox"/> Deductible legal fees
	<input type="checkbox"/> Tradespersons Tools Expenses
Other Information	<input type="checkbox"/> Allowable Business Investment Loss
<input type="checkbox"/> 2008 Notice of Assessment (CRA)	<input type="checkbox"/> Restricted Farming Losses Carry Forward
<input type="checkbox"/> Summary of 2009 Tax Instalment Payments	<input type="checkbox"/> Capital Losses Carry Forward
<input type="checkbox"/> Details on Foreign Property held in 2008 & 2009	<input type="checkbox"/> Non - Capital Losses Carry Forward
where total costs exceeded \$ 100,000 Canadian	<input type="checkbox"/> Limited Partnership Losses of Other Years
	<input type="checkbox"/> Premiums paid to Private Medical Insurance plans

General

Are you a Canadian citizen: YES NO

Are you a citizen of any other country: YES NO If yes, please specify:

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 Yes No

Spouse Yes No

Please use this space for any additional information or notes

