

LIST OF DOCUMENTS TO BRING**Taxation year :** **Client:**

(First name, Last name)

Partner:

(First name, Last name)

Client Partner

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | FEDERAL Notice of assessment for the last year declared |
| <input type="checkbox"/> | <input type="checkbox"/> | PROVINCIAL Notice of assessment for last year declared |
| <input type="checkbox"/> | <input type="checkbox"/> | Cheque specimen if never requested direct deposit |

For new clients with rental income or self-employment income

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Last federal and provincial tax report (full version) |
|--------------------------|--------------------------|---|

INCOME

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Employment income : T4 (FEDERAL) + Relevé 1 (PROVINCIAL) |
| <input type="checkbox"/> | <input type="checkbox"/> | Investment income : T3, T5, T4A, T5008 ou Summary of gains / losses, etc. |
| <input type="checkbox"/> | <input type="checkbox"/> | Scholarship : T4A |
| <input type="checkbox"/> | <input type="checkbox"/> | Advanced Canada workers benefit (ACWB) : RC210 |
| <input type="checkbox"/> | <input type="checkbox"/> | Public retirement: Old age security: Fed:T4A(OAS); Prov:T4A (P); Private:T4A |
| <input type="checkbox"/> | <input type="checkbox"/> | Employment Insurance (unemployment): T4E |
| <input type="checkbox"/> | <input type="checkbox"/> | Federal and provincial COVID19 programs income: T4A; T4E. |
| <input type="checkbox"/> | <input type="checkbox"/> | Parental insurance benefits (parental leave): T4E |
| <input type="checkbox"/> | <input type="checkbox"/> | CSST, SAAQ, Welfare: T5007/RL5 |
| <input type="checkbox"/> | <input type="checkbox"/> | Self-employed (income & expenses) |
| <input type="checkbox"/> | <input type="checkbox"/> | Work expenses: TP-64.3+T2200 (<i>Only if you have eligible expenses</i>) |
| <input type="checkbox"/> | <input type="checkbox"/> | Work expenses – Actual spending |
| <input type="checkbox"/> | <input type="checkbox"/> | Rental income (<i>income & expenses</i>) |
| <input type="checkbox"/> | <input type="checkbox"/> | T1135 if you own more than 100 000\$ of assets outside Canada |

DEDUCTIONS

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | RRSP, FHSA |
| <input type="checkbox"/> | <input type="checkbox"/> | Tuition fees: Relevé 8/T2202A |
| <input type="checkbox"/> | <input type="checkbox"/> | Interest paid on student loans: Bank or Caisse account receipt |
| <input type="checkbox"/> | <input type="checkbox"/> | Medical expenses |
| <input type="checkbox"/> | <input type="checkbox"/> | Moving expenses |
| <input type="checkbox"/> | <input type="checkbox"/> | Last pay slip of the year for <u>EACH EMPLOYER</u> (<i>if group health insurance</i>) |
| <input type="checkbox"/> | <input type="checkbox"/> | Charity donation / Political contributions |
| <input type="checkbox"/> | <input type="checkbox"/> | Union dues or professionals dues (<i>if other than on T4</i>) |
| <input type="checkbox"/> | <input type="checkbox"/> | Instalments/ provisional payments: official government statement |
| <input type="checkbox"/> | <input type="checkbox"/> | Home support services (<i>if you are 70 or older</i>) |
| <input type="checkbox"/> | <input type="checkbox"/> | Solidarity tax credit: Relevé 31 (<i>if tenant</i>) or City taxes ID number (<i>if owner</i>) |

KIDS

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Childcare expenses: RL-24 Not Subsidized, RL-30 Subsidized |
| <input type="checkbox"/> | <input type="checkbox"/> | Childcare tax credit advance payments: RL19 |
| <input type="checkbox"/> | <input type="checkbox"/> | Programs of physical and artistic activities of children |

Other: Signature: Date:

(ddmmyy)