



New Personal Tax Client

CALCULATED SUCCESS INC.
Tax Client Data Form

of returns of returns

Have we ever prepared your return before? Yes or No:
If yes, what was the last year we prepared?
If new Client, How did you hear about us?

Basic Information

Name: Date:

Home Address:
City: Prov Postal Code

Date of Birth (yyyy-mm-dd):
Social Insurance Number (SIN):

Home Phone: Email address:
Work Phone: Mobile Phone:
When is the best time to reach you, and at what number?
Are you picking up or should we mail your return?

Marital Status: Married Divorced
 Common Law Separated
 Widowed Single

Date, if status changed in 2016:

Spouse Information:
Name
SIN:
Date of Birth (yyyy-mm-dd):

Please check if we are preparing spouse's return? If No, Spouse's Line 236 \$

RRSP deduction limit: **(Please provide a copy of your Notice of Assessment)**

Were you born outside of Canada? Where, if yes?
Please check the box if you are you a Canadian citizen?

As a Canadian citizen, do you authorize the Canada Revenue Agency to give your name, address, date of birth and citizenship to Elections Canada for the National Register of Electors?

Your authorization is valid until you file your next return. This information will be used only by Elections Canada for purposes permitted under the Canada Elections Act.

Did you sell your primary residence in 2016? YES NO

**** Please include a void cheque for direct deposit ****

Please initial, if your banking information has not changed and we can direct deposit to the account on file.

Please check if you made any installment payments for 2016?
Total Amount Paid

To whom shall we bill (Name or Company)? **If different from the name on return**
 Please check if we have permission to give information about your return to other family members?
 How did we receive the Return Information? **Mail, In Person, Fax or Email?**

Please check, would you like to meet with Marion to go over your tax return when it is complete?
 Paper or Electronic copy of return?
 If Electronic, what email should we send it to?

Return Itself

Do you have any of the following income sources:

- Self Employed
- Rental (property)
- Mary Kay

Please check if, in 2016, you owned more than \$100,000.00 of foreign property?
****This includes Foreign Mutual Funds/Investments****

Do you pay rent or property taxes? Please circle one **Rent or Taxes**
Please provide receipts and/or the following information
(if you normally qualify for the provincial tax credit or if you are unsure)

Address
 # Months
 Total Amount Paid
 Landlord or Municipality

Please check if you pay personally for a medical plan? (eg. Liberty Health)
 Please check if you have medical receipts?

Do you have any of the following (include receipts)?

- | | |
|---|--|
| <input type="checkbox"/> Child Care Expense | <input type="checkbox"/> Salesperson's Expense |
| <input type="checkbox"/> Charitable Donations | <input type="checkbox"/> Tuition Payments |
| <input type="checkbox"/> Moving Expenses | <input type="checkbox"/> Union Dues |
| <input type="checkbox"/> Professional Dues | <input type="checkbox"/> Ontario Senior Homeowners' Property Tax Grant |
| <input type="checkbox"/> Ontario Children's Activity Tax Credit | <input type="checkbox"/> |
| <input type="checkbox"/> Children's Fitness Amount | <input type="checkbox"/> |

Children

Children (under 19) Name	Date of Birth (yyyy-mm-dd)	Post Secondary Student? (Y/N)	Carry Tuition Fwd to: (or N/A)	Net Income Line 236
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Have student attach copy of T2202A slip (or TL11A if university is outside Canada).

Please check if your child(ren) had income in 2016?
 Tuition Transfer: Parent Or Child
 Address of Child(ren), if renting: Landlord's Name:
 Include Postal Code

Check if a tax return is needed? *if yes please have child fill out separate form*