A r t a x I n c.

TAX PREP WORKSHEET

# PERSONAL INFORMATION updates only for returning clients

|  |  |
| --- | --- |
| Social Insurance Number |  |
| Preferred title |  |
| First name |  |
| Last name |  |
| Street address |  |
| Apartment number |  |
| City |  |
| Province |  |
| Postal code |  |
| Phone number |  |
| Birthdate |  |
| Marital status |  |
| Children (names & birthdays) |  |
| Organ & Tissue Donor Registry | Please indicate if you authorize CRA to share your contact |

# SPOUSAL INFORMATION

|  |  |
| --- | --- |
| Social Insurance Number |  |
| Preferred title |  |
| First name |  |
| Last name |  |
| Birthdate |  |
| Is spouse also filing with Artax? | YES – continue below  NO – please provide their net income here |

# please indicate if applies

|  |  |
| --- | --- |
| Not a Canadian citizen |  |
| Bought a home in the year |  |
| Sold a home in the year |  |
| Have an HBP or LLP plan, and if yes, amount of required repayment |  |
| Own foreign assets over 100K |  |
| Disability credit to be claimed by anyone in family |  |
| Tax instalments paid, and if yes, please indicate total here |  |
| Did you earn rental income in the year? | List out income and expenses |
| Did you run a business in the year? | Fill out business prep sheet |
| Did you run a corporation in the year? |  |
| Are you a dual Canadian/US citizen? |  |

# tax slip checklist provide copies of slips

|  |  |
| --- | --- |
| T4 | Employment income |
| T4A | Grants, scholarships, pensions, RESP, other income |
| T4E | Unemployment, maternity, paternity, disability benefits |
| T5, T3, T5008 | Investment income |
| T5007 | Social assistance, disability or workers’ compensation |
| T4AP | Canada pension plan, disability benefits |
| OAS | Old Age Security |
| T4RSP | RRSP withdrawals, RESP income |
| T4RIF | RRIF withdrawals |
| RRSP contributions in the year | Contributions from Mar to Dec of tax year (i.e. 2022) |
| RRSP contributions in 1st 60 days | Contributions Jan to Mar after tax year being filed (i.e. 2023) |
| T2202 | For tuition paid in the year |
| Student loan interest | There will be an official tax statement |

# credit & deduction checklist provide totals only

|  |  |
| --- | --- |
| **DONATIONS**  Combine for spouses for better credit, please total in these groups. |  |
| * Regular charities |  |
| * Federal political charities |  |
| * Provincial political charities |  |
| **CHILD CARE**  Can only be claimed by lower income spouse, please total in these groups. |  |
| * Day care fees |  |
| * Day camps at least 5 consecutive days |  |
| * Overnight camps, please note cost and # weeks |  |
| * Caregiver, please provide their SIN |  |
| **PROPERTY CREDIT**  Either spouse claims total, credit will be paid to 1 spouse on behalf of both.  If you/spouse have business, don’t note here, input under **business home office** |  |
| * Home rent |  |
| * House property taxes |  |
| **LEGAL FEES**  Can only be claimed for the following legal services. |  |
| * Right to wages |  |
| * Right to severance |  |
| * Right to spousal/child support |  |
| **UNION DUES**  Do not include premiums paid through employer (i.e. noted on your T4).  If you/spouse have business, don’t note here, input under **business other fees** |  |
| * Union dues |  |
| * Professional membership dues |  |
| **FINANCIAL FEES**  Separate for each spouse.  if you/spouse have business, input tax prep fee in **business professional fees** |  |
| * Tax preparation fees |  |
| * Investment management fees |  |
| **OTHER CREDITS**  Each spouse claims own and be sure to have receipts as tend to be audited. |  |
| * Digital news subscriptions MAX $3000 |  |
| * Employed teacher school supplies MAX $1000 |  |
| * Senior TTC tickets MAX $3000 |  |
| * Home accessibility renovations MAX $10,000 |  |
| * Adoption expenses MAX PER CHILD $17,131 per child |  |
| **COVID CREDITS (only for 2022)**  Each spouse claims own covid home office.  Combine staycation for spouses and ensure receipts in hand.  If you/spouse have business, will only apply **business home office** |  |
| * Covid home office $2/DAY WORKED AT HOME UP TO $500 |  |
| * Ontario staycation MAX $1000 INDIVIDUAL, $2000 FAMILY |  |
| **MEDICAL & DENTAL COSTS**  Must be paid out of pocket, do not include amounts reimbursed by insurance.  Combine for family for better credit and please total in these groups.  Keep receipts on hand, these are frequently audited.  If you/spouse have business, medical premiums go only on **business sheet** |  |
| * Medical premiums - do not include premiums via employer (i.e. on T4) |  |
| * Prescriptions |  |
| * Dental - include orthodontics and all non-cosmetic procedures |  |
| * Optical - include glasses, contacts, laser surgery |  |
| * Therapy - from any type of mental health practitioner |  |
| * Licensed practitioners - such as massage, chiropractic, acupuncture |  |
| * Naturopaths & nutritionists - exclude cost of vitamins & supplements |  |
| * Assistive devices - braces, aids, equipment, machines |  |
| * Fertility treatments |  |
| * Medical cannabis - with medical document, from official supplier |  |
| * Attendant care - can be claimed for elderly relatives |  |
| * Nursing home - can be claimed for elderly relatives | provide receipt |
| * Any other - please list out |  |