## **RKG TAX & ACCOUNTING INC.**

**CHARTERED PROFESSIONAL ACCOUNTANT** 

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# **Personal Tax Information / Checklist**

### **Taxation Year:**

	that your	return will be prep	pared by A	pril 30, we	must hav	ve all your d	ata by	April 16 <sup>th</sup>
Identification:							DD-	MMM-YYYY
Your Name:			Your SIN			Your Birth Da	te:	
Spouse Name:			Sps. SIN			Spouse Birth	Date:	<b>*</b>
Address			Your Pho	ne #		~ (	1	
			Spouse P	Spouse Phone #				
Your E-Mail			Spouse E	Spouse Email				
Marital Status:								
Married [	Widowe	d 🗌 Divorced	Comm	on-Law*	Separate	ed 🗌 Singl	e	
Did your marital sta	atus change d	uring the year? $\Box$	Yes 🗌 N	lo If so, pr	ovide the	date		
If we are <b>NOT</b> prep	oaring a tax re	turn for your spouse, p	olease provide	e the following	g:			
Net Income figure f	rom line 2360	0 on page 2 of his/her	2023 tax retu	rn				
* Includes same-sex	x relationship	s						
Dependents:		0						
List any dependen	nts who were	18 years of age or und	er as of Decer	mber 31, 2023				
Name		Relationship	2023 Ne	t Income	Date	e of Birth		SIN
		70						
	TC							
Do you or your cod	ouse or any o	f your dependents qu	alify for disal	aility crodit2				
			•	•				
	·	nancial support to any		es (parents)?			Yes	∐ No
Other Importan	t Informati	ion & Delivery of F	Return:					
Do you want to file your return electronically?						Yes	No	
Did you own/hold foreign property with a cost of more than \$100,000? (Attach details if Yes)						Yes	No	
Do you authorize CRA to provide information about you to Elections Canada?						Yes	No	
Do you want your tax refund deposited Directly to your bank account? (Attach void cheque if yes)					e if yes)	Yes	No	
Are you Canadian Citizen?						Yes	No	
Has Your last name changed?						Yes	No	
Did you sell a home	e in taxation y	ear and want to claim	the principal	residence exe	emption?		Yes	No
are you filing for th	e first time in	taxation year?					Yes	No

Rental Pr	operty						
If property	was purchased during the year, pro	ovide the agreemen	t of purcha	se and sale as we	ll as the so	olicitor's reporting letter.	
		Name of Partner and Their % Owned					
Address		SIN of Partner		Income	Income		
		Sint of Furth					
Management and Administration		Advertising	Advertising		e Interest		
Repairs & N	Maintenance	Property Tax	<	Professio	nal Fees		
Insurance		Utilities		Other			
If Other Sp	ecify					70.	
Major reno	Major renovations and Purchases		Specify		•		
Major reno	ovations and Purchases		Specify		<b>A</b> Ò		
Sale of Re	eal Estate (INCLUDING Princ	inal Residence)					
	agreement of purchase and sale a	- 1		ng letter for BOTH	your sale	and purchase	
		Sale Date		Legal a	nd Other	Costs on Sale	
Address		Sale Price		Comm	Commission Paid on Sale		
Name of Partner and Their % Owned			~~		SIN of Partner		
Purchase D	Purchase Price			Legal/0	Other Cost	ts on Purchase	
Additions/other major improvements Specify							
Additions/other major improvements Specify				,			
Other		Specify	,				
Check this box if this was your principal residence and you have acquired a new principal residence							
	OT CO						
Sale of Securities (In non-RRSP or other registered plan)							

For each brokerage account, please provide the following:

- Transaction Summary for the Year
- Investment Income and Expense Summary for the Year
- The December 31st monthly account statement

For ALL non-RRSP mutual funds, please provide the December 31<sup>st</sup> year-end statements. (These statements should show all mutual fund transactions for the year, including any sales, redemptions or transfers).

Employment Expenses							
Include a T2200 - Declaration of Employment Conditions from your employer.							
Accounting/Legal Fees	Lodging	Telephor	ne Sup	oplies (Postage, e	etc)		
Meals/Entertainment	Parking	Other	Spe	ecify			
Automobile Expenses							
For business and em	ployment						
Year and Make of Automobile	Year of Purchase	Pur	chase Amount				
Total Kilometers Driven in Year			Total Kilometers [	Driven in Year fo	r Business		
If car was purchase	dor leased in 2023	, provide a copy o	f the purchase or	lease agreemer	nt		
Fuel Inst	urance	Payments		Licensing and	d Registration		
Tolls Car	Washes	LoanInteres	t	Repairs and N	Maintenance		
Other Spe	ecify	Other		Specify			
Home Office -							
For Business and Employment							
Percentage of Home Used for Bu	ısiness	Telephone		lydro	Rent		
Mortgage Interest (Self-Employed	Only)	Property Taxes	Н	leat	Water		
Maintenance and Repairs		Internet	0	Other	Specify		
Home Office - Covid Benefit							
- Are you working from home due to COVID  Postrictions?  Yes							
Restrictions? — Yes  - Claim Simple Method (\$2 per day, \$400 for 2020 and — Yes							
\$500 for 2021 and 2022 MAX)?							
- Use Detailed Method (must provided detailed Yes expenses)							

Self-EmployedIncome and Expenses		
Business Name	Type of Business	
Name of Partner	SIN	Percent Owned By Partner
Licenses, Dues, Memberships, Subscriptions	Internet Fees	Office Supplies
Repairs and Maintenance	Advertising	Salaries
Meals and Entertainment	Insurance	Legal/Accounting
Interest and Bank Charges	Rent	Telephone
Other Specify	Other	Specify
Please Include G	ST/HST In All of The A	above Amounts
RIC COTO		

#### Sources of Income **Deductions and Tax Credits Available** Check if you have any of the following sources of income Check if you have any of the following deductions and **INCLUDE ORIGINAL RECEIPTS** in all cases. Source Slip Employment Income T4 **Amount Investment Loan Interest** Taxable Disability Income T4A **Amount** Student Loan Interest **Profit Sharing Income** T4PS Commission Income T4 or T4A **Investment Counselling Fees** Amount Old Age Security T4A (OAS) **RRSP Contributions Amount** Canada Pension T4A (P) Other Pension/Annuities T4A Moving Expenses (If more than 40km) Amount RRIF Income T4 (RIF) **Medical Expenses Amount** Withdrawals from RRSP T4 (RSP) **Employment Insurance Benefits** T4 (E) **Adoption Expenses Amount Workers Safety Insurance** T5007 **Health Insurance Premiums** Amount T5007 Social Assistance Payments Scholarships and Bursaries T4A Union Dues and Professional Fees Amount Dividends T3 or T5 Child Care Expenses **Amount** Interest T3 or T5 **Charitable Donations Limited Partnerships** T5013 **Amount** RC62 Universal Child Care Benefits 1st Time Donor? RC210 Working Income Tax Benefit Advance **Transit Passes** Amount Alimony Amount Political Party Contributions -Amount Child Support (Taxable) Amount **Tips and Gratuities Amount** Amount **Labour-Sponsored Funds** Other Amount Tuition Fees - SPOUSE/CHILDREN **Amount** Other Amount Tax Installments paid to government Amount If you have any other income and/or deductions that are not Amount Alimony Payments Made listed above, please itemize below and attach supporting receipts. Child Support (ONLY if deductible) **Amount** Rent Paid **Amount Amount Property Taxes Paid**

### PLEASE PROVIDE YOUR 2022 NOTICE OF ASSESSMENT

Firefighter / Search & Rescue Credit

**Amount** 

## Other Information

Did you make tax installment payments during the year?		Yes	No
Did you participate in Home Buyers Plan?		Yes	No
Did you participate in the Lifelong Learning Plan?		Yes	No
Is your child transferring post-secondary tuition amount to you? if yes, please provide copy of signed T2202A slip		Yes	No
Are you including your last year's Notice of Assessment?		Yes	No
New Clients - are you including your last year's tax return schedules		Yes	No
Please note, no items will be included onto your tax return wit of an audit, the onus of proof is on the taxpayer.	hout the proper docum	nentation. In the	e event
Signature :	Date :		