

2017 TAX RETURN CHECKLIST

website: www.lepore-ca.com

email: support@lepore-ca.com

Please include the following information along with this completed checklist:

- Your 2016 tax information slips (T4, T5, T4A, etc.).
- A copy of your 2016 Notice of Assessment. **WE NEED THIS FOR ANY PERTINENT CARRY FORWARD INFORMATION (ie CAPITAL GAINS/LOSSES/RRSP LIMITS etc.).**
- Please provide a copy of your previous tax return if this is the first year we are preparing your return
We have included worksheets with the checklist to assist you if you sold stocks, mutual funds or real estate in 2017 or if you had a rental property, business income or employment expenses in 2017 (see the last 2 pages).

IT IS OUR POLICY TO ADVISE YOU WHEN YOUR RETURN HAS BEEN COMPLETED. WE ARE UNABLE TO GIVE OUT ANY INFORMATION REGARDING REFUNDS/BALANCES OWING OVER THE PHONE, DUE TO PRIVACY RESTRICTIONS. PLEASE ENSURE THAT YOUR RETURN IS PICKED UP BEFORE APRIL 30TH.

HAS ANYTHING CHANGED in 2017?



1. **Your Name:** _____ SIN#: _____ Birthdate: _____
 2. **Your Spouse:** _____ SIN#: _____ Birthdate: _____
 dd/mm/yy

3. **Address:**
 Street: _____ City: _____ Postal Code: _____

4. Your home phone #: _____ E-mail address: _____
 5. Your work phone #: _____

6. **Your Financial Planner and Institution** _____

7. **Your Marital Status:** Married Widowed Separated Common-law Divorced Single
 If marital status changed in the year, date of change: _____

8. Are we preparing a 2017 tax return for your spouse? Yes No

9. **If we are NOT PREPARING a return for your spouse, please provide the following**

Net income figure from line 236 on page 2 of his or her 2017 tax return: _____ Spouse's net income \$ _____

10. **List any dependents as of December 31, 2017:**

Name & SIN #	Relationship & residing with you?	2017 income of dependent (if we are not preparing the return)	Birthdate	Are we preparing the return?	
_____	_____	\$ _____	_____	<input type="checkbox"/> yes	<input type="checkbox"/> no
_____	_____	\$ _____	_____	<input type="checkbox"/> yes	<input type="checkbox"/> no
_____	_____	\$ _____	_____	<input type="checkbox"/> yes	<input type="checkbox"/> no

dd mm yyyy

11. For your information: CRA requires tax preparers to EFILE all returns that they prepare! (No optional paperfile anymore)

12. Did you own/hold foreign property with a cost of more than \$100,000? Yes (attach details) No

13. Are you a Canadian citizen? Yes No

14. Do you authorize CRA to provide information about you to Elections Canada? Yes No

15. Did you receive income from U.S. sources in 2017? Yes No

- Do you need a U.S. tax return prepared for 2017? If yes, please provide relevant information. Yes No
- In which country were you a resident in 2017? Canada U.S. Unsure

16. **How do you want your tax return returned to you once it has been completed by our staff?**

- Hold for pick-up at Lepore & Company.
- Mail to my home address via Canada Post There is a handling/postage charge of \$15 for this service. (free mailing for clients outside the Hamilton/Burlington Area)
- Courier to the address above. There is a courier charge to reimburse our out of pocket expenses (market price).
- Other _____
(please indicate)





Your 2017 Income

Check if you have any of the following income items:

Item	Slips to Bring
<input type="checkbox"/> Employment income	T4
<input type="checkbox"/> Taxable disability income	T4A
<input type="checkbox"/> Profit sharing income	T4PS
<input type="checkbox"/> Commission income	T4 or T4A
<input type="checkbox"/> Old Age Security income	T4A
<input type="checkbox"/> Canada Pension Plan income	T4AP
<input type="checkbox"/> Other pension/annuity income	T4A
<input type="checkbox"/> RRSP income	T4RSP
<input type="checkbox"/> RRIF income	T4RIF
<input type="checkbox"/> Withdrawals from RRSP	T4RSP
<input type="checkbox"/> EI Benefits	T4E
<input type="checkbox"/> Worker's Compensation (WSIB)	T5007
<input type="checkbox"/> Social assistance payments	T5007
<input type="checkbox"/> Dividend income	T3s and T5s
<input type="checkbox"/> Interest income	T5s
<input type="checkbox"/> Limited partnership income	T5013
<input type="checkbox"/> Rental property income	See next page
<input type="checkbox"/> Sale of real estate	See next page
<input type="checkbox"/> Sale of non-RRSP stocks	See next page
<input type="checkbox"/> Sale of non-RRSP mutual funds	See next page
<input type="checkbox"/> Self-employed income	See back page
<input type="checkbox"/> Alimony income	\$ _____
<input type="checkbox"/> Other income:	
_____	\$ _____
_____	\$ _____
_____	\$ _____

If extra slips are received after filing there will be a service charge to adjust the return.

Your 2017 Deductions/Credits



Check if you have any of the following:
Please include receipts.*

Item	Amount
<input type="checkbox"/> Charitable donations *(only official donations)	\$ _____
<input type="checkbox"/> Political party contributions	\$ _____
<input type="checkbox"/> Labour-sponsored fund contributions	\$ _____
<input type="checkbox"/> RRSP contributions	\$ _____
<input type="checkbox"/> Moving expenses (in some circumstances)	\$ _____
<input type="checkbox"/> Tuition fees for yourself	\$ _____
<input type="checkbox"/> Children's / spouse's tuition fees (post secondary tuition only)	\$ _____

Please note amount and ensure that you have the receipts to support the following items: (If unsure, attach receipts)

<input type="checkbox"/> Employment expenses	see back page
<input type="checkbox"/> Alimony payments made	\$ _____
<input type="checkbox"/> Disability amount	\$ _____
<input type="checkbox"/> Medical expenses (out of pocket amounts only)** (include any medical insurance paid by you)	\$ _____
<input type="checkbox"/> Rent paid	\$ _____
<input type="checkbox"/> Property taxes paid	\$ _____
<input type="checkbox"/> Transit passes	\$ _____
<input type="checkbox"/> Legal fees for investment loan	\$ _____
<input type="checkbox"/> Investment loan interest	\$ _____
_____	\$ _____
(Bank/Trust Company)	
<input type="checkbox"/> Quarterly tax instalments paid to the government (these are not found on any T-slips)	\$ _____
<input type="checkbox"/> Union dues, professional fees	\$ _____
<input type="checkbox"/> Child care expenses	\$ _____
<input type="checkbox"/> Children's fitness and activities	\$ _____

* If there is a **discrepancy** between the figures above and the slips provided we will use the total of the slips provided.

** Do not include any **medical amounts** paid by insurance companies or paid by the Ontario Government etc, only amounts paid by you out of pocket (and not reimbursed by anyone).

Other information you would like to tell us about.



*** DID YOU SELL YOUR PRINCIPAL RESIDENCE IN 2017? YES? / NO?

THIS IS NOW REQUIRED INFORMATION

If you are not sure we'll need it, bring it along!

Rental Property Income & Expenses



Address _____

Joint owner _____

Jt. Ownership % _____

Income (rent collected) \$ _____

Expenses

Advertising _____ \$ _____

Insurance _____ \$ _____

Mortgage Interest _____ \$ _____

Repairs _____ \$ _____

Property Taxes _____ \$ _____

Salaries _____ \$ _____

Utilities _____ \$ _____

Condo Fees _____ \$ _____

Other Expenses _____ \$ _____

_____ \$ _____

_____ \$ _____

Major renovations & purchases (ie. Appliances) _____ \$ _____

_____ \$ _____

_____ \$ _____

If the property was purchased in the year, please provide the details.

Sale of Real Estate (excluding personal residence)



Address _____

Date Sold _____

Joint owner _____

Jt. Ownership % _____

Date Purchased _____

Purchase price _____ \$ _____

Legal costs on purchase _____ \$ _____

Additions / major improvements: _____ \$ _____

_____ \$ _____

_____ \$ _____

Sale Price _____ \$ _____

Legal costs on sale _____ \$ _____

Commissions paid on sale _____ \$ _____

Other selling expenses _____ \$ _____

Sale of Non-RRSP Stock (please provide broker's receipts for both the purchase and the sale)

Name of Stock	Date Sold (dd/mm/yy)	Number of Shares	Sale* Price	Purchase* Price	Commissions Paid

* Price per share

Sale or Transfer of Non-RRSP Mutual Funds (including systematic withdrawal programs)

Please provide the December 31, 2017 year end statements for all of your non-RRSP mutual funds.

These statements were sent to you by the mutual fund companies in early 2018. The statements show all transactions for 2017, including any sale, redemption or transfer of your shares in the mutual fund during the year.

List all of your mutual funds that had shares sold or transferred during 2017.



Self-Employed Income & Expenses

Name of Business _____

Type of Business and address if different from home _____



Joint Owner and % _____

Income \$ _____

Expenses

Advertising \$ _____

Licenses, dues, fees \$ _____

Insurance \$ _____

Interest/bank charges \$ _____

Meals/entertainment \$ _____

Office supplies \$ _____

Legal & accounting \$ _____

Rent \$ _____

Salaries \$ _____

Telephone \$ _____

Other expenses \$ _____

_____ \$ _____

_____ \$ _____

Equipment/furniture purchases (if you need more space, attach list)

_____ \$ _____

Registered for HST? YES NO

If yes, do the above figures include HST?

Automobile _____ SEE ACROSS

Home office _____ SEE BELOW



Home Office Expense

Business or Employment Use % _____

(percentage of house used for business or employment)

Expenses

Total for 2017

Heat \$ _____

Hydro \$ _____

Water \$ _____

Insurance (self-employed or commissioned only) \$ _____

Maintenance, repairs \$ _____

Mortgage Interest (self-employed only) \$ _____

Prop. taxes / Rent (self-employed or commissioned) \$ _____

Other \$ _____

Employment Expenses

Please ensure that you have assigned T2200 (Declaration of Employment Conditions) available should you be asked by the government to substantiate this claim. Please provide us with a copy of this form. This is very important!

Expenses

Accounting, legal fees \$ _____

Advertising, promotion \$ _____

Meals/entertainment \$ _____

Lodging \$ _____

Parking \$ _____

Office supplies \$ _____

Telephone \$ _____

Is your employer registered for HST ? YES NO

Other expenses: \$ _____

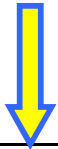
_____ \$ _____

_____ \$ _____

_____ \$ _____

Automobile SEE BELOW

Home office SEE BELOW



Automobile Expenses

Please ensure that you keep a log of kms driven in the year - CRA requires this!



Year/Make of Car: _____

Purchase Price *** \$ _____

Year Purchased ** _____

Total Kilometres driven in 2017 _____

Business or Employment Use % _____

Expenses

Total for 2017

Fuel \$ _____

Repairs \$ _____

Insurance \$ _____

Licensing \$ _____

Loan interest \$ _____

Lease payments(per month & annual amount) \$ _____

CAA membership \$ _____

Any per km flat allowance received \$ _____

Other expenses _____

** If a vehicle was disposed of in the year, please provide details

*** If leased vehicle, please provide a copy of purchase/lease paperwork