

Newton Israelstam LLP**2012 PERSONAL INCOME TAX ORGANIZER**

Chartered Accountants

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This questionnaire is designed to assist you in compiling the information necessary to prepare your 2012 personal income tax return

You may use this envelope to enclose your receipts & information slips. Please check the boxes for items you have enclosed.**We prepare your return based entirely on information you provide, final responsibility for completeness rests with you. Please ensure all income tax receipts and information are submitted to us. CRA's penalties for unreported income are very severe.****CLIENT NAME** _____

Telephone () _____ Fax () _____ E-mail _____

Address (only if changed since your 2011 income tax return was filed)

Marital Status (if changed in 2012, indicate change and date) _____

 I do NOT want my tax return to be Efiled, I prefer to mail it (CRA will charge a \$25 penalty per taxpayer.) I would prefer to receive my client copy by Email in PDF form rather than a paper copy (Efilers only)**INCOME**

- | | |
|--|--|
| <input type="checkbox"/> Employment - T4 | <input type="checkbox"/> Employment Insurance - T4E |
| <input type="checkbox"/> Old Age Security - T4A (OAS) | <input type="checkbox"/> Interest, Dividends and other Investment Income - T5/T600 |
| <input type="checkbox"/> Canada Pension Plan benefits - T4A(P) | <input type="checkbox"/> Mutual Funds and other Trust Income - T3 |
| <input type="checkbox"/> Other Pensions - T4A | <input type="checkbox"/> Limited Partnership - T5013 |
| <input type="checkbox"/> Business or Professional - Financial Statements or T5013 | <input type="checkbox"/> Senior homeowners property tax grant |
| <input type="checkbox"/> Rental Property (provide details of income, expenses, purchases and sales) | <input type="checkbox"/> RC62 Universal child care benefit UCCB |
| <input type="checkbox"/> Capital Gains/Losses. Did you dispose of any capital properties this year? (provide copies of sale & purchase documentation or full details including; amounts, quantities, dates purchased and sold) Costs should include broker fees to purchase. | |
| <input type="checkbox"/> Spousal support (provide copy of post-April 30, 1997 agreement or election, if changed or not previously provided) | |
| <input type="checkbox"/> Other Income (e.g. stock options, annuities, research grants and bursaries, RRSP's - attach T4RSP, Workers Compensation benefits) | |

DEDUCTIONS/CREDITS

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|---|---|
| <input type="checkbox"/> Registered Retirement Savings Plan contribution receipts | <input type="checkbox"/> Public transit pass receipts |
| <input type="checkbox"/> Annual union, professional dues | |
| <input type="checkbox"/> Child care expense (For individual providers, include S.I.N. and address) for summer camps, indicate number of weeks that were in-residence | |
| <input type="checkbox"/> Attendant care expenses | |
| <input type="checkbox"/> Allowable business investment losses (refer to Capital Gains/Losses above) | |
| <input type="checkbox"/> Moving expenses (provide details). Indicate distance moved to new employment | |
| <input type="checkbox"/> Alimony or separation allowances paid (include name(s) and address(es) of recipients; enclose copy of agreement or court order for spousal support which was signed on or after May 1, 1997 or election, if changed or not previously provided.) | |
| <input type="checkbox"/> Commission and employment expenses (include details and T2200 or TL2) | |
| <input type="checkbox"/> Carrying charges (interest on money borrowed to earn dividend and interest, investment counselling fees, interest for limited partnerships, safety deposit boxes. | |
| <input type="checkbox"/> Charitable donations (see attached schedule) | <input type="checkbox"/> Federal and Provincial political contributions |
| <input type="checkbox"/> Childrens fitness tax credit receipts | <input type="checkbox"/> Childrens art amount tax credit receipts |
| <input type="checkbox"/> Medical expense receipts and details of private health insurance premiums paid. (see attached schedule) | |
| <input type="checkbox"/> Disability deduction for you or dependent (if first time claim, attach T2201 signed by physician) | |
| <input type="checkbox"/> Tuition fees (provide T2202/T2202A/TL11A including amounts that can be transferred from dependents) | |
| <input type="checkbox"/> Labour-sponsored funds - T5006 | |
| <input type="checkbox"/> Interest paid on student loans (provide reporting slip) | |
| <input type="checkbox"/> Property tax or rent payments. (provide address in Ontario, total amount paid and landlords name) | |
| <input type="checkbox"/> For wholly-dependent persons, please attach list and indicate for each dependent: name, address if different, relationship, birth date, S.I.N., and net income. Note infirmity, if any. | |

OTHER

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| <input type="checkbox"/> 2012 instalments (attach February 2013 or latest notice). Total remitted: \$ _____ |
| <input type="checkbox"/> Attach copies of any assessment /reassessment notices received in 2012 / 2013. |
| <input type="checkbox"/> Attach details of RRSP - Home Buyers? Plan or Lifelong Learning Plan withdrawals and/or CCRA Statement of Account concerning these plans (if available). |
| <input type="checkbox"/> Amount of any distributions or loans from foreign trusts received in 2012 |
| * The aggregate cost of my foreign property excluding personal use property <input type="checkbox"/> did <input type="checkbox"/> did not <input type="checkbox"/> exceed CAN\$100,000 in 2012 |
| <input type="checkbox"/> A copy of my previous income tax return is enclosed (new clients only). |
| <input type="checkbox"/> I wish to authorize Canada Revenue Agency to provide my name, address and date of birth to Elections Canada. (Canadian Citizens only) |

We understand that it is our function to simplify the process for you and will be pleased to provide more personalized service should you request it.