

2025 PERSONAL INCOME TAX RETURN CHECKLIST

Administrative

How would you like your tax return package delivered to you?

Email Electronic (PDF) ☐ Paper ☐

We will be returning all original documents and receipts after preparation of your income tax return(s).

Basic Information - please complete all sections

Name: _____

SIN: _____

Date of Birth: _____

Address: _____

Phone: () _____

Email: _____

Marital Status as at December 31

Single ☐

Married ☐

Divorced ☐

Separated ☐

Common Law ☐

Widow ☐

Marital status changed during the year? Yes ☐ No ☐

If yes - date of change: _____

Do you, your spouse or any of your dependents qualify for the Disability Tax Credit?

Yes ☐ No ☐

If yes, provide the legal name of the person: _____

Dependent information

Name	SIN	Date of Birth (YY-MM-DD)	Relationship	Email/Phone
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Residency

You are a Canadian citizen Yes ☐ No ☐

You are a U.S. citizen or green card holder Yes ☐ No ☐

Did you become (or cease to be) a resident of Canada for tax purposes during the year?

Yes ☐ No ☐

If yes, date of entry/departure: _____

As a Canadian citizen, can the CRA provide your name, address, date of birth and citizenship to Elections Canada?

Yes ☐ No ☐

Do you want your tax refund deposited directly to your bank account

Yes ☐ No ☐

Spouse's Information

Name: _____

SIN: _____

Date of Birth: _____

Address : _____

(If different) _____

Phone: () _____

Email: _____

Spouse's net income: _____

(Provide only if spouse T1 not prepared by BDSPC - line 236 on page 3 of his/her tax return)

Information to provide**Canadian and Foreign Sources of Income**

Employment (T4) _____

Employment insurance (T4E) _____

Pension, retirement, annuity and other income (T4A) _____

Old Age Security (T4A(OAS)) _____

CPP/QPP (T4A(P)) _____

RRSP, PRPP, DPSP, RPP, RRIF (T4RSP/T4RIF) _____

Investment income (T5) _____

Mutual funds/estates/trusts (T3) _____

Partnership income (T5013) _____

Support payments received \$ _____

Interest on loans receivable \$ _____

Stock Options *Please provide agreements*

Deductions and Credits

☐ Interest paid on student loans \$ _____ ☐

☐ Union/professional membership dues \$ _____ ☐

☐ Child care expenses \$ _____ ☐

☐ Adoption expenses \$ _____ ☐

☐ Moving expenses \$ _____ ☐

☐ Accounting/legal/investment counsel fees \$ _____ ☐

☐ Interest paid to earn investment income \$ _____ ☐

☐ Spousal support payments \$ _____ ☐

☐ Child support payments \$ _____ ☐

☐ Charitable donations \$ _____ ☐

☐ Political/municipal contributions \$ _____ ☐

☐ RRSP contributions \$ _____ ☐

Home Buyers Plan withdrawals or repayments \$ _____ ☐

Lifelong Learning Plan withdrawals or repayments, or FHSA withdrawals \$ _____ ☐

First time homebuyer ☐

Tuition fees (T2202A) ☐

Flow through shares(T101) ☐

Nursing home/attendant care costs \$ _____ ☐

Medical/other paid disability expense *(net of reimbursements from extended benefit plan)* \$ _____ ☐

Other sources of income (please provide details):

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Other expenses/deductions/credits (please provide details):

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

The following schedules are provided in the following pages. Complete the applicable schedules or provide the necessary documents

Schedule 1: Employment expenses

Schedule 2: Business/professional income/expenses

Schedule 3: Vehicle expenses (for Business & Employment)

Schedule 4: Home office expenses (for Business & Employment)

Schedule 5: Rental Property

Schedule 6: Sale of Real Estate

Schedule 7: Sale of Investments/Assets (other than real estate) - not including RRSP, TFSA or other registered plans

Schedule 8: Foreign Investments (foreign property/assets with a total cost greater than Canadian \$100,000)

Schedule 1**EMPLOYMENT EXPENSES**

Expenses you are required by your employer to pay to earn employment income which have not been reimbursed.

Your employer should provide you with T2200-Declaration of Employment Conditions. Please include a signed copy and keep one on file.

Did you earn commissions, salary or both?

Commission ☐
 Salary ☐
 Both ☐

Travel \$ _____

Parking \$ _____

Supplies (stationery, other) \$ _____

Telephone \$ _____

Salaries paid to an assistant \$ _____

Office rent \$ _____

Accounting & legal* \$ _____

Advertising & promotion* \$ _____

Meals & entertainment* \$ _____

Rental of office equipment* \$ _____

Training* \$ _____

Vehicle expenses Complete Schedule 3

Home office expense Complete Schedule 4

Other (please provide details): \$ _____

* Applies to commission employees only.

Schedule 3**VEHICLE EXPENSES (used for Business/Employment)**

If purchased, leased or sold in the year, include relevant agreements.

Year & make of vehicle _____

Purchase/sale price _____

Date of purchase/sale _____

Date lease began/ended _____

Kms driven for business purposes _____

Total Kms driven _____

Expense

Fuel \$ _____

Repairs & maintenance \$ _____

Insurance \$ _____

Licensing & registration fees \$ _____

Loan interest \$ _____

Lease payments \$ _____

Parking \$ _____

Other _____ \$ _____

Other _____ \$ _____

Schedule 2 - complete for each separate business**BUSINESS (Self-employed) INCOME & EXPENSES**

Name of business (other than personal name) _____

Type of business _____

Did you generate income from a website? Yes ☐ No ☐

If yes, please provide:

Website address: _____

Website address: _____

% of Gross income earned from websites _____ %

Did you have partners in your business?

If yes, please provide:

Partner Name SIN % Owned

GST business number _____

Are we preparing your GST return? Yes ☐ No ☐

	Pre-GST	GST	Total
Revenue	\$ _____	\$ _____	\$ _____

Expenses	\$ _____	\$ _____	\$ _____
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Advertising	\$ _____	\$ _____	\$ _____
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Meals & entertainment	\$ _____	\$ _____	\$ _____
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Bad debts	\$ _____	\$ _____	\$ _____
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Insurance	\$ _____	\$ _____	\$ _____
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Interest & bank charges	\$ _____	\$ _____	\$ _____
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Licenses, dues, memberships & subscriptions	\$ _____	\$ _____	\$ _____
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Office expenses	\$ _____	\$ _____	\$ _____
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Accounting, legal & other professional fees	\$ _____	\$ _____	\$ _____
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Rent	\$ _____	\$ _____	\$ _____
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Repairs & maintenance	\$ _____	\$ _____	\$ _____
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Salaries	\$ _____	\$ _____	\$ _____
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Travel	\$ _____	\$ _____	\$ _____
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Telephone	\$ _____	\$ _____	\$ _____
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Other:	\$ _____	\$ _____	\$ _____
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Other:	\$ _____	\$ _____	\$ _____
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Other:	\$ _____	\$ _____	\$ _____
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Vehicle expenses Complete Schedule 3

Home office expenses Complete Schedule 4

Capital equipment purchases (computer, desk, etc)

Item	Pre-GST	GST	Total
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

Schedule 4**HOME OFFICE (for Business & Employment)**

Total square footage of area used for business? _____

Total square footage of home? _____

Utilities (Heat/Hydro/Water)	\$ _____
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Repairs & maintenance	\$ _____
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Insurance	\$ _____
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Property tax	\$ _____
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Internet (cable excluded)	\$ _____
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Rent	\$ _____
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Mortgage interest	\$ _____
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Other	\$ _____
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Real Estate - Please complete the following schedules for each property

Did you change the use of a property during the year (rental to personal use or vice versa)?

Yes ☐ No ☐

If yes, we will contact you. We will need the address, date of change, and possibly the fair market value on the date of change.

**Schedule 5
RENTAL PROPERTY**

Was the property used for short-term rentals (ie. Airbnb)? Yes ☐ No ☐

Did you own the property with partners? If yes, please provide:

Partner Name	SIN	% Owned
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Include the Statement of Adjustments if purchased in the year

Address _____

Rental income \$ _____

Expenses

Advertising \$ _____

Insurance \$ _____

Mortgage interest \$ _____

Office expenses \$ _____

Accounting, legal & other professional fees \$ _____

Management & administration/strata fees \$ _____

Repair & maintenance \$ _____

Salaries, wages & benefits \$ _____

Property taxes \$ _____

School Taxes \$ _____

Travel \$ _____

Utilities \$ _____

Other _____ \$ _____

Major renovations & purchases (ie: appliances)

_____ \$ _____

_____ \$ _____

**Schedule 6
SALE OF REAL ESTATE**

Was the property ever your principal residence? Yes ☐ No ☐ *If yes, we will contact you.*

Did you own the property with partners? If yes, please provide:

Partner Name	SIN	% Owned
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Include the Statement of Adjustments for BOTH the sale and purchase OR**If the statements are not available, complete the remaining schedule as follows:**

Address _____

Date Purchased _____

Purchase price \$ _____

Property transfer tax \$ _____

Legal costs paid on purchase \$ _____

Additions and/or major improvements

_____ \$ _____

_____ \$ _____

_____ \$ _____

Date Sold _____

Sale price \$ _____

Legal costs paid on sale \$ _____

Commission paid on sale \$ _____

Other _____ \$ _____

Other _____ \$ _____

Other _____ \$ _____

Schedule 7**SALE OF INVESTMENTS AND ASSETS (OTHER THAN REAL ESTATE) (Not including investments held in your RRSP, TFSA or other registered plans)**

Sale of investments includes: shares, conversion of loans/notes to shares, sale of cryptocurrency, share for share exchanges, etc.

Investment advisor contact information:

Advisor's Name: _____

Financial Institution: _____

Phone #: _____

Email: _____

Option 1: Please provide the following documents for ALL NON-RRSP or NON-registered plans:

1: December 31st investment statements

2: Realized gain/loss report covering the period from Jan to Dec, **OR**

Brokers' statement for both purchases and sale (only if realized gain/loss report is not available)

Option 2: For self-managed investment accounts or if the above information is not available, please provide information in the format below:

Name of Stock	Purchase Date MM / DD / YY	Sale Date MM / DD / YY	US \$ (Y/N)	Shares Sold #	Sale Proceeds \$	Commissions \$	Cost of Shares \$
_____	____/____/____	____/____/____	_____	_____	_____	_____	_____
_____	____/____/____	____/____/____	_____	_____	_____	_____	_____
_____	____/____/____	____/____/____	_____	_____	_____	_____	_____

Schedule 8 FOREIGN INVESTMENTS

At any time in the year, did you own foreign property/assets with a total cost greater than Canadian \$100,000? Yes No

If your investments include shares held with your investment advisor, you will receive appropriate reporting information from your advisor. Provide this information to us. If your investments are not held with you investment advisor, you will need to provide further details. For assistance, please contact us to receive a summary sheet.

Did you own shares of a foreign corporation during the year (outside of your investment account(s))? If yes, please provide the following:

Name of corporation _____

Country of residence _____

% of Shares owned _____