

2019 Personal Tax Organizer – Healthcare Professionals

1. Personal Information

Name:			
SIN:		Date of birth: (YYYY/MM/DD)	
Email:		Phone:	
Address:			
	<i>Street</i>	<i>City</i>	<i>Province</i> <i>Postal code</i>
Did you change your address in 2019?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, when?

Spouse/Partner:			
SIN:		Date of birth: (YYYY/MM/DD)	
Marital Status:	<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Common-law <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed
If married or common-law, would you like us to prepare your spouse's/partner's return?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If your marital status changed during the year, provide date of <i>change</i> (YYYY/MM/DD):	_____		

Dependent's name:	SIN:	Relationship to you:	Date of birth: (YYYY/MM/DD)

Did you immigrate to Canada or emigrate from Canada during the year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, provide date of entry into Canada (YYYY/MM/DD) _____ or the date of departure _____		
Province or territory of residence on December 31, 2019:	_____	
Are you a U.S. citizen or green card holder?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Are you a Canadian citizen?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, do you authorize Canada Revenue Agency to provide your name, address, date of birth and citizenship to Elections Canada to update your information on the National Register of Electors?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Would you like us to register you for Canada Revenue Agency's online mail service?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Did you own or hold foreign property during 2019 with a total cost above CAD \$100,000?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

2. Income

T4 – employment income	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide related slips or information</i>
T4A – commission and self-employment income	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
T4E – employment insurance benefits	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
T4A – pension, retirement and annuity income	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
T4AP – Canada Pension Plan benefits	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
T4A(OAS) – Old Age Security pension/foreign pension	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
T4A(RCA) – Retirement Compensation Arrangement	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
T4RSP – Registered Retirement Savings Plan income	<input type="checkbox"/> Yes	<input type="checkbox"/> No	



T4RIF – Registered Retirement Income Fund income	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide related slips or information</i>
T3 – income from trust allocations	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
T5 – investment income	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
T4PS – income from profit sharing plans	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
T5013 – partnership income	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
T5008 – income from securities transactions	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Did you sell, gift or donate property or investments during 2019?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide details</i>
Did you own rental property during the year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide the address, rent collected and expenses paid</i>
Did you also live in the rental property?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide details</i>

3. Deductions

Union and professional dues	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide tax receipts</i>
Childcare expenses	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide list of expenses, with receipts, for each child</i>
Moving expenses if you moved at least 40 kms to be closer to a job or educational institution	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide details and receipts</i>
Alimony or support payments	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide a list of payments made and a copy of the court order or written agreement</i>
Employment expenses	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide details and a T2200 signed by your employer</i>
Worker's compensation, social assistance payments or net federal supplements	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide your T5007 slips</i>
Do you elect to split eligible pension income with your spouse or common-law partner?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Student loan interest paid during the year	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide receipt or interest statements</i>
Medical expenses paid during the year for you, your spouse and/or dependents for which you were not reimbursed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide receipts</i>
Charitable donations, including gifts-in-kind	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide receipts</i>
Political contributions	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide receipts</i>
Transit passes to claim Ontario seniors' public transit tax credit	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide receipts</i>
RRSP contributions	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide tax receipts</i>
Amounts repaid during the year to a Home Buyer's Plan or a Lifelong Learning Plan	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide the amount repaid</i>
Teacher and Early Childhood Educator School Supply Tax Credit	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide certification from your employer as well as receipts for the supplies</i>
Healthy Homes Renovation Tax Credit to help make the home of a senior 65 years or older safer and more accessible	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide receipts</i>
Did you sell your principal residence or rental property in 2019?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide purchase price, selling price, date of acquisition, description of property and legal documents, including Statement of Adjustments</i>

If you had investment income: Interest paid \$ _____ Management fees \$ _____ Accounting/legal fees \$ _____

4. Self-Employment / Practice Income

Are your financial statements or schedule of revenue and expenses attached?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Have you registered for Employment Insurance special benefits?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Did you use your vehicle for business or work?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide vehicle expenses as well as total and business kilometres driven</i>
Did you use a portion of your home for business or work?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide home expenses, and both total and business square footage</i>
Did you purchase, sell or donate assets (cars, equipment, etc.)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide receipts</i>
Does your business or practice earn income from Internet webpages or websites?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide the number of Internet webpages/websites, the main webpage/website addresses and the percentage of your gross income generated from webpages/websites</i>

5. Tax Credits

Tuition or education amount claimed by you, your spouse or dependent children)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide signed T2202/T2202A</i>
Did you pay property taxes during the year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide details and the name of the municipality</i>
Did you pay rent during the year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide details and the name of the landlord</i>
If you, your spouse or dependent child is eligible to claim the disability amount, did you receive part-time attendant care in a retirement home?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide the T2201 completed by your physician and proof of payment that shows the actual amount paid for attendant care</i>
Are you a first-time homebuyer or have you purchased a home after you or your spouse/partner have not owned one for the four preceding years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide a copy of your property purchase documents received from your lawyer, including the Statement of Adjustments</i>
Did you withdraw funds from your Lifelong Learning Plan in 2019?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>provide details</i>

6. Prior-Year Tax Return Information, Correspondence

If you are a new client, provide your tax returns and corresponding Notices of (Re)Assessment for the last three years, if you have not already done so.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Would you like your tax refund deposited directly into your bank account? (<i>provide a void cheque</i>)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Provide your statement of income tax instalments from Canadian Revenue Agency if you have one.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Please send us **this organizer and your supporting documents** using one of the following methods:

- 1) **Upload** to your secure **client portal**
- 2) **Courier** to our head office only at:
Tucker Professional Corporation
Unit 2 - 146 West Beaver Creek Road
Richmond Hill, ON L4B 1C2
- 3) **Personal drop-off** at Unit 2, 146 West Beaver Creek Road by appointment only