

PERSONAL TAX ORGANIZER For the year 2024

Please complete this T1 Organizer before your appointment. Please attach all applicable slips, lists, and other supplemental information for each question answered "Yes".

1. Personal Information (*existing clients – please complete section 1. for any changes)

	Name	Gender	SIN	Date of Birth (dd/mm/year)	Phone Number	
Taxpayer		<input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> X			Mobile	
Spouse		<input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> X			Office	
Email:					Home	
Address						

Have you registered with CRA My Account online? Yes No

Marital Status: Married Single Common-law Divorced Widow

If married or common-law, are we preparing the personal returns for you and your spouse? Yes No

If no, provide the amount from line 23600 of your spouse's return: _____

If marital status changed during the year, provide date of change (dd/mm): _____

Were you or your spouse born in the U.S., a U.S. citizen or Green Card holder? Yes No

2. Residence

Province or territory of residence on December 31 _____

Did the taxpayer immigrate to Canada or emigrate from Canada during the year? Yes No

If yes, provide date of entry into Canada (dd/mm): _____ or date of departure _____

3. Elections Canada

Is the taxpayer a Canadian citizen? Yes No

If yes, the taxpayer authorizes the CRA to provide his/her name, address, and date of birth to Elections Canada to update his/her information on the National Register of Electors. Yes No

4. Foreign Reporting (excludes personal use-use property, such as a property used exclusively for vacation)

Did the taxpayer own or hold foreign property with a total cost between CAN\$100,000 and CAN\$250,000 at any time during the year? Yes No

If yes, provide the total foreign income and capital gains earned during the year

Did the taxpayer own or hold foreign property with a total cost of more than CAN\$250,000 at any time Yes No

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during the year?

If yes, provide a detailed list by foreign property / asset of income and capital gains earned during the year

Did the taxpayer, or together with family members, have a 10 percent or more interest in a non-resident corporation.

Yes No

If yes, contact us to discuss the relevant information required to prepare the tax form T1134.

Did the taxpayer receive a contribution from or make a contribution to a foreign trust?

Yes No

If yes, contact us to discuss the relevant information required to prepare the tax forms T1142 / T1141.

5. Change in Personal or Financial Situation during the Year

Did the taxpayer declare bankruptcy during the year?

Yes No

If yes, date bankruptcy was declared: (dd/mm): _____

6. Dependants

Name	Relationship	Date of Birth (mm/dd/year)	SIN	Physically or Mentally Infirm? (Y/N)	Income	Child Care Expenses? (Y/N)

Canada Child Care Benefit (CCB) recipient?

Yes No

7. General Income/Deductions

T4 slips—Employment income?

Yes No

T4A—Commission and self-employment?

Yes No

—Canada emergency or recovery benefits?

Yes No

T4E—Employment insurance benefits?

Yes No

T5007—Social assistance, workers compensation or net federal supplement?

Yes No

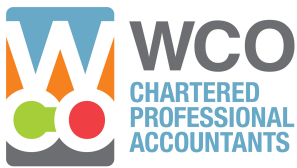
Employment income, taxable benefits or other income (e.g. tips and gratuities) not shown on the T4 slip? _____

Union and profession dues

Yes No

If yes, please provide:

Name of Organization	Amount



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List of child care expenses, with receipts, for each child under the age of 17 or eligible for the Disability Tax Credit? Yes No

List of moving expenses paid in the year, only if you moved to be 40 kms closer to a new work, business location or school? Yes No

List of spousal support payments made or received?
If yes, provide copy of relevant agreement and amendments that have not been previously given to us. Yes No

List of deductible employment expenses?
If yes, provide the completed form T2200E from the taxpayers' employer. Yes No

8. Pension Income

T4A—Pension, retirement, and annuity income? Yes No

T4AP—Canada pension plan benefits? Yes No

T4A(OAS)—Old age security pension slip/foreign pensions? Yes No

T4A(RCA)—Retirement compensation arrangements? Yes No

T4RSP—Registered retirement savings plan income? Yes No

T4RIF—Registered retirement income fund income? Yes No

Does the taxpayer elect to split eligible pension income with his/her spouse or common-law partner? Yes No

9. Investment income

T3—Income from trust allocations? Yes No

T5—Investment income? Yes No

T5013 —Partnership income? Yes No

T5008—Income from securities transactions? Yes No

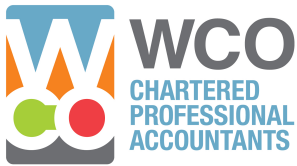
Did the taxpayer dispose of property or investments during the year (excluding principal residence)? Yes No

If yes, provide the following details in a separate list:

(Note: The taxpayer's broker should be able to provide a realized gains and losses schedule that provides these details)

Description of Property and Quantity	Date Acquired (mm/dd/year)	Disposal Date (mm/dd/year)	Sales Proceeds	Cost	Expenses on Disposal

Did the taxpayer sell a principal residence during the year? Yes No



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If the property was taxpayer's principal residence for all years owned, provide the following information:

a) If the property was taxpayer's principal residence for all years owned, provide the following information:

Description and Address	Date Acquired	Sale Proceeds

b) If the property was not taxpayer's principal residence for all years owned, provide the following information:

Description and Address	Date Acquired	Date of Disposal (dd/mm)	Sale Proceeds	Original Cost

Expenses on disposal	Adjust cost base at time of disposition (original cost plus capital additions)	If owned prior to 1982, fair market value on Dec 31, 1981	If owned prior to 1982, adjusted cost base on Dec 31, 1981	Years the property was designated as a principal residence

Interest paid to earn investment income _____ Management fees (non-registered accounts only) _____ Deductible accounting/legal fees _____

10. Self-Employment/Business Income

Financial statement(s)/schedule of revenue and expenses attached? Yes No

If the taxpayer used a vehicle for business, are the vehicle expenses and both total and business mileage attached? Yes No

If the taxpayer used a portion of his/her home for business, are the home expenses and both total and business square footage attached? Yes No

Is a list of all asset additions and disposals (including cars, equipment, etc.) attached? Yes No

11. Rental Income

If the taxpayer owned rental property, is a statement of rental income attached? Yes No
 If a short-term rental unit, was it compliant as of December 31, 2024

Does the taxpayer also live in the rental property (in which case no CCA should be claimed)? Yes No

12. RRSP/PRPP/FHSA Contributions

Receipts for contributions made attached? Yes No



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Were any amounts withdrawn or repaid during the year to a home buyers' plan, a lifelong learning plan or first home savings account? Yes No

13. Tax Credits

T2202A—Tuition amount for taxpayer? Yes No

T2202A—Tuition amount claimed on transfer from dependant (**T2202A slip must be signed**) Yes No

TL-11A – Tuition amount for taxpayer attending a university outside of Canada (full time students only)? Yes No

Receipts and listing of all medical expenses paid in the year for taxpayer, spouse, and dependants? Yes No

Receipts for charitable donations or donations made by way of gifting an item in kind? Yes No

Receipts for political contributions? Yes No

List of eligible teaching supplies purchased (for teachers and early childhood educators only)? Yes No

Public transit passes for travel by Ontario seniors only (receipts/details)? Yes No

Information pertaining to the purchase of a new home to claim the first-time home buyer's amount? Yes No

Is the taxpayer eligible to claim the disability amount? Yes No
If yes, provide a completed form T2201E, unless it has been previously supplied to us.

Receipts for eligible expenses for improvement to your principal residence to allow a senior to gain access to, or be more mobile/functional with the home (must be eligible for the disability tax credit)? Yes No

Property taxes/rent paid in the year and landlord/municipality? Yes No
If yes, provide a copy of the assessment and / or rent receipt that provides proof of payment and includes the following:

Amount _____ Name of Landlord _____ Municipality _____

14. Ontario Trillium Benefit

Have you received the Ontario senior homeowners' property tax grant? Yes No

Did you reside in a designated student residence? Yes No

Did you have a qualified dependant? Yes No

Did you reside in a principal residence in Northern Ontario on December 31? Yes No

If, on December 31, you and your spouse or common-law partner occupied separate principal residences for medical reasons, and you are choosing to apply for the OEPTC, the NOEC, or the OSHPTG individually, tick this box.

Involuntary separation – Enter the address of your spouse or common-law partner:

Amount paid for a principal residence for 2024



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Data transferred to the spouse

Yes No

Principal residence - Address	Number of months resident in 2023	*Type of amount	Amount paid for 2024	Name of landlord, municipality or supplier to whom payment was made

**Type of amount:* Rent / Property tax / Home energy costs for your principal residence on a reserve in Ontario / Accommodation in a public or non-profit long-term care home

15. Prior Year Tax Return Information/Correspondence

Is a copy of the Notice of Assessment for last year's tax return attached?

Yes No

If new to the firm, have prior tax returns and corresponding Notices of Assessment been provided to us.

Yes No

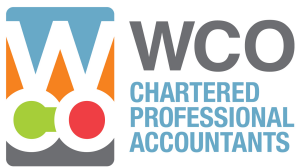
Is a copy of any other correspondence from the Canada Revenue Agency attached?

Yes No

Where instalments paid for the year current tax year?

Yes No

If yes, attached the installment statement and what was the amount paid: _____



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Appendix A - Self Employed Revenue and Expenses Schedule

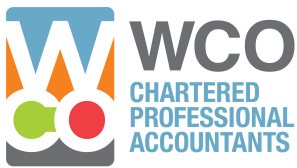
Note - If taxpayer is registered for HST, then revenue and expenses should exclude HST. If taxpayer has elected to use the Quick method in calculating HST or is not registered for HST then expenses should include HST.

If you are self-employed, do the following expenses include GST/HST? (Y/N)

Yes No

If you are registered for HST, your HST Number: _____ RT0001

Description	Amount (\$)	HST (\$)
Revenue		
<u>Operating expense (only if business related)</u>		
Material purchases		
Subcontracts		
Advertising & promotion, including gifts		
Restaurants (list 100% here, 50% will be claimed) (no single meals)		
Bad debts		
Business insurance		n/a
Interest		n/a
Loan interest, line of credit interest for business loans		n/a
Membership fees & union dues (please attach receipts)		
Newspapers, magazines, periodicals & trade publications		
Professional development & training		
Computer software		
Office expenses		
Office supplies, stationery, printing, business cards		
Computer supplies, printer supplies		
Supplies		
Legal and accounting		
Management fees, agent fees, commissions		
Office rent		
Equipment rent		
Repairs & maintenance to equipment, computers, etc.		
Salaries (including employer's contributions)		
Commissions paid, allowances, bonuses		
Business travel (train, airfare, hotel, car rental)		
Single meal restaurant receipts (out of town only)		
Taxi, TTC, public transit		
Telephone (business or fax line only, not home line)		
Utilities for rented space		
Cell phone		
Courier & postage		
Assets purchased this year: Equipment and furniture		



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Assets purchased this year: Computer hardware		
Assets purchased this year: Computer software		
Assets purchased this year: Other		
Research costs		
Internet fees		
Bank charges		n/a
Private health insurance premiums		n/a
Other expenses related to your business, not listed above (please detail below):		

Business use of car:

Business KM:	Total KM:	Business %

Year & Make of vehicle:	
Date Acquired (dd/mm/yy):	
Cost (not incl. GST/HST):	
GST/HST amount:	

(note: please provide a copy of lease or purchase agreement for 2021 acquisitions; if financed, please provide the documentation)

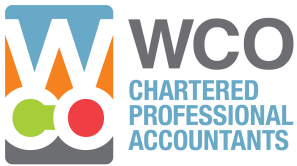
(List 100% of these car expenses):	Amount (\$)	HST (\$)
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Vehicle gas		
Vehicle parking-business only		
Vehicle repairs and maintenance		
Vehicle insurance		n/a
Vehicle/driver license		n/a
Vehicle lease payments		
Number of months leased during the year: _____		
Vehicle car washes		
Vehicle motor league fees		
Vehicle toll Fees		n/a

Home office / studio / storage in the home calculations:

Square footage of work space:	
Total square footage of house:	
Business %	

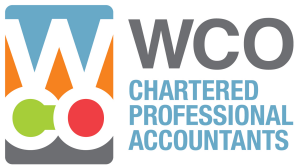
	Amount (\$)	HST (\$)
Mortgage interest only		n/a



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Rent
 Property tax
 Gas/oil
 Hydro
 Water/waste management
 Security system
 Lawn maintenance & snow removal
 Condo Fees
 Repairs & maintenance
 Home insurance

	n/a
	n/a
	n/a
	n/a
	n/a



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Appendix B - Rental Revenue and Expenses Schedule

If rental unit is in your residence: % of house rented: _____

Address of Rental property

How many rental units: _____

Were any units rented on a short-term basis?
(less than 90 consecutive days) _____

Is it located in a region requiring permits or
license to operate a short-term rental? Is the
unit compliant as of December 31, 2024? _____

	Amount (\$)
Total rental income	
Mortgage interest	
Property tax	
Gas/oil	
Hydro	
Water	
Bottled water	
Security system	
Lawn maintenance & snow removal	
Condo Fees	
Repairs and maintenance	
Home insurance	

Date acquired (dd/mm/yy):

Original Cost, including legal fees, real estate
commissions and all closing costs