



TAX CHECKLIST

Today's Date: _____

Client Tax Return Package – **Default will be Email if not specified** ☐ Portal ☐ Paper Copy

****By providing your email address, you consent to receive email correspondence from Fulcrum Group****

To authorize Fulcrum Group as your representative with CRA, you may be required to provide Notices of Assessments for the past two years for each tax filer

Current Marital Status

☐ Married ☐ Common Law ☐ Widowed ☐ Divorced ☐ Separated ☐ Single

CLIENT Legal Name: _____ **Nickname:** _____

Social Insurance: _____ **Date of Birth** _____ **Email Address:** _____

Phone (Cell): _____ **Phone (Work):** _____ **Phone (Home):** _____

SPOUSE Legal Name: _____ **Nickname:** _____

Social Insurance: _____ **Date of Birth** _____ **Email Address:** _____

Phone (Cell): _____ **Phone (Work):** _____ **Phone (Home):** _____

DEPENDANT Information:

Dependant's First, Middle and Last Name	Gender	Social Insurance No	Date of Birth MM / DD / YYYY

MAILING Address:

Street /Box: _____ **City:** _____

Prov: _____ **Postal Code:** _____



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☐ Yes ☐ No Status Has your marital status changed since last tax season?

Date of Marital Status Change (MM/DD): _____

Did you have any changes of your dependents since last tax season?

☐ Birth of a Child ☐ Child/Dependent attending University
☐ First year Child/Dependent is filing a tax return ☐ Child/Dependent claiming disability credit

If yes, provide information below (Include full name, date of birth, gender, and SIN, tuition slips, application for disability)

☐ Yes ☐ No Do you have an incorporated company?

☐ Yes ☐ No Is Fulcrum Group the Accounting firm for the company?

☐ Yes ☐ No Are you a Canadian Citizen?

☐ Yes ☐ No Is your spouse a Canadian Citizen?

☐ Yes ☐ No Do you authorize CRA to give your names, address, date of birth, and citizenship to Elections Canada to update the National Register of Electors?

Select Email Preference

☐ Tax updates and informational emails, tax questions and/or tax package pickup notifications ☐ Tax questions and/or tax package pickup notifications

☐ Yes ☐ No Would you like to be invited to the Fulcrum Group portal? (This allows you to securely upload documents/information to FG and where FG can upload information for you to access in the future)
☐ Already Subscribed

Did you have any changes of your dependents since last tax season?

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If yes, provide information below (Include full name, date of birth, gender, and SIN, tuition slips, application for disability)

☐ Yes ☐ No Did you sell your principal residence since last tax season?

If yes, provide the following information below

Year of Purchase: _____ Sale Amount: _____

☐ Yes ☐ No Are you on title for a property or accounts that you are **NOT** the beneficial owner of?
(Eg: You have co-signed for a child's mortgage or have been put on title for a parent's home or bank account for estate planning purposes). If so, you may have a T3 Bare Trust reporting obligation.

☐ Yes ☐ No During the year did you own any foreign property with a cost in excess of \$100,000?

If yes, provide all properties and details of any income earned from properties

☐ Yes ☐ No Did you reside in a prescribed northern zone for a continuous period of at **least 6 consecutive months**?
If not for the full year provide dates from _____ to _____

☐ Yes ☐ No Will any others who are sharing this residence be claiming the Northern Residents deduction?

☐ Yes ☐ No Did you travel during the tax year? Required **only** if you reside in a prescribed northern zone

If yes, provide dates, destination of travel, flight cost, and family members on trip

Are you Missing any slips for the current year? Do you need to provide additional information?