Tax Preparation Information Sheet



A Division of Business Innovation Group Inc.

Name:		SIN:				
Identification #		DOB:				
Address:						
Email:		Phone:				
Citzenship:		Date of C	Change:			
Martial Status:		Date of C	hange:			
Spouse Name:		DOB:			T	
SIN:		Income-i	f we dor	n't do return:		
Dependents						
Name:		DOB:			SIN:	
Name:		DOB:			SIN:	
Name:		DOB:			SIN:	
Name:		DOB:			SIN:	
Do Dependents live with you:		Yes	No			
Daycare fees:		Yes	No			
If Yes name of Daycare and if D	Dayhome name and SIN of Caregiver:					
Do you have any income that is exempt under the Indian Act?		Yes	No			
At any point in 2023 were you the legal owner (your name on title) of an asset held in your corporation?		Yes	No			
At any point in 2023 was a corporation the legal owner (on title) of your real estate, vehicle, or other asset?		Yes	No			
At any point in 2023 were you the legal owner (your name on title)			No			
Northern Residence:		Yes Yes	No			
Box 32 on T4 - Travel in Prescribed Zone:		Yes	No			
If Yes Travel Details:			.10	1		
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Trip 1						
Dates:						
Who Went:						
Where to:						
Any expenses: plane tickets, gas receipts, meals, hotel			Yes	No		
Trip 2						
Dates:						
Who Went:						
Where to:						
Any expenses: plane tickets, ga	as receipts, r	meals, hotel	Yes	No		
		т	ypes of sl	ips		
Т4		T4E			RRSP	
Т5		RC62			RSP	
тз		T2202A - Tuition			Donations	
T4A		T4RSP			Union Dues	
Т4АР		T4RIF			Apprenticeship	
T4OAS		T5007			Tips	
Medical receipts			Yes	No		
First-time Home Buyers			Yes	No		
Rental Income			Yes	No		
Self-employment income			Yes	No		
Farming income			Yes	No		
NOA			Yes	No		
Do you own Foreign Property			Yes	No		
To the best of your knowledg Bookkeeping & Business C			ng inform	ation or	changes to your tax ret	
Clients Name: Clients Signature:					Date:	