



# 2025 Tax Questionnaire

1. Please provide the following **personal information**:

First and last name:		SIN:	
Address:		Phone #:	
City, Province:		Postal Code:	
E-mail address:		Date of birth: (mm/dd/yyyy)	
If you are filing taxes for the first time ever, please provide your <b>middle name(s)</b> per CRA requirements:			

Are you a Canadian citizen?  Yes  No

As a Canadian citizen, do you authorize the CRA to give your name, address, date of birth, and citizenship to Elections Canada to update the National Register of Electors?  Yes  No

Did you own specified foreign property at any time in 2025 with a total cost of more than \$100,000 CAD?  Yes  No

Did you dispose of a property (or properties) in 2025 for which you are claiming a principal residence exemption? (ie. Did you sell your primary residence in 2025? If so, please include a document with sale information)  Yes  No

Are you claiming expenses related to working from home? (You must have a completed T2200 from your employer and summary totals of the expenses you are eligible to claim.)  Yes  No

Are you claiming the Disability Tax Credit for yourself this year?  Yes  No

If yes, is this a first year claim?  Yes  No

At December 31 of the current tax year, what was your **marital status**?

CRA definitions for marital status: <https://www.canada.ca/en/revenue-agency/services/tax/individuals/topics/about-your-tax-return/tax-return/completing-a-tax-return/personal-address-information/marital-status.html>

<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Divorced
<input type="checkbox"/> Common law	<input type="checkbox"/> Separated	<input type="checkbox"/> Widowed

If your marital status changed during the tax year, provide the date the change took place: \_\_\_\_\_

Spouse's first and last name: \_\_\_\_\_

If you are married or common law and we are **not** preparing your spouse's tax return, please provide the following information about your **spouse**:

Date of birth: (mm/dd/yyyy)		SIN:	
Taxable income for the current tax year:	\$ _____		

2. Please provide the following information about your **dependent(s)**, if applicable:

First and last name:			
Relationship: (select one)	<input type="checkbox"/> Child <input type="checkbox"/> Spouse <input type="checkbox"/> Parent	<input type="checkbox"/> Child <input type="checkbox"/> Spouse <input type="checkbox"/> Parent	<input type="checkbox"/> Child <input type="checkbox"/> Spouse <input type="checkbox"/> Parent
SIN: (if applicable)			
Date of birth: (mm/dd/yyyy)			
Total childcare cost: (if applicable)			
Dependent's income: (if applicable)			
Claiming disability tax credit <b>for this dependent:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

3. Please indicate which of the following **tax slips** you are including:

<input type="checkbox"/>	T4 slips: T4, T4A, T4A(OAS), T4E, T4RSP, T4RIF, T4FHSA	<input type="checkbox"/>	RRSP contribution slips
<input type="checkbox"/>	T5 slips: T5, T5007, T5008, T5013	<input type="checkbox"/>	FHSA contribution slips
<input type="checkbox"/>	T3 slips	<input type="checkbox"/>	T2202A tuition/education receipt

**For additional information about deductions and credits, refer to our Tax Documents Checklist.**

4. Please indicate if you are including receipts for any of the following **deductions and/or credits**:

Receipts for deductions/credits, such as:

- Medical expenses
- Professional or union dues
- Interest paid on student loans
- Charitable donations
- Political contributions
- Childcare expenses
- Moving expenses
- Adoption expenses
- Spousal support payments
- Child support payments\*
- First time home buyer's tax credit
- Ontario seniors care at home tax credit
- Multigenerational home renovation tax credit (MHRTC)

*\*Please note that if you pay both spousal and child support, you are required to report both payments on your tax return, even though only the spousal support can be claimed as a tax deduction.*

5. If available/applicable, please include the following **additional information**:

<input type="checkbox"/>	Prior year information if prepared by another firm (2024 tax return, 2024 Notice of Assessment)	<input type="checkbox"/>	Rental property income and expenses
<input type="checkbox"/>	Disability tax credit certificate	<input type="checkbox"/>	Fishing/farming income and expenses
<input type="checkbox"/>	Business income and expenses*	<input type="checkbox"/>	Rent or property tax paid in 2025
<input type="checkbox"/>	Business use of home/business use of personal vehicle*		

*\*Please complete the Self-Employed Income & Expenses Worksheet if you are a sole-proprietor.*