

Your 2010 Income

Check if you have any of the following income items:

Item	Slips to Bring
<input type="checkbox"/> Employment income	T4
<input type="checkbox"/> Taxable disability income	T4A
<input type="checkbox"/> Profit sharing income	T4PS
<input type="checkbox"/> Commission income	T4 or T4A
<input type="checkbox"/> Old Age Security income	T4A
<input type="checkbox"/> Canada Pension Plan income	T4AP
<input type="checkbox"/> Other pension/annuity income	T4A
<input type="checkbox"/> RRSP income	T4RSP
<input type="checkbox"/> RRIF income	T4RIF
<input type="checkbox"/> Withdrawals from RRSP	T4RSP
<input type="checkbox"/> EI Benefits	T4E
<input type="checkbox"/> Worker's Compensation (WSIB)	T5007
<input type="checkbox"/> Social assistance payments	T5007
<input type="checkbox"/> Dividend income	T3s and T5s
<input type="checkbox"/> Interest income	T3s and T5s
<input type="checkbox"/> Limited partnership income	T5013
<input type="checkbox"/> Rental property income	See page 3
<input type="checkbox"/> Sale of real estate	See page 3
<input type="checkbox"/> Sale of non-RRSP stocks	See page 3
<input type="checkbox"/> Sale of non-RRSP mutual funds	See page 3
<input type="checkbox"/> Self-employed income	See page 4
<input type="checkbox"/> Self-employed income	See page 4
<input type="checkbox"/> Alimony income	\$ _____
<input type="checkbox"/> Other income:	
Universal child care benefit	\$ _____
_____	\$ _____

Your 2010 Deductions/Credits

Check if you have any of the following:
Please include receipts.***

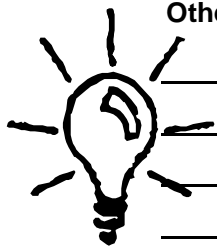


Item	Amount
<input type="checkbox"/> Charitable donations	\$ _____
<input type="checkbox"/> Political party contributions	\$ _____
<input type="checkbox"/> Labour-sponsored fund contributions	\$ _____
<input type="checkbox"/> RRSP contributions	\$ _____
<input type="checkbox"/> Moving expenses	\$ _____
<input type="checkbox"/> Tuition fees for yourself	\$ _____
<input type="checkbox"/> Children's / spouse's tuition fees	\$ _____

Please note amount and ensure that you have the receipts to support the following items: (If unsure, attach receipts)

<input type="checkbox"/> Employment expenses	see page 4
<input type="checkbox"/> Alimony payments made	\$ _____
<input type="checkbox"/> Disability amount	\$ _____
<input type="checkbox"/> Medical expenses	\$ _____
<input type="checkbox"/> Rent paid	\$ _____
<input type="checkbox"/> Property taxes paid	\$ _____
<input type="checkbox"/> Safety deposit box charges	\$ _____
<input type="checkbox"/> Legal fees for investment loan	\$ _____
<input type="checkbox"/> Investment loan interest paid and details	\$ _____
<input type="checkbox"/> Tax instalments paid to the government	\$ _____
<input type="checkbox"/> Union dues, professional fees	\$ _____
<input type="checkbox"/> Child care expenses	\$ _____
<input type="checkbox"/> OSAP loan repayment interest	\$ _____
<input type="checkbox"/> Child fitness payments max \$500/child	\$ _____
<input type="checkbox"/> Child Activity payments max \$500/child	\$ _____

Other information you would like to tell us about.



If you are not sure we'll need it, bring it along!

Rental Property Income & Expenses



Address _____

Joint owner _____

Jt. Ownership % _____

Income (rent collected) \$ _____

Expenses

Advertising _____ \$ _____

Insurance _____ \$ _____

Interest _____ \$ _____

Office expenses _____ \$ _____

Legal, accounting, and other professional fees _____ \$ _____

Maintenance and repairs _____ \$ _____

Management and administration fees _____ \$ _____

Salaries, wages, and benefits (including employer's) _____ \$ _____

Property taxes _____ \$ _____

Travel _____ \$ _____

Utilities _____ \$ _____

Other Expenses _____ \$ _____

Major renovations & purchases (ie. Appliances) _____ \$ _____

_____ \$ _____

_____ \$ _____

If the property was purchased in the year, please provide the details.

Sale of Real Estate

(excluding personal residence)



Address _____

Date Sold _____

Joint owner _____

Jt. Ownership % _____

Date Purchased _____

Purchase price _____ \$ _____

Legal costs on purchase _____ \$ _____

Additions / major improvements: _____ \$ _____

_____ \$ _____

_____ \$ _____

Sale Price _____ \$ _____

Legal costs on sale _____ \$ _____

Commissions paid on sale _____ \$ _____

Other selling expenses _____ \$ _____



Sale of Non-RRSP Stock (please provide broker's receipts for both the purchase and the sale)

Name of Stock	Date Sold (dd/mm/yy)	Number of Shares	Sale* Price	Purchase* Price	Commissions Paid

* Price per share

Sale or Transfer of Non-RRSP Mutual Funds (including systematic withdrawal programs)

Please provide the December 31, 2010 year end statements for all of your non-RRSP mutual funds. These statements were sent to you by the mutual fund companies in January 2010. The statements show all transactions for 2009, including any sale, redemption or transfer of your shares in the mutual fund during the year.

List all of your mutual funds that had shares sold or transferred during 2010.



Self-Employed Income & Expenses



Name of Business _____

Type of Business and address if different from home _____

Joint Owner and % _____

Revenue \$ _____

Expenses

Purchases \$ _____

Meals and entertainment (allowable part only) \$ _____

Bad Debts \$ _____

Advertising \$ _____

Insurance \$ _____

Interest and bank charges \$ _____

Office expenses \$ _____

Legal, accounting, and other professional fees \$ _____

Management and administration fees \$ _____

Maintenance and repairs \$ _____

Salaries, wages and benefits(including employer's) \$ _____

Property taxes \$ _____

Travel \$ _____

Utilities \$ _____

Motor vehicle expenses (not including capital cost) \$ _____

Other Expenses \$ _____

Equipment/furniture purchases (if you need more space, attach list) \$ _____

Registered for GST? YES NO
If yes, do the above figures include GST?

Automobile _____ SEE ACROSS

Home office _____ SEE BELOW

Employment Expenses

Please ensure that you have a signed T2200 (Declaration of Employment Conditions) available should you be asked by the government to substantiate this claim. Please provide us with a copy of this form.

Expenses

Accounting, legal fees \$ _____

Advertising, promotion \$ _____

Meals/entertainment \$ _____

Lodging \$ _____

Parking \$ _____

Office supplies \$ _____

Telephone \$ _____

Is your employer registered for GST ? YES NO

Travel \$ _____

Supplies \$ _____

Other Expenses \$ _____

_____ \$ _____

Automobile SEE BELOW

Home office SEE BELOW



Automobile Expenses

Please ensure that you keep a log of kms driven in the year
Year/Make of Car: _____

Purchase Price *** \$ _____

Year Purchased ** _____

Total Kilometres driven in 2010 _____

Business or Employment Use % _____

Expenses Total for 2010

Fuel \$ _____

Repairs \$ _____

Lease payments \$ _____

Car washes \$ _____

Insurance \$ _____

License and registration \$ _____

Interest on loan to purchase vehicle \$ _____

Any per km flat allowance received \$ _____

Other expenses eg CAA membership \$ _____

_____ \$ _____

** If a vehicle was disposed of in the year, please provide details

*** If leased vehicle, please provide a copy of purchase/lease paperwork

Home Office Expense



Business or Employment Use % _____
(percentage of house used for business or employment)

Expenses Total for 2010

Heat/Gas \$ _____

Hydro/Water \$ _____

Insurance \$ _____

Repairs and maintenance \$ _____

Mortgage interest \$ _____

Property taxes \$ _____

Rent \$ _____

Other \$ _____