

Name: _____

FINANCIAL LITERACY

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PERSONAL INFORMATION					
		Social Insurance Number	Date of Birth		
			D	M	Y
Name					
Name of Spouse/Partner					
Name of Dependants	1.				
	2.				
	3.				
	4.				
Address		Apt. #			
Street		City			
Province		Postal Code			
Telephone: Home ()		Telephone: Office ()			
Telephone: Cell ()		Fax: ()			
Is Your Address New This Year?					<input type="checkbox"/> Yes <input type="checkbox"/> No
			D	M	Y
Date of Departure from or Entry to Canada if Within Tax Year					
Date of Marriage if Within Tax Year					
Date of Separation or Divorce if Within Tax Year					
Date of Death					
Date of Dependant's Birth if Within Tax Year					
Province of Residency on December 31					

INCOME (include T3s, T4s, T4As, T5s, T600s, and invoices)					
BUSINESS					
Type of Business					
Financial Statement <input type="checkbox"/> Included <input type="checkbox"/> Not Included					
Employer's Remittance Number					
Wages or Partnership Allocation to Spouse \$					
CAPITAL GAINS					
REAL ESTATE			D	M	Y
Amount of Purchase \$		Date of Purchase			
Amount of Sale \$		Date of Sale			
LISTED PERSONAL PROPERTY					
Amount of Purchase \$		Date of Purchase			

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INCOME (include T3s, T4s, T4As, T5s, T600s, and invoices) (cont'd)				
Commissions Paid and Legal Fees \$				
Amount of Sale \$	Date of Sale			
Other Costs of Sale \$				
DO YOU HAVE DEBT OR SHARES IN A CANADIAN CONTROLLED PRIVATE CORPORATION? <input type="checkbox"/> Yes <input type="checkbox"/> No				
IF YES:				
Amount of Loan or Purchase \$	Date of Loan or Purchase			
Amount of Sale \$	Date of Sale			
Other Costs of Sale \$				
DID YOU TRANSFER A FARM TO CHILDREN OR GRANDCHILDREN? <input type="checkbox"/> Yes <input type="checkbox"/> No				
DID YOU TRANSFER SHARES OF A SMALL BUSINESS CORPORATION? <input type="checkbox"/> Yes <input type="checkbox"/> No				
DID YOU TRANSFER FISHING PROPERTY TO A CHILD OR GRANDCHILD? <input type="checkbox"/> Yes <input type="checkbox"/> No				
IF YES TO A TRANSFER:				
Value of Transfer \$	Date of Transfer			
DID YOU BUY OR SELL SHARES OR MUTUAL FUNDS DURING THE TAX YEAR? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Amount of Purchase \$	Date of Purchase			
Amount of Sale \$	Date of Sale			
Other Costs of Sale \$				
FEBRUARY 24, 1994 CAPITAL GAINS ELECTION AMOUNTS \$				
CHILD SUPPORT				
Received \$				
Paid \$				
COMMISSIONS \$				
ELIGIBLE DIVIDENDS \$				
Notice of designation by corporation:	<input type="checkbox"/> Included <input type="checkbox"/> Not Included			
OTHER DIVIDENDS \$				
EMPLOYMENT \$				
TAXABLE BENEFITS \$				
Automobile	Documents Attached	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Residence	Documents Attached	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Other	Documents Attached	<input type="checkbox"/> Yes <input type="checkbox"/> No		
LOW INTEREST OR NO INTEREST LOANS		D	M	Y
Amount Outstanding \$	Date Outstanding			
Amount Outstanding \$	Date Outstanding			
GRATUITIES AND TIPS \$				
INTEREST FROM INVESTMENTS \$				
Canada Savings Bonds \$				

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INCOME (include T3s, T4s, T4As, T5s, T600s, and invoices) (cont'd)	
Other Bonds \$	
Mortgages \$	
Trusts \$	
FOREIGN ASSETS IN EXCESS OF \$100,000 \$	
PENSIONS	
RETIRING ALLOWANCES	
Amount \$	
RRSP Contributions \$	
RRSP CONTRIBUTIONS	
Amount \$	
Home Buyers' Plan Withdrawals	
Lifelong Learning Plan Withdrawals	
RRIF WITHDRAWALS	
Individual Pension Plans	
RESP CONTRIBUTIONS	
Amount \$	
CESG	
Amount \$	
RESP Withdrawals	
RDSP CONTRIBUTIONS	
Amount \$	
CDSG and CDSB	
Amount \$	
RDSP Withdrawals	
TFSA CONTRIBUTIONS	
Amount \$	
TFSA Withdrawals	
Other	
DIVIDEND INCOME \$	
RENTAL PROPERTY	
Address	
Apt. #	City
Province	Postal Code
TAX SHELTERS	
Number	TS
Supporting Documents Attached	<input type="checkbox"/> Yes <input type="checkbox"/> No

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EXPENSES (include receipts)	
Child Care Expenses \$	
Child Support Payments \$	
Charitable Donations \$	
Medical Expenses \$	
Moving Expenses \$	
Professional Dues \$	
Safety Deposit Box \$	
Salesperson's Expenses (Form T2200) \$	
Spousal Support Expenses \$	
Spousal Support Receipts \$	
Tuition Payments \$	
Union Dues \$	

ALLOWABLE BUSINESS INVESTMENT LOSS (ABIL)			
DID YOU SELL SHARES TO A NON-RELATED PERSON AT A LOSS?			<input type="checkbox"/> Yes <input type="checkbox"/> No
IS AN OUTSTANDING LOAN TO YOU BY A CORPORATION UNCOLLECTIBLE?			<input type="checkbox"/> Yes <input type="checkbox"/> No
IF YES, TO EITHER QUESTION, DOCUMENT THE DETAILS FOR YOUR ALLOWABLE BUSINESS INVESTMENT LOSS			
FOR THE SMALL BUSINESS CORPORATION			D M Y
Name			
Date of Bankruptcy, Insolvency, or Wind-up			
FOR THE SHARES			
Class of Shares	Number of Shares		
Date of Purchase			
Adjusted Cost Base \$			
FOR THE DEBT			
Type of Debt			
Date of Acquisition			
Adjusted Cost Base \$			
Proceeds of Disposition \$			
Amount of Your Loss \$			

TRANSFERS TO SPOUSE ON SEPARATION			
			D M Y
Your Spouse's Name			
Property That You Transferred			
Transfer Date			
Separation Date			
Consent to File Election			<input type="checkbox"/> Yes <input type="checkbox"/> No

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CHECKLIST FOR THE SELF-EMPLOYED		✓
Advertising		
Allowable Reserves		
Convention Expenses		
Disability Modifications		
Insurance		
Interest		
Interest and Borrowing Charges		
Health Plan Premiums		
Home Office, if Place of Business		
Square Footage or Proportion of Rooms Dedicated		
Rent or Mortgage Interest		
Property Tax		
Home Insurance		
Annual Utilities		
• Heat		
• Hydro		
• Water		
• Sewage		
Maintenance and Repairs		
Leasing Costs		
Meal Expenses		
Automobile		
• Own or Lease?		
• If Lease, Lease Costs Per Month		
• If Own, Interest Costs Per Month		
• Odometer at Beginning of Tax Year		
• Odometer at End of Tax Year		
• Percentage of Business Use of Car		
• Fuel Expenses		
• Car Insurance		
• Repairs and Maintenance		
• Parking Expenses		
Equipment Purchases Subject to CCA		

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CHECKLIST FOR THE SELF-EMPLOYED (CONT'D)		✓
Office Expenses		
• Telephone & Fax		
• Internet		
• Stationery Supplies		
• New Capital Assets (attach list)		
• If Applicable, Tools		
Professional Membership Fees		
Fees for Professional Services		
Salaries Paid		
Travel		