2020 PERSONAL INCOME TAX INTAKE FORM

Client First Name:	Client Last Name:
Phone Number:	Email:
Date of Birth:	SIN:

Spouse First Name	Spouse Last Name:
Phone Number:	Email:
Date of Birth:	SIN:

Address:	City:
Postal Code:	Province:

Wholly Dependent Persons (Any new births or adoptions in the past year)

First	Last	Address (If different)	Relationship	Date of Birth	Disability

If you are required to file an HST return for your self-employment income, please select the appropriate box below: I will prepare and file my HST return ☐ I want NVS to prepare and file my HST return ☐		
Has your marital status changed within the last year? Yes ☐ No ☐		
Do you own foreign property or investments with a cost base of $100,000 (CAD) or more? If yes, please provide us with the details. Yes ☐ No ☐		
Have you sold your home or cottage within the last year? Yes ☐ No ☐ If you have, please provide the proceeds:		
Were you a first time home buyer during 2020?	Yes ☐	No ☐

Please complete the following to reflect the documentation you have submitted to us.

	Client	Spouse
INCOME	☐	☐
Employment – T4	☐	☐
Employment Insurance – T4E	☐	☐
Director's fees and other employment income	☐	☐
Old Age Security – T4A (OAS)	☐	☐
Canada Pension Plan Benefits – T4A(P)	☐	☐
Other income/pensions – T4A	☐	☐
RSP withdrawals – T4 RSP	☐	☐
RIF withdrawals – T4 (RIF documentation)	☐	☐

INVESTMENT INCOME	Client	Spouse
T5 (interest/dividends/income on capital gains)	☐	☐
T3 (trust/mutual funds income)	☐	☐
Limited Partnership – T5013	☐	☐
Rental Property (submit details of income, expenses, purchases and sales)	☐	☐

CAPITAL GAINS AND LOSSES	Client	Spouse
If you have sold any investments, please provide us with the details (include foreign investments and crypto currency or Bit-Coin)	☐	☐
Did you dispose of any capital properties this year? (submit copies of sales details & original purchase)	☐	☐

OTHER INCOME	Client	Spouse
Alimony/child support (provide copy of post 30 April 1998 agreement or election, if not previously provided)	☐	☐
Details regarding any foreign income, including from trust.	☐	☐
Business or professional income (submit details of income & expenses – complete preprinted form)	☐	☐

DEDUCTIONS	Client	Spouse
Are you eligible for the Working from Home deduction as a result from Covid-19? If so, please provide the number of days you worked from home.	☐	☐
Registered Retirement Savings Plan contributions (submit summary of receipts)	☐	☐
Pension adjustment reversal (form T10)	☐	☐
Annual union/professional dues (submit summary of receipts)	☐	☐
Attendant Care Expenses (submit summary or summary of receipts)	☐	☐
Allowable business investment losses (refer to capital gains/losses above)	☐	☐
Moving expenses (submit summary of summary of receipts) Distance moved to new employment km's	☐	☐

NVS

Alimony or separation allowances paid (include name(s)/address(es) of recipients, submit a copy of the agreement or court order for spousal support, and submit a summary of any related receipts)	☐	☐
Commission and employment expenses (detail and form signed by employer – T2200 or TL2)	☐	☐
Carrying charges (Interest on money borrowed to earn dividend and interest, investment counselling fees, interest for limited partnership, safety deposit box)	☐	☐
Federal and provincial political contributions (submit summary of receipts)	☐	☐
Charitable donations (submit summary of receipts)	☐	☐
Medical/home accessibility expenses (submit summary of receipts)	☐	☐
Disability deduction for you or your dependent (if first time claiming, attach aT2201 signed by your physician	☐	☐
Tuition fees (attach T2202/T2202A or TL1, Form to be signed by student) Should this deduction be claimed by the student or transferred to the parents? ______________________________	☐	☐
T5006 Interest paid on student loans (submit national student loan statement reporting slip)	☐	☐
Childcare expense (provide name, SIN and address of provider below and submit receipt summary)	☐	☐

Childcare Provider Name	Provider SIN	Provider Address

OTHER	Client	Spouse
Instalments paid, include a CRA statement. $ $	☐	☐