



CONCEPT PROFESSIONAL GROUP INC.

Personal Tax Checklist for 2023 Tax Year (One form per person)

We require this checklist to be completed for each filing year prior to commencing the preparation of your tax return due to annual changes in tax forms and rules. Please complete and return to our office along with your tax slips and documents. You are responsible for ensuring that the information stated in this form is factually correct, as we will use this to file your tax returns. *If you own a business, have rental properties, have moved in the past year, or are self-employed, please call our office at (403) 274-8814 to receive additional required checklists.*

First Name:				Initial(s):	
Last Name:					
Mailing Address:					
	Suite Number	Street Number	Street Name		
	City		Province	Postal Code	
Did your address change during 2023?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please provide the date of change: _____				
Province of Residence as of Dec. 31, 2023:					
Phone:					
	Home		Work		Cell
Email Address:				Do you give CPGI consent to send you email communications?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of Birth:				S.I.N.:	
	Year	Month	Day		
Marital Status on Dec. 31, 2023:	<input type="checkbox"/> Married <input type="checkbox"/> Living Common-Law <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Single				
Did your marital status change during 2023?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please provide the date of change: _____				
Canadian Citizen:	<input type="checkbox"/> Yes <input type="checkbox"/> No				
As a Canadian citizen, do you authorize the Canadian Revenue Agency to give your name, address, date of birth, and citizenship to Elections Canada for the National Register of Electors?					<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you own or hold foreign property, shares, or investment at any time in 2023 with a total cost of more than CAN\$100,000?					<input type="checkbox"/> Yes <input type="checkbox"/> No

General Information about Your Spouse or Common-Law Partner (if applicable) *:

NOTE: Preparing tax returns together allows spouses to maximize credits and pension transfers to minimize taxes.

Will we be filing a tax return for your spouse? We will still require the information if we do not file your spouse's return.					<input type="checkbox"/> Yes <input type="checkbox"/> No	
First Name:				Initial(s):		
Last Name:						
Date of Birth:				S.I.N.:		
	Year	Month	Day			
Net Income for 2023:				Self-Employed for 2023?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
How did you hear about us?						
Instagram	Facebook	X	LinkedIn	Web	Current Client	Referred by: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

General Information about Your Dependents (if applicable):

Definition of Dependent:

- Your parent or grandparent by blood, marriage, common-law partnership, or adoption; **or**
- Your child, grandchild, brother, or sister, by blood, marriage, common-law partnership, or adoption **and**
- Who was either under 18 years of age or mentally or physically impaired **and**
- Who was supported by you and lived with you during 2023?

Do you have any dependents? *If Yes , please provide the information below.						<input type="checkbox"/> Yes <input type="checkbox"/> No	
First Name:				Initial(s):			
Last Name:							
Address:							
	Suite Number		Street Number		Street Name		
		City			Province		Postal Code
Date of Birth:					S.I.N.:		
	Year	Month	Day				
Relationship to You:				Is this dependent disabled?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Net Income for 2023:				Self-Employed for 2023?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

First Name:				Initial(s):			
Last Name:							
Address:							
	Suite Number		Street Number		Street Name		
		City			Province		Postal Code
Date of Birth:					S.I.N.:		
	Year	Month	Day				
Relationship to You:				Is this dependent disabled?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Net Income for 2023:				Self-Employed for 2023?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

First Name:				Initial(s):			
Last Name:							
Address:							
	Suite Number		Street Number		Street Name		
		City			Province		Postal Code
Date of Birth:					S.I.N.:		
	Year	Month	Day				
Relationship to You:				Is this dependent disabled?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Net Income for 2023:				Self-Employed for 2023?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Please answer the following questions to help us prepare your tax return accurately and ensure that you receive all the credits and deductions you're entitled to:

INCOME			
		YES	NO
Employment or Commission Income			
1.	Did you receive Employment income? If yes, please provide the T4 Slip.	<input type="checkbox"/>	<input type="checkbox"/>
2.	Did you receive commission income? If yes, please provide T4A Slip.	<input type="checkbox"/>	<input type="checkbox"/>
3.	Are you part of a profit-sharing plan with your employer?	<input type="checkbox"/>	<input type="checkbox"/>
Pension Income			
4.	Did you or your spouse/partner receive pension income? If yes, please provide the T4A(OAS) Slip.	<input type="checkbox"/>	<input type="checkbox"/>
5.	Do you wish to split your Pension Income with your spouse for tax purposes?	<input type="checkbox"/>	<input type="checkbox"/>
Benefits Income			
6.	Did you receive any CPP benefits? If yes, please provide the T4A(P) Slip.	<input type="checkbox"/>	<input type="checkbox"/>
7.	Did you receive any death benefits (other than from CPP)? If yes, please provide the T4A(P) Slip.	<input type="checkbox"/>	<input type="checkbox"/>
8.	Did you receive any Employment Insurance or other benefits? If yes, please provide the T4E Slip.	<input type="checkbox"/>	<input type="checkbox"/>
9.	Did you receive any Workers Compensation Benefits (WCB) or Social Assistance? If yes, please provide the T5007 Slip.	<input type="checkbox"/>	<input type="checkbox"/>
Investment Income			
10.	Did you receive any dividends? If yes, please provide the T5 Slip.	<input type="checkbox"/>	<input type="checkbox"/>
11.	Did you have any interest income or other investment income (e.g., Stocks or bonds)? If yes, please provide the T3 or T5 Slip.	<input type="checkbox"/>	<input type="checkbox"/>
12.	Did you have any partnership income (from this or previous years)? If yes, please provide the T5013 Slip.	<input type="checkbox"/>	<input type="checkbox"/>
13.	Did you sell any securities and incur capital gains? If yes, please provide the T3 / T5 or T5008 Slip and Realized Gain/Loss report.	<input type="checkbox"/>	<input type="checkbox"/>
Business Income			
14.	Did you receive income from being self-employed?	<input type="checkbox"/>	<input type="checkbox"/>
15.	Did you receive income from farming?	<input type="checkbox"/>	<input type="checkbox"/>
16.	Did you incur any expenses to improve ventilation or air quality at your place of business?	<input type="checkbox"/>	<input type="checkbox"/>
Savings Plan Withdrawals			
17.	Did you cash in a Registered Disability Savings Plan (RDSP)? If yes, please provide the T4RDSP Slip.	<input type="checkbox"/>	<input type="checkbox"/>

18.	Did you cash in a Registered Retirement Savings Plan (RRSP)? If yes, please provide the T4RSP Slip.	<input type="checkbox"/>	<input type="checkbox"/>
19.	Did you make any withdrawals from an FHSA account?	<input type="checkbox"/>	<input type="checkbox"/>

Rental Income

20.	Did you receive any rental income?	<input type="checkbox"/>	<input type="checkbox"/>
21.	Did you sell a property in 2023? If yes, was it:	<input type="checkbox"/>	<input type="checkbox"/>
	a) A principal residence? Yes _____ No _____ b) An investment property? Yes _____ No _____		

Other Income

22.	Did you earn any income from the following: scholarships, fellowships, bursaries, or artist project grants? If yes, please provide the T4A Slip.	<input type="checkbox"/>	<input type="checkbox"/>
23.	Any other source not listed above and not indicated on a T4 slip (e.g. tips)? If you checked Yes: Income Source: _____ Total Amount: \$ _____ (If you have more than one additional income source, please attach the additional information to this form.)	<input type="checkbox"/>	<input type="checkbox"/>
24.	Did you receive alimony or support payments? If yes, please provide the total amount. \$ _____	<input type="checkbox"/>	<input type="checkbox"/>

DEDUCTIONS

Savings Plan

25.	Did you contribute to an RRSP in 2023 or within 60 days of the following year? If yes, please provide the receipts.	<input type="checkbox"/>	<input type="checkbox"/>
26.	Did you make an RRSP repayment to a Home Buyer's Plan? If yes, please provide the total amount. \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
27.	Did you contribute to a PRPP in 2023 or within 60 days of the following year? If yes, please provide the receipts.	<input type="checkbox"/>	<input type="checkbox"/>
28.	Did you open an FHSA account with a Financial Institution in 2023?	<input type="checkbox"/>	<input type="checkbox"/>
	If yes, did you contribute to FHSA in 2023? Yes _____ No _____		

Dependent Expenses

29.	Did you have any childcare expenses (e.g., daycare)? If yes, please provide the receipts.	<input type="checkbox"/>	<input type="checkbox"/>
30.	Did you pay any attendant care expenses? If yes, please provide the receipts.	<input type="checkbox"/>	<input type="checkbox"/>
31.	Did you pay support payments (e.g. Child support or Spousal support)? If yes, please provide the details. Name _____ Amount _____ SIN # _____	<input type="checkbox"/>	<input type="checkbox"/>

32.	Are you or your spouse/partner disabled? Did you make any renovations this year to make your home more accessible? If yes, please provide the receipts.	<input type="checkbox"/>	<input type="checkbox"/>
33.	Did you make any renovations to your home to accommodate a family member who is either disabled or over 65 years of age? If yes, please provide the receipts.	<input type="checkbox"/>	<input type="checkbox"/>
Investment Expenses			
34.	Did you have any partnership losses (for this or any previous year)?	<input type="checkbox"/>	<input type="checkbox"/>
35.	Did you sell any investments at a loss?	<input type="checkbox"/>	<input type="checkbox"/>
36.	Did you pay any resource exploration or development expenses? If yes, please provide the T101 slip.	<input type="checkbox"/>	<input type="checkbox"/>
37.	Did you invest in any companies that have gone bankrupt?	<input type="checkbox"/>	<input type="checkbox"/>
38.	Did you pay for investment accounting (e.g. Brokerage fees)?	<input type="checkbox"/>	<input type="checkbox"/>
39.	Did you pay interest on any loan taken out for investment purposes?	<input type="checkbox"/>	<input type="checkbox"/>
Employment Expenses			
40.	Did you pay any expenses for your employment for which your employer did not reimburse you? If yes, please provide the Form T2200 from your employer.	<input type="checkbox"/>	<input type="checkbox"/>
41.	Are you a long-haul truck driver?	<input type="checkbox"/>	<input type="checkbox"/>
42.	Were you required to move your place of residence for employment or study?	<input type="checkbox"/>	<input type="checkbox"/>
43.	Did you work in the Construction industry and had to relocate temporarily to fulfill a job contract away from home?	<input type="checkbox"/>	<input type="checkbox"/>
Education Expenses			
44.	Did you or your spouse/partner pay education, tuition, or textbook expenses? If yes, please provide Form T2202/TL11.	<input type="checkbox"/>	<input type="checkbox"/>
45.	Did you pay interest on your student loan in the past 5 years?	<input type="checkbox"/>	<input type="checkbox"/>
Legal Expenses			
46.	Did you pay legal fees to enforce payment of alimony or maintenance?	<input type="checkbox"/>	<input type="checkbox"/>
47.	Did you pay legal fees to enforce the payment of wages?	<input type="checkbox"/>	<input type="checkbox"/>
Medical Expenses			
48.	Did you have any medical expenses that were not reimbursed under any Medical Policy? If yes, please provide the receipts.	<input type="checkbox"/>	<input type="checkbox"/>
49.	Did you make payments to a health plan at work or privately (e.g. Blue Cross)? If yes, please provide the receipts.	<input type="checkbox"/>	<input type="checkbox"/>

50.	Did you have any expenses related to fertility treatment or surrogacy?	<input type="checkbox"/>	<input type="checkbox"/>
Charitable Donations			
51.	Did you make any donations to: a) A Registered Charity; or b) A Political Party If yes, please provide the receipts.	<input type="checkbox"/>	<input type="checkbox"/>
Other Deductions			
52.	Did you make any payments to a union or professional organization?	<input type="checkbox"/>	<input type="checkbox"/>
53.	Did you volunteer as a firefighter in 2023?	<input type="checkbox"/>	<input type="checkbox"/>
54.	Did you volunteer for search and rescue in 2023?	<input type="checkbox"/>	<input type="checkbox"/>
55.	Were you a first-time home buyer in 2023?	<input type="checkbox"/>	<input type="checkbox"/>
56.	Did you pay any provincial logging taxes in 2023?	<input type="checkbox"/>	<input type="checkbox"/>
57.	Were you required to repay any Employment Insurance?	<input type="checkbox"/>	<input type="checkbox"/>
58.	Did you repay any Covid-19 benefits?	<input type="checkbox"/>	<input type="checkbox"/>
59.	Did you live in a remote Northern Location and receive travel allowances?	<input type="checkbox"/>	<input type="checkbox"/>
60.	Did you have any adoption expenses?	<input type="checkbox"/>	<input type="checkbox"/>
61.	Did you have any digital news subscription expenses in 2023?	<input type="checkbox"/>	<input type="checkbox"/>
62.	Were you required to purchase your own school supplies as an employed educator for an elementary, secondary school, or a regulated childcare facility?	<input type="checkbox"/>	<input type="checkbox"/>
63.	a) Are you currently set up for Direct Deposit with Canada Revenue Agency?	<input type="checkbox"/>	<input type="checkbox"/>
	b) If you checked YES to a), has your banking information changed?	<input type="checkbox"/>	<input type="checkbox"/>
	c) If you checked NO to a) and YES to b), and you are eligible for a refund, you will need to update or set up Direct Deposit, per CRA's requirements. Please provide us with your banking information or void cheque. Alternatively, you may set this up yourself through CRA online.		

To assist us in filing your return on time, you must provide the information below.

How would you prefer to receive a copy of your completed tax return?

Help us to reduce our carbon footprint on the environment.

PDF (emailed through “e-courier” to the email provided on the checklist)

PRINTED Personal Tax Package (**a \$45 Fee will apply**)

Both

If you selected “PDF,” a copy of your T1 General will be emailed to you through our secure E-Courier server. The file will only be available on our server for 30 days after being sent to you. **Please download and save the file to your computer for future use.**

Please initial below:

_____ I understand that my tax return will not be e-filed to CRA until payment for services is fully received.

_____ I understand that my tax return can only be started once ALL required documents are received, including the 2023 personal tax checklist.

_____ I understand that if I provided original documents to the accountant, I must pick them up as soon as possible. All original tax documents not picked up within 30 days after filing of your taxes, will be couriered to you at your own expense.

PLEASE SAVE YOUR COMPLETED CHECKLIST TO YOUR COMPUTER.

This is a fillable PDF; if it is not saved to your computer, all work will be lost, and you will have to fill out the form again.

Use the following link to send us this sensitive information to protect your information. Do not send any documents containing personal information through regular e-mail. If you need help, please do not hesitate to call us at (403) 274 8814, and someone will be happy to walk you through the process.

Option 1: [Click here](#) to send us an encrypted file or message securely.

Option 2: <https://e-courier.ca/aQ?tu=Yxmu3> paste this link in your web browser to upload documents securely.

Option 3: In-person drop off at our office on 6503 Elbow Drive SW, Calgary, AB T2V 1J7

All personal taxes received before our cut-off date, with invoices paid for in full, will be filed before the CRA deadline. Having a credit card stored on file guarantees that your taxes will still be filed on time.

_____ I acknowledge that if payment for services rendered is not received in full within 15 days of receiving my invoice, my credit card will be charged for the amount due to Concept Professional Group Inc.

Check here if you already provided your credit card details in previous years.
(Please confirm that your credit card details on file are up to date before checking this box)

Name on Card: _____

Billing Address: _____

_____ (city) (province) (postal code)

Phone Number: _____ (business) (mobile)

Visa Card Number: _____ Expiry: _____ CCV: _____

MC Card Number: _____ Expiry: _____ CCV: _____

AMEX Card Number: _____ Expiry: _____ CCV: _____

Signature: _____

Name: _____

Date: _____