



OLAFSON & JONES

Personal Income Tax Information Sheet for Returning Clients

FOR OFFICE USE ONLY: Electronic file: Saved in Client Files/iFirm Client Portal

DATE SUBMITTED: _____

CLIENT NAME(S): _____

HOW MANY RETURNS ARE WE PREPARING?: _____ **TAX YEAR(S):** _____

Primary Family Contact Information

PRIMARY CONTACT NAME: _____ **PHONE NUMBER:** _____

EMAIL: _____

1) Has your primary residence changed in 2025? YES NO

If you answered yes, please provide:

Date of move: _____ Street Address: _____

City: _____ Province: _____ Postal Code: _____

Are you a first-time Home Buyer? YES NO

If you owned previously: Sale price \$ _____ Original Year of purchase: _____

2) Did you receive the Manitoba Homeowners Affordability Tax Credit (HATC) on your 2025 Property Tax bill? YES NO

If you answered no, please provide a copy of your 2025 Property Tax Bill to apply for the HATC on your 2025 Income Tax Return

3) Did you marital status change in 2025? YES NO

If you answered yes, please indicate the date of change: _____ New Martial Status: _____

4) Did you have any children in 2025 or 2026? YES NO

If you answered yes, please provide the date of birth: _____

Full legal name: _____

5) Did you work from home more than 50% of the time in 2025? If yes, please see page 2 YES NO

6) If you are self-employed (NOT incorporated) and registered to file G.S.T, are we preparing a return for you? YES NO

If you answered yes, please provide your access code (if applicable) and business number

Business number: _____ Access code: _____

7) If you are married or common-law and we are NOT PREPARING your partner's return, please complete their information below:

Full legal name: _____ SIN: _____

Date of Birth: _____ Taxable income for 2025: \$ _____

8) At any time in 2025, did you hold foreign property with a value of over \$100,000? YES NO

Includes foreign investments or foreign income producing properties

HOW WOULD YOU LIKE TO RECEIVE THE CLIENT COPY OF YOUR TAX RETURN

I will sign and pick up in person (Paper copy) I will sign via DocuSign and receive an electronic copy



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*Please note that every client must have their own email address to sign via **Docusign**. Kindly provide the email addresses for all clients below *

Client 1 Full Name: _____ Phone Number (optional): _____

Email address: _____

Client 2 Full Name: _____ Phone Number (optional): _____

Email address: _____

Client 3 Full Name: _____ Phone Number (optional): _____

Email address: _____

Client 4 Full Name: _____ Phone Number (optional): _____

Email address: _____

If you worked from home more than 50% of the time in 2025, please provide the following:

Signed T2200 from your employer

Electricity/heat _____

Internet _____

Square footage the office/area used for work purposes _____

Water _____

Total square footage of home _____

Rent _____

Maintenance (specific to the space) _____

If you are a commission employee, please also provide the following annual expenses

Property taxes _____ Home Insurance _____

Notes: _____



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Personal Income Tax Checklist

PERSONAL INCOME SLIPS

Please review the checklist below to ensure all applicable documents are submitted

T4 - All Statement of Income
T4A - Pension, Retirement, annuity and other income
T3 - Statement of Trust Income
T5 - Statement of Investment Income
T4AP - Statement of CPP Benefits
T4A(OAS) - Old Age Security Pension
T5008 - Statement of Securities Transactions
T5013 - Statement of Partnership Income
T5007 - Social Assistance Payment

T4RSP - Statement of RRSP Income
T4RIF - Statement of Income from a Registered Retirement Income Fund
T4E - Statement of Employment Insurance Benefits
T4AP - Statement of CPP Benefits
Any foreign income/pension
Rental Property Income, expenses, purchases & sales
Capital Gain/losses schedule
Other income _____

RECEIPTS & TAX CREDITS

Charitable donations
Child care expenses
Children's fitness programs
Medical expenses
Political contributions
Professional and/or Union dues
Investment Expenses (Interest, Fees, etc.)
Tool expenses (apprentice, mechanics and tradesperson)
Moving expenses must be greater than 40km Please provide all receipts and indicate distance moved and for what purpose
If you are claiming home office indicate: Area used for work purposes _____ Sq ft Total Sq Ft of home _____ Sq Ft

Home Buyer's tax credit
Disability Tax Credit Certificate
Declaration of Conditions of Employment (Form T2200)
Custody Arrangement and Copy of Agreement/Support Payments Documentation
Tuition and Enrolment Certificate (Form T2202/T2202A)
Vehicle/Travel Logbooks and Expenses
If you are a teacher, indicate the amount spent on school supplies in the year \$ _____
Rent * only one person per household can claim
Adoption expenses and receipts
Other _____

Notes: _____

