

# Duffin Martin Tax & Accounting

## T2 or Corporate Tax Return Checklist

### COMPANY INFORMATION [FOR NEW CLIENTS unless information has changed]

<b>Legal name</b>		<b>Year end</b>	
Operating name		Business no.	_____RC0001
Business address		City/Prov.	Postal code
Mailing address (if different)		City/Prov.	Postal code
<b>Contact person</b>		Email	Home phone
Business phone		Business fax	Mobile
<b>Bookkeeper</b>		Email	Business phone
<b>Lawyer</b>		Email	Business phone
<b>Shareholder(s) name</b>	<b>SIN or business no.</b>	<b>Percentage common share</b>	<b>Signing officer</b>
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

### ENGAGEMENT SERVICES

T2 or corporate tax return     
  Financial statements     
  Bookkeeping     
  Personal tax returns

### CORPORATE FILINGS

BC annual report <input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> DM GST returns <input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> DM <input type="checkbox"/> NA PST returns <input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> DM <input type="checkbox"/> NA GST elections <input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> DM <input type="checkbox"/> NA Other elections _____ <input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> DM <input type="checkbox"/> NA	T4 slips and summary <input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> DM <input type="checkbox"/> NA T5 slips and summary <input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> DM <input type="checkbox"/> NA T5018 slips and summary <input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> DM <input type="checkbox"/> NA WCB return(s) <input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> DM <input type="checkbox"/> NA Other _____ <input type="checkbox"/> Filed <input type="checkbox"/> Client <input type="checkbox"/> DM
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### NEW CLIENT

<b>RC59 signed</b> <input type="checkbox"/> Signed <input type="checkbox"/> Pending <b>Engagement letter</b> <input type="checkbox"/> Signed <input type="checkbox"/> Pending Share rights & restrictions docs <input type="checkbox"/> Given <input type="checkbox"/> Pending Central securities register <input type="checkbox"/> Given <input type="checkbox"/> Pending Prior year financial statements <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Prior year corporate tax return <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Prior years' CRA assessments <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Prior year software/bookkeeping <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA	<b>Main product/service</b> <b>If filing directors' tax return:</b> <b>Directors' T1013 signed</b> <input type="checkbox"/> Signed <input type="checkbox"/> Pending <input type="checkbox"/> NA Prior year personal tax returns <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Directors' T1 checklist <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Other _____
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### ANNUAL ENQUIRIES

Audit has been waived <input type="checkbox"/> Yes <input type="checkbox"/> No Change of capital structure <input type="checkbox"/> Yes <input type="checkbox"/> No Change of directors, officers <input type="checkbox"/> Yes <input type="checkbox"/> No	Change of registered address <input type="checkbox"/> Yes <input type="checkbox"/> No Change of major business <input type="checkbox"/> Yes <input type="checkbox"/> No Planned changes? _____
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### YEAR END DOCUMENTS

<b>Accounting software</b> <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Client summary <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Bank statements/ reconciliation <input type="checkbox"/> Given <input type="checkbox"/> Pending Cheque stubs/ deposit books <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Investment statements <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Aged accounts receivable listings <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Doubtful accounts (highlighted) <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Inventory listing <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Property, plant & equipment - Addition: purchase docs <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA - Disposal: sales docs <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Aged accounts payable listings <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Credit card statements <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA	Mortgage statements <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Contract: _____ <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Loan agreements <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Lease documents <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Sales: invoices/ sales register <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Expenses: receipts/ bills <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA Payroll summary or detail <input type="checkbox"/> Given <input type="checkbox"/> Pending <input type="checkbox"/> NA <b>Auto expenses</b> <b>Home office expense</b> <b>Expenses paid by shareholder</b> <b>Corporate instalments</b> <b>Direct deposit application</b> <input type="checkbox"/> Done <input type="checkbox"/> Remind <input type="checkbox"/> Apply
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## Duffin Martin Tax & Accounting T2 or Corporate Tax Return Checklist

<input type="checkbox"/> BUSINESS	<input type="checkbox"/> RENTAL INCOME & EXPENSES
<b>Income</b> [GST incl/ excl?]	<b>Address</b>
<b>Expenses</b> [GST incl/ excl?]	City/Prov.
Purchases	Postal code
Subcontractor or salaries	<b>Income</b> [GST incl/ excl?]
Advertising & promotion	<b>Expenses</b> [GST incl/ excl?]
Meals & entertainment	Advertising
Insurance	Insurance
Interest, bank charges	Mortgage interest, statement
Licences, dues, fees	Office supplies
Office supplies	Professional fees
Professional fees	Administration fees/ salaries
Repair & maintenance	Repairs & maintenance
Travel	Strata
Telephone	Property taxes
Capital asset >\$500 (e.g. computer)	Heat
Capital asset >\$500 (e.g. equipment)	Hydro
Auto expenses	Water
Home office expense	Internet, phone, cable
Other	Auto expenses
<b>Missing</b>	Capital asset >\$500 (e.g. furniture)
	Capital asset >\$500 (e.g. appliances)
	Other
	<b>Missing</b>

<input type="checkbox"/> BUSINESS-USE-OF-HOME	<input type="checkbox"/> AUTOMOBILE EXPENSES
<b>Business or employment use % =</b>	Automobile: Make _____ Model _____ Year _____
Workspace area	<b>Business auto log:</b> _____ busn km <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Remind client
Total home area	Purchase price
Heat	Business use kilometres
Hydro	Total km driven
Insurance	<b>Expenses</b> [GST incl/ excl?]
Repair & maintenance	Fuel
Strata	Insurance
Mortgage interest	License & registration
Property taxes	Repairs & maintenance
Rent	Business parking fees
Water	<input type="checkbox"/> Loan statement, interest
Internet, phone, cable	<input type="checkbox"/> Lease statement
Other	<input type="checkbox"/> Auto purchase document
<b>Missing</b>	<input type="checkbox"/> Auto disposal document
	Other

FOR OFFICE USE		Takeover letter <input type="checkbox"/> Mailed <input type="checkbox"/> NA
Associated companies <sup>1</sup>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> More info	Associated Co
Related companies <sup>2</sup>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> More info	Related Co
<b>ADDITIONAL NOTES</b>		
<b>PRICING</b> <input type="checkbox"/> Quoted \$ _____ <input type="checkbox"/> Based on hours spent & complexity <input type="checkbox"/> Outstanding balance \$ _____		

<sup>1</sup> Associated companies: e.g. director, spouse, parents, siblings, or parents-in-law, own(s) > 50% of Co and ≥ 25% of another Co  
<sup>2</sup> Related companies: e.g. director, spouse, parents, siblings, or parents-in-law, own(s) > 50% of another Co