

Happy 2022 Tax Season!

Please refer to the below for reference on the tax kit forms. If you are a new client or require your Client Number, please call the office at 1-866-448-2188.

1. Please complete the following documents

- 2022 T1-Engagement Agreement
- Information Return for Electronic Filing Form T183 (complete Part A, Part E, and Part F)
- 2022 Personal Tax Checklist
- 2022 T-Slip and Supporting Documents Checklist

2. Please ensure that you send all the required supporting information, including but not limited to:

- Income slips/information from all sources (T4, T5, Income Statement, etc.)
- Medical Expenses included in a summary format or using the spreadsheet provided
- Childcare expenses, Donations, RRSP contributions
- Any other supporting documents for income/expenses to be claimed on your tax return

3. Please include the supporting information for the following, if applicable:

- Employment Expenses - T2200 Declaration of Conditions of Employment
- Rental Income - T776 Statement of Rental Activities in Canada
- Self-employed Income - T2125 Statement of Business Activities
- Investment Income - T5008 Statement of Securities Transactions

Additional tax return schedules including but not limited to the above will have additional preparation fees based on complexity

Our goal is to ensure your taxes are prepared accurately. Misreporting income and expenses on your taxes can be costly. If you're not sure about what to claim, contact our team for assistance at 1-866-448-2188.

If you require additional copies of any documents, please visit us at www.taxwise.ca/forms.

We look forward to preparing your tax return(s).

Best Regards,

TaxWise Inc.
www.taxwise.ca
1-866-448-2188



2022 T-1 Engagement Agreement

The responsibility of the Taxpayer is as follows:

To provide TaxWise Inc. with complete and accurate information necessary for your tax filing as required under the Income Tax Act; Include all relevant slips and receipts; Report all sources of income.

The responsibility of TaxWise Inc. in the preparation of 2022 T-1 Income Tax Returns is as follows:

TaxWise Inc. will not audit, review, or verify the accuracy or completeness of the information provided by the taxpayer. TaxWise Inc. is limited to preparing the return(s) based on the information provided by the taxpayer, and does not assume responsibility for missing information if it has not been provided at the time of filing.

I agree to the above terms and requirements.

_____	_____	_____
Tax payer #1 Print Name	Sign	Date (DD/MM/YYYY)
_____	_____	_____
Tax payer #2 Print Name	Sign	Date (DD/MM/YYYY)
_____	_____	_____
Tax payer #3 Print Name	Sign	Date (DD/MM/YYYY)
_____	_____	_____
Tax payer #4 Print Name	Sign	Date (DD/MM/YYYY)

Fees* & Payment Options:

Please check appropriate boxes (All fees quoted include applicable taxes)

- 1 Personal T1 Income Tax and Benefit Return \$175 total
- 2 Personal T1 Income Tax and Benefit Returns \$300 total
- 3 Personal T1 Income Tax and Benefit Returns \$400 total
- 4 or more, please add \$100 for each additional tax return (Example: 4 returns = \$500.00)

- I have enclosed a cheque placing my Client Number on the "Memo" Line
- I have paid using online banking, using TaxWise or TaxWise Inc. as payee and Client ID for Account
- I prefer to pay by phone (call 1 866 448 2188)
- I prefer to pay by credit card (MasterCard VISA)
 - Name (as it appears on card) _____
 - Card #: _____
 - Expiry: ___ / ___ Card Security Number: _____

* Returns including (but not limited to) matters involving foreign earnings, T2200/T777 forms, T776 forms, or T5008 forms, prices may be subject to change depending on the scope of work. Additional costs will be charged for any pre-assessment or post-assessment reviews requested by the Canada Revenue Agency.

TaxWise reserves the right to refuse service upon its own discretion.



Information Return for Electronic Filing of an Individual's Income Tax and Benefit Return

Tax year: _____

The information on this form relates to the tax year shown in the top right corner. Before you fill out this form, read the information and instructions on **page 2**. The individual identified in **Part A** (or the individual's legal representative) must sign **Part F**. Your electronic filer must fill out **Part C** and **Part D** before submitting your return. Give the signed original of this form to your electronic filer and keep a copy for yourself.

Part A – Identification and address as shown on your tax return (mandatory)

First name	Last name			Social insurance number			
Mailing address: Apt number – Street number - Street name			PO Box	RR	City	Prov./Terr	Postal code

Get your CRA mail electronically delivered in My Account (optional)

Email Address: _____

By giving an email address, I am registering to receive email notifications from the CRA and agreeing to the terms of use on **page 2**.

Part B – Declaration of amounts from your Income Tax and Benefit Return (mandatory)

Enter the following amounts from your return, if applicable:

Total income (line 15000)	_____	Refund (line 48400)	_____
Taxable income (line 26000)	_____	or	
Total federal non-refundable tax credits (line 35000)	_____	Balance owing (line 48500)	_____

Part C – Electronic filer identification (mandatory)

By signing **Part F** below, I declare that the following person or firm is electronically filing the new or the amended Income Tax and Benefit Return of the person named in **Part A**. **Part F must be signed** before the return is electronically transmitted.

Name of person or firm: TaxWise Inc. Electronic filer number: 16314

Representative identifier (Rep ID): _____

Part D – Document Control number (mandatory)

The document control number generated for my electronic record: _____

Part E – How do you want to receive your notices of assessment and reassessment? (select one or more of the following electronic options)

I am registering (as indicated in **Part A** above) or I am already registered to receive email notifications from the CRA and can view and access my notices of assessment and reassessment online.

I would like my electronic filer to receive a one time notice of assessment and reassessment electronically in their software and provide me with a copy. I understand that by ticking (✓) this box, I am allowing the CRA to electronically provide my assessment results and my notices of assessment and reassessment to the electronic filer (including a discounter) named in **Part C**. I will now receive a copy of my notices of assessment and reassessment from my electronic filer. For more information, see the Express NOA section on **page 2**.

OR

I would like to receive paper notices of assessment and reassessment through Canada Post. I will receive my notices of assessment and reassessment through Canada Post once my return or amended return has been assessed. If I have already registered to receive email notifications from the CRA and I tick this box, I understand that I will **not** receive a copy of my notice through Canada Post.

Part F – Declaration and authorization (mandatory)

I declare that the information entered in parts **A**, **B** and **C** is correct and complete and fully discloses my income from all sources. I also declare that I have read the information on **page 2**, and that the electronic filer identified in **Part C** is filing my return. I allow this electronic filer to communicate with the CRA to correct any errors or omissions.

_____ Signature (individual identified in Part A or legal representative)	_____ Name and title of legal representative						
	<table border="1"> <tr> <td>Year</td> <td>Month</td> <td>Day</td> <td>HH</td> <td>MM</td> <td>SS</td> </tr> </table>	Year	Month	Day	HH	MM	SS
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Part A – Identification and address as shown on your tax return (mandatory)

First name	Last name			Social insurance number			
Mailing address: Apt number – Street number - Street name			PO Box	RR	City	Prov./Terr	Postal code

Get your CRA mail electronically delivered in My Account (optional)

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Signature (individual identified in **Part A** or legal representative)

Name and title of legal representative

Year	Month	Day	HH	MM	SS				



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Mailing address: Apt number – Street number - Street name			PO Box	RR	City	Prov./Terr	Postal code

Get your CRA mail electronically delivered in My Account (optional)

Email Address: _____

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Signature (individual identified in **Part A** or legal representative)

Name and title of legal representative

Year	Month	Day	HH	MM	SS				

2022 Personal Tax Checklist

Personal Information	Tax Payer #1	Tax Payer #2
Last Name, First Name		
Date of Birth (MM / DD / YYYY)		
Email Address		
Phone Number		
Home Address		
***if changed in 2022, as of Dec 31st, 2022		
Marital Status as of Dec 31, 2022		
***if changed in 2022, date of change		

Dependent Family Information	Tax Payer #1	Tax Payer #2
Last Name, First Name (dependent 1)		
Relationship to Tax Payer		
Address (if different from TaxPayer)		
Approved for Disability Tax Credit		
Last Name, First Name (dependent 2)		
Relationship to Tax Payer		
Address (if different from TaxPayer)		
Approved for Disability Tax Credit		
**Use back for additional dependents		

Information Checklist (indicate with "x")	Tax Payer #1	Tax Payer #2
Spousal Support Payments (paid or received)		
Child Support Payments (paid or received)		
Child Care Expenses		
Medical Expenses		
Medical Travel (over 40km per trip)		
Tuition Fees		
Student Loan Interest		
RRSP Contributions		
Charitable Donations		
Political Donations		
Staycation Expenses (Ontario)		
Home Accessibility Expenses (65+ or DTC)		
First Time Home Buyer		
Approved for Disability Tax Credit		
Volunteer Firefighter		
Search and Rescue Volunteer		
Rent Paid in Ontario		
Property Tax Paid in Ontario		
Sale of Principal Residence		
Sale of Taxable Property		
Canadian Citizen		
Provide Info to Elections Canada		
Own Foreign Property		

2022 Personal Tax Checklist

Personal Information	Tax Payer #3	Tax Payer #4
Last Name, First Name		
Date of Birth (MM / DD / YYYY)		
Email Address		
Phone Number		
Home Address		
***if changed in 2022, as of Dec 31st, 2022		
Marital Status as of Dec 31, 2022		
***if changed in 2022, date of change		

Dependent Family Information	Tax Payer #3	Tax Payer #4
Last Name, First Name (dependent 1)		
Relationship to Tax Payer		
Address (if different from TaxPayer)		
Approved for Disability Tax Credit		
Last Name, First Name (dependent 2)		
Relationship to Tax Payer		
Address (if different from TaxPayer)		
Approved for Disability Tax Credit		
**Use back for additional dependents		

Information Checklist (indicate with "x")	Tax Payer #3	Tax Payer #4
Spousal Support Payments (paid or received)		
Child Support Payments (paid or received)		
Child Care Expenses		
Medical Expenses		
Medical Travel (over 40km per trip)		
Tuition Fees		
Student Loan Interest		
RRSP Contributions		
Charitable Donations		
Political Donations		
Staycation Expenses (Ontario)		
Home Accessibility Expenses (65+ or DTC)		
First Time Home Buyer		
Approved for Disability Tax Credit		
Volunteer Firefighter		
Search and Rescue Volunteer		
Rent Paid in Ontario		
Property Tax Paid in Ontario		
Sale of Principal Residence		
Sale of Taxable Property		
Canadian Citizen		
Provide Info to Elections Canada		
Own Foreign Property		

Type of Slip or Supporting Document	No. of slips
T4 Statement of remuneration paid	
T4A Statement of Pension, Retirement, Annuity, and Other Income	
T4A(OAS) Statement of Old Age Security	
T4A(P) Statement of Canada Pension Benefits	
T4E Statement of Employment Insurance and Other Benefits	
T4RIF Statement of Income from a Registered Retirement Income Fund	
T4RSP Statement of RRSP Income	
T5 Statement of Investment Income	
T5007 Statement of Benefits	
T5008 Statement of Securities Transactions	
T5013 Statement of Partnership Income	
T5018 Statement of Contract Payments	
T3 Statement of Trust Income Allocations and Designations	
T2125 Statement of Business Activities (Summary sheet)	
T776 Statement of Real Estate Rentals (Summary sheet)	
T2202 Tuition Enrolment Certificate	
RRSP Contribution Receipt	
Other T-Slip or Supporting Document (please specify:)	
Other T-Slip or Supporting Document (please specify:)	
Other T-Slip or Supporting Document (please specify:)	
Other T-Slip or Supporting Document (please specify:)	
Other T-Slip or Supporting Document (please specify:)	

