

NF Accounting Group
Income Tax and Benefit Return
T1 GENERAL 20.....

Complete all the sections that apply to you in order to benefit from amounts to which you are entitled.

First Name:

Last Name

Social Insurance Number

Date of Birth

Marital Status **Married** **Living common-law** **Widowed**
 Divorced. **Separated.** **Single**

Address

Province

Postal Code

Telephone

Spouse's First Name:

Spouse's Last Name

Spouse's SIN Number

Spouse's Date of Birth

Enter his or her net income for 2008 to claim certain credits .\$.

Are you a Canadian citizen? YES NO

As a Canadian citizen, do you authorize the Canada Revenue Agency to give your name, address, date of birth, and citizenship to Elections Canada for the National Register of Electors

YES NO

Did you own or hold foreign property at any time in 2007 with a total cost of more than CAN \$100,000?

YES NO

<p>I certify that the information given on this return and in any documents attached is correct, complete and fully disclose all my income.</p> <p>Sign here-----/-----/----- Date-----/-----/-----</p> <p style="text-align: right; font-size: small;">Date/ Month/ Year</p>	
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Income Tax and Benefit Return (Moving Expenses)

Your new home must be at least 40 kilometres closer to the new place of work or educational institution. If it is less than 40 kilometres, you cannot deduct your moving expenses. Therefore, do not complete the rest of this form.

Address of your old residence / Postal code

.....
.....

Address of your New residence / Postal code

.....
.....

Date you started your new job or business, or your studies

.....

What was the main reason for the move?

To be employed Carry on a business To study full time

Name of employer, business, or educational institution after the move

.....
.....

Name of mover:

.....

Date of Move:

.....

Number of nights

.....

Number of household members in move

.....

Method of travel

.....

Number of kilometres

.....

Accommodation

\$

Meals

\$

Number of days

.....

Number of nights

.....

Number of days

.....

Cost of cancelling the lease for your old residence

\$

Selling price \$

\$

Real estate commission

\$

Legal or notarial fees

\$

Advertising

\$

Other selling costs (specify)

\$

Purchase price

\$

Legal or notarial fees

\$

Taxes paid for the registration or transfer of title (do not include GST/HST or property taxes)

\$

Travel costs (other than accommodation and meals)

\$

Costs to maintain your old residence when vacant (maximum \$5,000)

\$

(please specify):

Enter any reimbursement or allowance that is not included in your income, and

that you received for moving expenses that you claimed \$

STATEMENT OF REAL ESTATE RENTALS

Was this the final year of your rental operation? Yes No

Name and address of Property / Postal Code

.....
.....
.....

Your Percentage of Ownership %.....
1- Co-owner or partner's Name: %.....
2- Co-owner or partner's Name: %.....
3- Co-owner or partner's Name: %.....
4- Co-owner or partner's Name: %.....

Partnership filer identification number

Tax shelter identification number

RENTAL For the period from:
..... TO

Number of units Gross rents

Enter the total of your gross rents \$ _____

Expenses Paid for this Real State Rental

Insurance \$
Interest \$
Maintenance and repairs \$
Management and administration fees \$
Motor vehicle expenses (not - capital cost allowance) \$
Property taxes \$
Salaries, wages, (including employer's contributions) \$
Utilities \$
Travel \$
Office expenses \$
Legal, accounting, and other professional fees \$
Other expenses \$
Advertising \$
Expenses \$

STATEMENT OF PPROFESSIONAL ACTIVITY

Was this the final year of your rental operation? Yes No

Name of Business:

Address / Postal Code

Main Product Service:

Tax or Bsiness Number.

Your Percentage of Ownership %.....

1- Co-owner or partner's Name: %.....

SIN#

2- Co-owner or partner's Name: %.....

SIN#

"Business Activity " For the period from:

TO

Enter the total of your gross income:

\$

Amount of GST which is included into your income

If you have GST Number

\$

Expenses Paid for Business

Advertising

Business tax, fees, licences, dues, memberships, and subscriptions \$

Fuel costs (except for motor vehicles) \$

Insurance \$

Interest & Bad Debits \$

Maintenance and repairs \$

Meals and entertainment (allowable part only) \$

Management and administration fees \$

Delivery, freight, and express \$

Office expenses \$

Legal, accounting, and other professional fees \$

Property taxes \$

Rent \$

Salaries, wages, and (including employer's contributions) \$

Telephone and utilities \$

Travel (Travel, and allowable portion of meals) \$

Supplies \$

Capital Gains (or Losses)

Publicly traded shares, mutual fund units, deferral of eligible small business corporation shares, and other shares

(Report capital gains (or losses) shown on T5, T5013, T5013A, T4PS, and T3 information slips)

Name of corp. and class of shares

Address or legal description Prov./Terr.

Real estate, depreciable property, and other properties

Personal-use property (full description)

Number Name of fund/corp. and class of shares

Eligible small business corporation shares, and other shares.)

Bonds, debentures, promissory notes, and other similar properties

Other mortgage foreclosures and conditional sales repossessions

Date of acquisition (Purchase)

Proceeds of Disposition (The amount that you have received for this property)

\$.....

Adjusted cost base (the amount that you have paid for this property + any Improvement)

\$.....

Outlays and expenses (any expenses to sale the property)

\$.....

Date of acquisition (Purchase)

Proceeds of Disposition (The amount that you have received for this property)

\$.....

Adjusted cost base (the amount that you have paid for this property + any Improvement)

\$.....

Outlays and expenses (any expenses to sale the property)

\$.....

Statement of Investment Income

You have income from:

- Taxable amount of eligible dividends (specify):

Name of Account:

\$

- Taxable amount of dividends (eligible and other than eligible) from taxable Canadian corporations

Name of Account:

\$

- Interest and other investment income

Name of Account:

\$

- Income from foreign sources:

Name of Account:

\$

- Net partnership income (loss)

Name of Account:

\$

You have expenses for your investment

- Carrying charges (specify):

Name of Account:

\$

- Interest expenses (specify):

Name of Account:

\$

STATEMENT OF EMPLOYMENT EXPENSES

Expenses

Accounting and legal fees	\$
Allowable motor vehicle expenses	\$
Advertising and promotion	\$
Food, beverages, and entertainment expenses	x 50% = \$
Supplies (postage, stationery, office supplies)	\$
Other expenses (please specify)	\$
Parking	\$
Lodging	\$
Tradesperson's tools expenses	\$
Subtotal	\$
Apprentice mechanic tools expenses	\$
Musical instrument expenses	\$
Capital cost allowance for musical instruments	\$
Artists' employment expenses	\$

Calculation of allowable motor vehicle expenses

Enter the kilometres you drove in the tax year to earn employment income	\$
Enter the total kilometres you drove in the tax year	\$
Enter the motor vehicle expenses you paid for	\$
Fuel (gasoline, propane, oil)	\$
Maintenance and repairs	\$
Licence and registration	\$
Capital cost allowance	\$
Interest ("Interest expense")	\$
Leasing	\$
Insurance	\$
Other expenses (please specify)	\$

Enter the total of all rebates, motor vehicle allowances, and repayments for motor vehicle expenses you received that are not included in income. Do not include any repayments you

\$

Calculation of work-space-in-the-home expenses

Area of home used for work sopcode
Electricity, heat, and water	\$
Maintenance	\$
Insurance (commission employees only)	\$
Property taxes (commission employees only)	\$
Other expenses (please specify)	\$