

Personal Information for 2024

Full Name:	
Full Name of Spouse / Common Law Partner (if applicable):	
Names (and relationships) of other family members UHY Forbes Andersen will be preparing tax returns for (if applicable):	
Are you the main family contact for our tax preparer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other	If other, please explain:
Phone (Day):	Phone (Evening):
Your primary address:	
Your Spouse primary address (if different):	
Email:	
Occupation:	Occupation (Spouse):
Work address:	Work address:
SIN:	SIN (Spouse):
SSN:	SSN (Spouse):
DOB:	DOB (Spouse):

Check <input type="checkbox"/> if YES	Check the box <input type="checkbox"/> if it applied in 2024 to you OR your partner/spouse. <i>If YES, please send us the supporting information indicated in blue.</i>
	Did you get married, entered into a common-law relationship, separated or divorced in 2024. <i>Provide name, date of marriage, SIN, SSN (if applicable) date of birth of your spouse or common-law partner. OR provide the date of separation or divorce.</i>
	Had or adopted a new child/children in 2024. <i>Provide the name(s), date(s) of birth, and social insurance number(s) and social security number(s) (if available) of any children.</i>

U.S. Checklist

Check <input type="checkbox"/> if YES	Check the box <input type="checkbox"/> if it applied in 2024 to you OR your partner/spouse. <i>If YES, please send us the supporting information indicated in blue.</i>
	Did your status in the United States change during the year (Visa / Green Card / Citizen)?
	Did you receive health care coverage with a government Marketplace during the year? <i>Please provide Form 1095-A or 1095-B</i>
	Did you make any estimated tax payments to the IRS or any States for the year? <i>Please provide payment dates and amounts in USD.</i>
	Did you receive a state tax refund for the tax year? <i>Please provide Form 1099-G</i>
	Did you pay any mortgage interest during the year? <i>Please provide Form 1098.</i>
	Did you pay any property tax during the year? <i>Please provide amounts in USD.</i>

	<p>Do you have a U.S. Health Savings Account (HAS) for the year?</p> <p><i>Please provide Form 5498-SA and Form 1099-SA.</i></p>
	<p>At any point in the year did you own Non-US Mutual Funds, Exchange Traded Funds or REITs outside of your RRSP?</p> <p><i>Please provide any monthly statements for your RESP, TFSA, RDSP.</i></p>
	<p>Did you have foreign trusts (non-US trusts) during the year?</p>
	<p>Did you or your spouse own shares or options to buy shares in a non-US private corporation?</p> <p><i>If you own 10% or more, please provide information.</i></p>
	<p>Did you or your spouse own shares of a non-US, non-publicly traded partnership?</p> <p><i>Please provide the name of the partnership(s) and your percentage of ownership in each.</i></p>
	<p>Did you make any gifts to anyone in excess of \$19,000 or in excess of \$190,000 to a non-US/non-resident spouse during the year?</p>
	<p>If you live in Canada, did you or your spouse spend any time in the United States?</p> <p><i>Please provide specific dates.</i></p>
	<p>Do you rent your home in Canada?</p>
	<p>Did you own your home in Canada?</p>
	<p>Cryptocurrency holdings/investments or transactions/transfers to cash and vice versa.</p> <p><i>Please provide transaction statements.</i></p>
	<p>Did you have any non-US bank, investment, retirement accounts or insurance policies with a cash value in the year?</p> <p><i>If yes, did the total value of accounts combined exceeded USD\$10,000 in the year, please fill out and provide our FBAR worksheet.</i></p>

WORKSHEET 1

FBAR REPORTING INFORMATION

PLEASE COMPLETE IF THE TOTAL VALUE OF ACCOUNTS COMBINED EXCEEDED \$10,000 IN THE YEAR.

Account Owner	Account Type	Account No.	Institution	Address of Institution	2024 Highest Balance Reached	Currency	If joint indicate other joint owner's name

If your non-US accounts did not exceed the threshold, please indicate with your initials below.

Taxpayer: The aggregate value of my non-US accounts did not exceed \$10,000 in the year. _____

Spouse: The aggregate value of my non-US accounts did not exceed \$10,000 in the year. _____