

US Client/Family Information

Welcome to H&R Block! Please fill out the following form. Provide as much detail as possible. If you have any questions while completing this form, please do not hesitate to ask.

Client Information:

First Name:		Initial:	Last Name:			
Social Insurance Number (SIN):		Date of birth:	d d /	m m / y y y	y Fe	male Male
APT / Unit #Address:					PO Box:	
Rural Route: City:			Province:Postal Code:			
Cell:						
Phone:						
Marital Status on December 31 last year		mmon-law	Widowed	Divorced	Separa	ated Single
Spouse or Common-law partne						_ 3
		la ikiali	Look Nove o			
First Name:	initial.	Last Name: dd / mm / yyyy Female Male				
Social Insurance Number (SIN):						Titale Wate
Cell:					Disabled	Student
Will we be preparing the return for your	spouse/partner? Yes Yes	No Net Income:	\$		- Disabled	Student
Dependents* : (if applicable) Child						
Last Name	First Name	Date of Birth	Net Income	Relationship	Disabled	Post-Secondary:
		dd/mm/yyyy			Yes	Student
		dd/mm/yyyy			Yes	Student
		dd/mm/yyyy			Yes	Student
		dd/mm/yyyy			Yes	Student
		dd/mm/yyyy			Yes	Student
*Require Dependant's SIN during Tax In	nterview	1			See rev	erse for additional space
a) Citizanshin (by hirth bloodling of	or naturalization)				Canada	U. S. Other
1. Sy distribute (Sy smart) streaming of material actions,					Canada [U. S. Neither
					Canada	U. S. Other
2. Do you have an incorporated business?						Yes No
3. Do you need to complete an Estate Return or file for a deceased person ?						Yes No
4. Are you self-employed, did you own your own business or did you work for a placement agency?						Yes No
5. Are you currently in Bankruptcy status?						Yes No
6. Did you work outside Canada or have foreign employment or foreign pension income?						Yes No
7. Excluding RRSPs, do you have any investments, own any rental properties or sell your principal residence last year?						Yes No
8. Are you claiming employment expenses (did your employer reimburse you for office or vehicle expenses)?						Yes No
9. Did you move to Canada last year or switch provinces?						Yes No
10. Are we preparing more than one return for you today?						Yes No
Do you have a preferred Tax Professiona	al? (Please provide name)					
Any other information:						

Client/Family Information Continued Dependents*: (if applicable) Children, parents, grandparents, etc. - living at the same address First Name Net Income Relationship Disabled Post-Secondary: 7 Yes Student Student ☐ Yes Student Yes Student Yes Student Yes dd/mm/yyyy Yes Student Student Yes Student Yes dd/mm/yyyy Student Student *Require Dependant's SIN during Tax Interview **Canadian Residency Determination U.S. Residency Determination** Yes No Yes No Will we complete an America return? Will we be filing your Canadian return? Yes □No Social Security (SSN/ITIN): Is this your first time filing a Canadian return? Last year you filed a U.S. Return filed: Date you entered Canada dd/mm Yes No Were you on a U.S. Visa? Canadian income since return to Canada: \$ Visa number: VISA type: \$ Non-Canadian income since return to Canada: Valid: dd/mm/yy dd/mm/yy Yes ∃ No Did you included worldwide income last year? to: Yes No Entry: dd/mm/vU.S. Departure: Did you completely sever your ties with Canada? dd/mm/y Your Spouse: Date you servered Canada Social Security (SSN/ITIN): Non-Canadian income since serving ties: \$ Yes Will your filing status be Married Filing Jointly? Residential Ties: (please select all that apply) □ U. S. Yes Canada Other ΠoN Dwelling Place/Residence Is your spouse an American Citizen? Primary Πо Canada U. S. Other Yes Do your spouse hold a Green Card? Spouse Canada U. S. Other Yes No Was your spouse on a U.S. Visa? Dependants Canada U. S. Visa number: VISA type: Other Citizenship Canada U.S. Other Valid: dd/mm/vv to: Permanent Resident Status Canada U. S. Other dd/mm/yy dd/mm Entry: U.S. Departure: Medical & Health Coverage Canada U. S. Other Yes No Are your children a US citizen(s)? Passport Canada U. S. Other Please provide the ITIN or SSN for each child. Drivers Licence (From Personal Property Canada U.S. Other SSN ☐ ITIN 1. Second Drivers Licence (Canada U. S. Other SSN ☐ ITIN Furniture/Appliances Canada SSN ☐ ITIN U. S. Other 3. Clothing Canada U. S. SSN ☐ ITIN Other 4. Vehicle (Automobile) Canada □ U. S. Other SSN ITIN Financial and legal document Canada U. S. Other **Foreign Bank Account Report Recreational Memberships** Canada □ U. S. Other Do you have any non-US Bank Checking account? Yes No **Religious Organizations** Canada U. S. Other Yes No Do you have any non-US Bank Savings account? Political memberships Canada U. S. Other Yes No Do you have any non-US Bank Investments? Registered to vote Canada □ U. S. Other No Yes Do these accounts contain Mutual Funds? Active Employment/Business Canada U. S. Other Yes No **Union/Professional Members** Do you have any RRSPs? Other Canada U. S. No Yes Do you have any Registered Pension Plan? **Bank Accounts** Canada □ U. S. Other No Yes Do you have any Tax Free Savings Accounts? **Retirement Accounts** Canada U. S. Other Do you have any RESPs or Mutual Funds? Yes No **Credit Cards** Canada U. S. Other Do any of these accounts contain (at any point in the year) an aggregate Seasonal Dwelling Canada total of at least \$10,000? U. S. Other Yes Real Property Canada U. S. Other Yes No Did you use or hold any virtual currency? Investments (Shares, Rental)