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Final and Trust Return Checklist

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Name of Deceased:			
Deceased's Social Insurance Number (SIN):			
Deceased's Date of Birth:			
Dece	ased 3 Date of Birth.		
Decea	ased's Date of Death:		
Execu	utor/Administrator Name:		
Care o	of Address:	Postal Code:	
Phone	e Number: Email Addres	s:	
	List of assets & liabilities at Date of Death Copy of the Death Certificate Copy of the Will Copy of Grant of Probate Copy of last year's tax return (if new client) All Slips (T4, T4A, T5, T3, T4RSP, etc.) GIC's (Principal interest rate, payment date, etc.) Death Benefits issued from CPP (T4AP) *trust return is done if the Medical Receipts, Disability Tax Credit (if applicable) Donation Receipts Monthly bank statements (if there are investments/portfolio/		
	Rental Income and Expenses Self-employed Income and Expenses Partnership Income and Expenses Foreign Property over \$100,000 Spouse's Tax Return (if we are not preparing a return for the Sunused Donation Credit Balances Copy of the 1994 Tax Return Including Notice of Assessment of		ed

Filling Deadline

Date Final Return is Due:

April 30 of the following year if deceased January - October 31

made an election in 1994 to increase the tax cost of capital property owned at that time)

• 6 months after death if deceased November - December 31

Date Trust Return is Due:

• 90 days after trust year end date