

Client Intake Form - Trust Taxes

Personal Information		ID Copy: Yes / No		
	Full Name	SIN	Date of Birth (MM/DD/YYYY)	M/F/N
Trustee				
Beneficiary 1				
Beneficiary 2				
Beneficiary 3				

CRA Trust Account Number: _____

Address (including city, province, postal code) _____

Phones (cell, home, work) _____

Emails _____

Copies of Permanent Records (Admin File)

Records Trust deed and resolutions Prior year's trust tax return T3
 Copy of the final will and testament Prior year notices of assessment
 Certificate of appointment of trustee Accounting records (TB / ledgers)

All Income Sources and Deductions

Has the trust provided all income reporting slips (T4A / T3 / T5, etc)? Yes No
 Are there any investment properties to consider? Yes No
 Has the trust issued T3 slips to any beneficiaries? Yes No

New Client Acceptance Checklist (FOR OFFICE USE ONLY)

Have we made initial assessment to move forward with further screening? Yes / No / N/A
 Has client integrity and reputation / image been considered? Yes / No / N/A
 Have we considered the need to contact prior accountants? Yes / No / N/A
 Has the client's business acumen been considered? Yes / No / N/A
 Do we have internal competence to perform engagement? Yes / No / N/A
 Do we have internal resources to complete and deliver work on time? Yes / No / N/A
 Are there any significant threats to independence? Yes / No / N/A
 Is our firm free of any conflicts of interest with the client? Yes / No / N/A
 Are there any issues to the collection of professional fees? Yes / No / N/A
 Decision made to accept or decline client: Accept / Decline