

# U.S./Canadian Interview Sheet

Completing the U.S./Canadian Interview Sheet will help H&R Block match you with one of our 200+ dedicated U.S. Tax Professionals. If you're unsure how to answer any of the below, our U.S. Tax Professional will discuss with you in more detail during your interview.

## Taxpayer information

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_ SSN: \_\_\_\_\_

## U.S. Determination

Are you an American Citizen? .....  Yes  No

Do you hold a Green Card? .....  Yes  No

Were you on a U.S. Work Visa? .....  Yes  No

Visa number: \_\_\_\_\_ Dates valid from: \_\_\_\_\_ to: \_\_\_\_\_

Date entered the U.S.: \_\_\_\_\_ Date left the U.S.: \_\_\_\_\_

Have you filed a U.S. return before? .....  Yes  No Last year filed: \_\_\_\_\_

Do you have any RRSPs? .....  Yes  No

Do you have any Tax Free Savings Accounts? .....  Yes  No

Do you have any RESPs or Mutual Funds? .....  Yes  No

Do you have any non-US bank/investment accounts that at any point in the year had an aggregate total of at least \$10,000 (Even if the total may have only been achieved for one day) .....  Yes  No

Is your spouse a US citizen? .....  Yes  No ITIN# \_\_\_\_\_ Social Security# \_\_\_\_\_

Is your child a US citizen? .....  Yes  No ITIN# \_\_\_\_\_ Social Security# \_\_\_\_\_

Please provide the ITIN or Social Security number for each child.

ITIN# \_\_\_\_\_ Social Security# \_\_\_\_\_

ITIN# \_\_\_\_\_ Social Security# \_\_\_\_\_

ITIN# \_\_\_\_\_ Social Security# \_\_\_\_\_

ITIN# \_\_\_\_\_ Social Security# \_\_\_\_\_

## Canadian Determination

Are you working in Canada? .....  Yes  No

Canadian income since return to Canada: \_\_\_\_\_

Did you maintain a residence in Canada? .....  Yes  No

Did you maintain bank accounts in Canada? .....  Yes  No

Did you completely sever your ties with Canada?.....  Yes  No

Is this your first time filing a Canadian return? .....  Yes  No

Have you claimed worldwide income on your Canadian return? .....  Yes  No

Will we complete a Canadian return? .....  Yes  No If yes, what location? \_\_\_\_\_

\_\_\_\_\_  
Name of receiver

Year      Month      Day  
|\_| |\_| |\_|    |\_| |\_|    |\_| |\_|  
Date received

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.

**Once your tax return is ready, the Tax Professional will contact you to set up an appointment to finalize your tax return.**

**Client Information:**

First Name: \_\_\_\_\_ Initial: \_\_\_\_\_ Last Name : \_\_\_\_\_

Social Insurance Number (SIN): \_\_\_\_\_ Date of birth: dd / mm / yyyy

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Preferred contact method:  Phone  Email Preferred method to review tax return:  In person  By phone

Phone : \_\_\_\_\_ Alternate phone number: \_\_\_\_\_

Best time to call: \_\_\_\_\_ Email: \_\_\_\_\_

Marital Status on December 31 last year:  Single  Married  Common-law  Widowed  Separated  Divorced

**Spouse or Common-law partner information:** (if applicable)

Last Name	First Name	Date of Birth	Net Income	Post-secondary Student	Disabled
		<u>dd/mm/yyyy</u>		<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no

**Dependents\*:** (if applicable) Children, parents, grandparents, etc - living at the same address

Last Name	First Name	Date of Birth	Net Income	Relationship	Post-secondary Student	Disabled
		<u>dd/mm/yyyy</u>				
		<u>dd/mm/yyyy</u>				
		<u>dd/mm/yyyy</u>				
		<u>dd/mm/yyyy</u>				

\*Require Dependent's SIN during Tax Interview

See reverse for additional space

1. a) Are you a U.S. Citizen by birth or bloodline? b) Do you meet the Green Card Test (Lawful Permanent Resident of U.S.)?  
 c) Were you PHYSICALLY PRESENT in U.S. at least 183 days during current year?  
 (check Yes if any of the questions above are true) YES  NO
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 Professional? (Please provide name) \_\_\_\_\_

Any other information: \_\_\_\_\_

# Easy Drop-Off *continued* \_\_\_\_\_

**Dependents\*:** (if applicable) Children, parents, grandparents, etc - living at the same address

Last Name	First Name	Date of Birth	Net Income	Relationship	Post-secondary Student	Disabled
		dd/mm/yyyy				
		dd/mm/yyyy				
		dd/mm/yyyy				
		dd/mm/yyyy				
		dd/mm/yyyy				
		dd/mm/yyyy				
		dd/mm/yyyy				
		dd/mm/yyyy				

\*Require Dependent's SIN during Tax Interview

Do Not Email