

# Corporate Tax Return - Client Information Form



Corporate Name

Contact Name

Date of Birth YYYY/MM/DD

Social Insurance Number (SIN)

Date of Incorporation

Corporate Year End Date

Description of your business

Copy of Certificate of Incorporation included?

Estimated Annual Income

Yes

No

Current Business Address

Phone Number

E-mail

Share Structure Information:

Name

Number of Shares

Per Cent of Shares & Value

SIN

Does your corp. or any shareholders of your corp. own shares in another corp.?

Yes

No

If yes, provide more detailed information.

CRA Business Number (BN)

Provincial Corporate Number

Province of Incorporation

Is the Corp. Registered for GST?

Yes

No

Is this your first corp. tax return?

If no, please provide previous tax return.

Yes

No

Is this a final corp. tax return?

If yes, would you like to close your corp.?

Yes

Yes

No

No

How did you hear about Stanley Accounting?

Signature

Title

Date