

1. What is your full name?

FIRST NAME \_\_\_\_\_

LAST NAME \_\_\_\_\_

2. If you are completing this survey as part of a couple, please provide their full name as well.

FIRST NAME \_\_\_\_\_

LAST NAME \_\_\_\_\_

3. Would you like to sign your tax documents electronically?

☐ YES

☐ NO

4. What is your email address?

EMAIL \_\_\_\_\_

5. If this survey is being completed on behalf of a couple, please include your partner's email address.

EMAIL \_\_\_\_\_

6. What is your telephone number?

COUNTRY CODE \_\_\_\_\_

PHONE NUMBER +1 \_\_\_\_\_

EXT. \_\_\_\_\_

7. What is your current residential address?

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ PROVINCE \_\_\_\_\_

COUNTRY \_\_\_\_\_

8. Did your residential address change in 2024?

☐ YES

☐ NO

9. Do you authorize the Canada Revenue Agency to give your name, address, date of birth, and citizenship to Elections Canada to update the National Register of Electors?

☐ YES

☐ NO

10. If you live in Ontario, do you authorize the CRA to share your name and email address to Ontario Health for the purpose of being contacted by email about organ and tissue donation?

☐ YES

☐ NO

☐ N/A

11. If you currently receive paper copies of your Notice of Assessment, are you interested in receiving your Notice of Assessment electronically only?

Note: This would require you to register for "My Account" with CRA.

☐ YES

☐ NO

12. If yes to the previous question, please provide the email address you would like CRA to use here:

EMAIL \_\_\_\_\_

13. Are you a Canadian resident for tax purposes?

☐ YES

☐ NO

14. Did you or your spouse or common-law partner add a child (children) to your family in 2024?

☐ YES

☐ NO

15. Do you have any children or dependents under the age of 18 in 2024?

☐ YES

☐ NO

16. Are you providing care for someone who meets any of the following descriptions?

☐ Spouse

☐ Your parent, grandparent, aunt, uncle, niece, or nephew

☐ Your child, grandchild, brother or sister under 18 years of age

☐ Your child, grandchild, brother, or sister 18 years of age or over with an impairment in physical or mental functions

☐ N/A

17. For Nova Scotia residents, have you paid fees towards sports or arts activities for children under the age of 19?

☐ YES

☐ NO

☐ N/A

18. Did you own specified foreign property at any time in 2024 with a total cost of more than CAN\$100,000?

☐ YES

☐ NO

19. Did you earn income from a payer in the United States in 2024 or any other foreign country?

☐ YES

☐ NO

