U.S. Non-Resident Personal Tax Return Checklist

Personal Information



To help you assemble your financial information for the preparation of your U.S. Non-Resident Personal Tax Return, please keep this checklist handy. This checklist should be completed and returned to us, together with the financial information assembled.

Tersorial information					
Your Name:		SSN/ITIN:			
Date of Birth: / (MM/DD/YY)		SSN/ITIN: Country of Citizenship:			
		Your Phone #:			
Address:					
Apt #: City:		Email:			
State: Zip Code: P.O	. Box #:	Occupation:			
Marital Status: Single Married	Common-Law	Separated	Divorced	Widowed	
Spouse Information (If Applicable)					
Spouse Name:		SSN/ITIN:			
Date of Birth:/(MM/DD/YY)					
General Information					
Have you ever applied for a U.S. visa?:		Yes	No	N/A	
If <i>applicable</i> , please provide the follow	ing details below.				
If you had a visa on the last day of	the tax year, enter ye	our visa type. If you did no	t have a visa, enter	your U.S.	
immigration status on the last day of	of the tax year:				
Have you ever changed your visa t	ype (non-immigrant s	status) or U.S. immigration	status?	Yes No	
If " <u>yes</u> ", indicate the date and	d nature of the chang	ge:			
Have you ever applied for a Green Card?:		Yes	No	N/A	

Number of days spent in U.S. in 2	2022: days	Number of days spent in U.S.	in 2023:	days	
Number of days spent in U.S. in	2024: days				
Number of days spent in 0.5. in	2024uays				
List all the dates you entered and	l left the United States during 202	4 below:			
Date entered United States (MM/DD/YY)			Date departed United States (MM/DD/YY)		
			/		
			/	/	
			/		
Did you receive a compensati	on of more than \$250,000 in 2024	?: Yes	No	N/A	
Did you receive any other U.S. income in 2024?:		Yes	No	N/A	
Have you ever filed a U.S. Tax Return?:		Yes	No	N/A	
Did you file a U.S. income tax return for any prior year?:		Yes	No	N/A	
If " <u>yes</u> ", give the latest yea	ar and form number you filed:			_	
Please specify the type of inc	ome received in 2024:			_	
Rental Property					
Includes the Statement of Adju	stments for purchase	Total rental income	\$		
Please indicate if you are the sole owner of the property or if you have a co-owner:		Expenses (Total Annual Am Advertising	-		
I'm the sole owner I have a co-owner		Insurance \$ Mortgage Interest \$			
If you have a co-owner, please provide their details below: Name:		Office expenses\$\$ Legal, accounting & other professional fees \$			
SSN #: owned:%		Management & administration fees \$			
		Repairs and maintenance			
Date Rental Started (MM/DD/YY):/		Salaries, wages & benefits			

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City: _____ Province/State: ____

Postal Code: _____ Country: ____

Date of Purchase (MM/DD/YY): ____/___

Address:



Property taxes\$______

Utilities\$_____

Other: _____ \$____

_____ \$___ _____\$__

Travel\$

Major renovations & purchases (i.e. appliances):







Other Important Matters				
Do you want your tax refund (if any) depo	osited directly to you	r bank account?:	Yes	No
If " <u>yes</u> ", please provide th	e following details of	a U.S. bank account.		
1. Routing #:				
2. Account #:				
3. Account Type:	Saving	Chequing		
Notes				

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