



Date: ___/___/___
DD/MM/YYYY

Address: _____

Name: _____

It will soon be time to prepare your _____ tax return. Providing complete and accurate information will allow us to prepare your tax return timely and efficiently. With this in mind, we have attached a checklist and questionnaire to assist you gathering the required items.

Your STATEMENT OF BUSINESS OR PROFESSIONAL ACTIVITIES

Please enter applicable amounts below and note any questions.

Business Name: _____

Business Address: _____

Fiscal Period From: ___/___/___ To: ___/___/___
DD / MM / YYYY DD / MM / YYYY

Main product or service: _____

Business number #: _____ RT _____

Was this your last year of business?: ___Y/N

How many Internet web pages does your business earn income from? _____

List below the site address (URL addresses) of your main web pages:

Percentage of your gross income generated from the above web pages? _____%

Business Income



\$ _____ . _____ Gross sales, commissions, or fees (include GST/HST collected or collectable)

_____ . _____ GST/HST (included in gross sales, commissions, or fees above)

Cost of goods sold

_____ . _____ Purchases during the year (net of returns, allowances, and discounts)
(goods for resale, products used for specific clients.)

_____ . _____ Direct wage costs

_____ Y/N Have T4's been competed?

_____ . _____ Subcontracts

_____ Y/N Have T4A's been competed?

_____ . _____ Other cost of goods sold

Expenses

_____ . _____ Advertising and Promotion (business cards, samples, flyers, awards, media)

_____ . _____ Food, beverages, meals & entertainment (Enter full amount - 100%)
(Document client name and business reason on receipt)
(Include sporting events, concert & theatre. Exclude golf green fees)

_____ . _____ Bad debts

_____ . _____ Business Insurance / WSIB / Professional liability insurance.
(Exclude life and disability insurance.)

_____ . _____ Interest (Bank charges, line of credit, credit card charges)

_____ . _____ Business tax, fees, licenses, dues, memberships and subscriptions

_____ . _____ Office expenses

_____ . _____ Supplies - office & computer (used for all clients, general purpose use)

_____ . _____ Accounting, legal and other professional fees

_____ . _____ Management and administration fees

_____ . _____ Office Rent (premises outside the home only)

_____ . _____ Maintenance and repairs (on business premise or equipment)

_____ . _____ Salaries, wages and benefits (including employer's contributions)



_____ Y/N Have T4's been competed?

_____ . _____ Property taxes (premises outside the home only)

_____ . _____ Travel (including hotel, accommodations, airline, bus, train, taxi)

_____ . _____ Telephone and utilities

_____ . _____ **Record ONLY utilities for premises outside the home** (Electricity, Hydro & water-heater rental, city water, heat-Enbridge gas, propane, firewood, city water)
(See business-use-of-home section below for home utilities.)

_____ . _____ **Record** business portion of telephone, internet, long distance, cellular

_____ . _____ Fuel costs (except for motor vehicles - for heavy equipment or fleet vehicles)

_____ . _____ Delivery, freight and express courier

Motor vehicles

_____ Motor Vehicle - Make

_____ Motor Vehicle - Model

_____ YYYY Motor Vehicle - Year

___/___/___ DD/MM/YYYY Motor Vehicle - Date acquired (provide purchase agreement)

_____ Km Motor Vehicle - Total Km driven in tax year

_____ Km Motor Vehicle - Business Use Km
(For each business trip, keep a log listing the following: date, destination, purpose, number of kilometres.)

_____ Km Motor Vehicle - Personal Use Km

_____ . _____ Parking & tolls (407), excluding parking/speeding tickets

_____ . _____ Motor Vehicle - Employer reimbursements for personal vehicle use

_____ . _____ Motor Vehicle - Fuel

_____ . _____ Motor Vehicle - Maintenance & repairs, (oil changes, car washes)

_____ . _____ Motor Vehicle - Insurance / Roadside Assistance

_____ . _____ Motor Vehicle - License & Registration

_____ . _____ Motor Vehicle - Interest on vehicle loan (provide loan agreement)

_____ . _____ Motor Vehicle - Leasing costs (provide lease agreement)

Other expenses



- _____ . _____ Small tools / equipment < \$500
- _____ . _____ Training costs, professional development
- _____ . _____ Equipment Rental / Leases
- _____ . _____ Other expenses, specify
- _____ . _____ Other expenses, specify
- _____ . _____ Other expenses, specify

Business-use-of-home expenses

- _____ Area of home used for employment (sq. ft. or # rooms)
- _____ Total area of home (sq. ft. or # rooms)
- _____ . _____ Heat (Enbridge gas, propane, firewood)
- _____ . _____ Electricity (Hydro, water heater rental)
- _____ . _____ Insurance (including mortgage insurance)
- _____ . _____ Maintenance (to maintain soundness of dwelling, not home improvement)
- _____ . _____ Mortgage interest (exclude the principle repayments)
- _____ . _____ Property taxes
- _____ . _____ Other, specify (incl. alarm monitoring)



Assets Purchased > \$500 (useful life beyond one year)

_____._____ Computers
_____._____ Office Furniture & Equipment
_____._____ Equipment
_____._____ Signage
_____._____ Other: _____

Signature: _____

Date: _____

Signing date DD / MM / YYYY

Please return completed form to:
Debbie Sitzer Professional Corporation, 9 - 250 Bayview Drive, Barrie, ON L4N 4Y8
Alternatively, scan and e-mail it to debbie@debbiesitzer.com