

**Business and Professional Activities**

**Name of business:** \_\_\_\_\_

**Business number:** \_\_\_\_\_

**HST Information** (please circle below)

Are you registered for HST? yes no  
If yes: are you registered for the Quick Method? yes no  
do you file annually or quarterly? annually quarterly  
have you paid any HST instalments during the year? no yes - amount paid \$ \_\_\_\_\_ see detail below

If you are not registered for HST, your costs should include HST, if applicable.  
If you are a "regular" HST registrant, your income should not include the HST and your expenses should not include the HST (please let us know if they do include HST).  
If you are an HST registrant using the QUICK METHOD, your expenses should include the HST.

Please detail any additions or dispositions of capital property during the year.

|       | Cost | HST | Total |
|-------|------|-----|-------|
| _____ |      |     | -     |
| _____ |      |     | -     |
| _____ |      |     | -     |

**HST Instalments**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Internet Business Activities**

If your webpages or websites generate business or professional income, fill in this part of the form.  
How many Internet webpages and websites does your business earn income from? Enter "0" if none. \_\_\_\_\_  
Provide up to five main webpage or website addresses, also known as uniform resource locator (URL):  
http:// \_\_\_\_\_ http:// \_\_\_\_\_ http:// \_\_\_\_\_  
http:// \_\_\_\_\_ http:// \_\_\_\_\_  
Percentage of your gross income generated from the webpages and websites. (If no income was generated from the Internet, enter "0".) \_\_\_\_\_ %

Income

Sales, Commissions, or Fees  
Other income

\_\_\_\_\_  
\_\_\_\_\_

HST

Collected

\_\_\_\_\_  
\_\_\_\_\_

Cost of Goods Sold

Opening Inventory (raw materials, goods in process, finished goods)  
Add: Purchases (net of returns, allowances, and discounts)  
Add: Subcontracts  
Less: Closing Inventory  
Total Cost of Goods Sold

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

Expenses

Advertising  
Bad Debts  
Business tax, fees, licenses, dues, memberships, and subscriptions  
Delivery, freight, and express  
Fuel costs (except for motor vehicles)  
Insurance  
Interest  
Maintenance and repairs  
Meals and entertainment \_\_\_\_\_ x 50%  
Motor vehicle expenses (see worksheet)  
Office expenses  
Supplies  
Legal, accounting, and other professional fees  
Private Health Service Plan Premiums  
Property taxes  
Rent  
Salaries, wages, and benefits (including employer's contributions)  
Travel  
Telephone and utilities  
Total Expenses

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

Net Income

\$ \_\_\_\_\_

*Please let us  
know if  
your numbers  
include or  
exclude HST*

**HST Input Tax Credits (HST paid)**

\_\_\_\_\_

**Business Use of Home**

|                                |       |                         |       |  |
|--------------------------------|-------|-------------------------|-------|--|
| Area of home used for business | _____ | OR # rooms for business | _____ | <i>If you moved during the year, please provide us with home expenses for both residences.</i> |
| Total area of home             | _____ | Total # rooms           | _____ |  |

  

|                   |       |  |
|-------------------|-------|--|
| Heat              | _____ | } <b>Please list 100% of the costs and we will prorate them accordingly.</b> |
| Electricity       | _____ |  |
| Insurance         | _____ |  |
| Internet          | _____ |  |
| Maintenance       | _____ |  |
| Mortgage Interest | _____ |  |
| Property Taxes    | _____ |  |
| Telephone         | _____ |  |
| Water             | _____ |  |
| Rent/Condo Fees   | _____ |  |

**Motor Vehicle Expenses**

|                              | Auto #1 | Auto #2 |
|------------------------------|---------|---------|
| Description of vehicle       | _____   | _____   |
| Period of year used          | _____   | _____   |
| Purchased or leased?         | _____   | _____   |
| Date purchased or leased     | _____   | _____   |
| Details - lease amount + HST | _____   | _____   |
| - deposit on leased vehicle  | _____   | _____   |
| - cost of purchased vehicle  | _____   | _____   |
| - any trade in               | _____   | _____   |

|                        |       |
|------------------------|-------|
| <b>Mileage</b>         |       |
| Odometer at beginning  | _____ |
| Odometer at end        | _____ |
| Total KMs travelled    | _____ |
| Business KMs travelled | _____ |

|                               |       |  |         |
|-------------------------------|-------|--|---------|
| Fuel (gasoline, propane, oil) | _____ | } <b>Please list 100% of the costs and we will prorate them accordingly.</b> | } _____ |
| Maintenance and repairs       | _____ |  |         |
| Insurance                     | _____ |  |         |
| Interest on loan              | _____ |  |         |
| License and registration      | _____ |  |         |
| CAA                           | _____ |  |         |
| Tolls/407 ETR                 | _____ |  |         |
| Parking                       | _____ |  |         |

**Please provide purchase/leasing/financing agreements and any other documentation relating to acquisitions and dispositions of motor vehicles.**