



Self-employed Income Checklist

Your full name: _____

SIN: _____

Business name: _____

Business number _____

Business address _____

Period from: 2024/____/____(YYYY/MM/DD)

To: 2024/____/____(YYYY/MM/DD)

What was your business main product or service? _____

Your percentage of the partnership: _____

Was 2024 your last year of business?

Yes

No

How much income did you earn from your self-employment (including GST/HST):

\$ _____

How much GST/HST did you collect:

\$ _____

Expenses: (Enter amounts including HST)

Advertising:

\$ _____

Meals and entertainment:

\$ _____

Insurance:

\$ _____

Interest and bank charges:

\$ _____

License and membership:

\$ _____

Office expenses:

\$ _____

Office stationery and supplies:

\$ _____

Professional fees (includes legal and accounting fees):

\$ _____

Management and administration fees:

\$ _____

Rent(if the business rented office):

\$ _____

Repairs and maintenance (related o office):

\$ _____

Salaries, wages and benefits:

\$ _____

Property taxes:

\$ _____

Travel expenses:

\$ _____

Utilities(related to office):

\$ _____

Delivery, freight and express:

\$ _____





Vehicle expenses (Total amounts in 2024, including both personal and business portions):

Enter the kilometers you drove in the tax year for running this business _____ Km

Enter the total kilometers you drove in the tax year (Personal+Business use) _____ Km

Fuel and oil: \$ _____

Vehicle insurance: \$ _____

Licensing and registrations: \$ _____

Maintenance and repairs: \$ _____

Other vehicle expenses:

If you have financed your car, fill part A, If you have leased fill part B:

Part A (Financed Car): *Please also send us the paperwork**

Available interest in vehicle for 2024 \$ _____

Purchase date of vehicle _____ (YYYY/MM/DD)

Date interest payment From _____ (YYYY/MM/DD) To _____ (YYYY/MM/DD)

Part B (Leased Car): *Please also send us the paperwork**

Lease start date: _____ (YYYY/MM/DD) lease end date: _____ (YYYY/MM/DD)

Total lease charges incurred in your current fiscal period: \$ _____

Total lease payment deducted on your previous year's tax return: \$ _____

Total number of days the vehicle was leased in your current and previous fiscal period \$ _____

Manufacturer's list price: \$ _____

Home Office Information:

How many hours a week have you worked from home for running this business? _____

What percentage of your home area did you use for your home office? % _____

What type of space do you work from at home? Designated work space (room) Common (shared) space

Heat: \$ _____ Electricity: \$ _____ Water: \$ _____ Rent: \$ _____

Internet: \$ _____ Home insurance: \$ _____ Maintenance: \$ _____

Mortgage interest: \$ _____ Property Taxes: \$ _____ Other Expenses: \$ _____





If you have any asset (e.g. car, electronic devices, ...) used for your business, please list them with the price and date of purchasing:

The details of other expenses that you paid for your business in this fiscal year:

*** If you purchased/leased your car please send us the paperwork.

*** If the business is Uber/Lyft or other kind of rideshare please send us the year-end report. You should be able to download it from your app.

