

Self Employment Information Organizer

It is important to complete the following
form clearly, accurately and in detail.

TAXplan - Self Employment Information Organizer

For tax year _____

Identification

| | |
|----------------------------------|-------|
| Name | _____ |
| Business Name | _____ |
| Business Address | _____ |
| Business Tel. # | _____ |
| Business Description | _____ |
| Percentage Ownership | _____ |
| Home Telephone | _____ |
| Email | _____ |
| Business website (if applicable) | _____ |
| Business website (if applicable) | _____ |

Other Owners

DETAILS OF OTHER OWNERS (if applicable)

| | |
|----------------------|-------|
| Name Of Other Owner | _____ |
| Ownership Percentage | _____ |
| SIN | _____ |
| Name Of Other Owner | _____ |
| Ownership Percentage | _____ |
| SIN | _____ |



Fiscal Period

Is this your first year of business?

Yes No

If yes, please provide start date:

Is this your final year of business?

Yes No

If yes, please provide end date:

Business Info

Is the income for your business derived from sales, commissions or professional fees?

Sales Commissions Fees

Does your business charge HST?

Yes No

If yes to above question please provide HST #

Is your business based out of your home or principal residence?

Yes No

Business Income / Sales

Total income or Sales (incl. HST if applicable)

HST collected (if applicable)

Net Income or Sales



Business Expenses

| ITEM | GROSS | HST | NET |
|---|-------|-----|-----|
| Advertising | | | |
| Bank Fees & Charges | | | |
| Licenses | | | |
| Dues | | | |
| Memberships | | | |
| Subscriptions | | | |
| Insurance (other than automobile) | | | |
| Interest on money borrowed to finance operations | | | |
| Maintenance & Repairs (other than home or auto) | | | |
| Meals & Entertainment (total cost) | | | |
| Office Expenses | | | |
| Supplies | | | |
| Legal/Accounting or other Professional Fees | | | |



Business Expenses

| ITEM | GROSS | HST | NET |
|--|-------|-----|-----|
| Property Taxes (other than home) | | | |
| Rent (other than home) | | | |
| Subcontractor Fees | | | |
| Employee Salaries or Wages (incl. employer contributions) | | | |
| Travel or Transportation (other than your automobile) | | | |
| | | | |
| | | | |
| | | | |



Capital Purchases

Did you purchase any equipment during the taxation year that will be of use to you for more than one year?
(For example: computer, printer, office furniture, etc.)

Yes No

| DESCRIPTION | DATE PURCHASED | GROSS | HST | NET |
|-------------|----------------|-------|-----|-----|
| | | | | |
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Did you sell any equipment during the taxation year that you had previously been claiming capital cost allowance for?
(For example: computer, printer, office furniture, etc.)

Yes No

| DESCRIPTION | SALE PRICE |
|-------------|------------|
| | |
| | |
| | |
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Automobile Related Expenses

Please complete the following if you use your own automobile in the course of your business activities.
(Please fill in all details)

| | |
|--|-------|
| Make, model & year of your vehicle | _____ |
| Is vehicle owned, leased or financed? | _____ |
| If owned, purchase date & price | _____ |
| If leased, lease start date | _____ |
| If leased, lease end date | _____ |
| If financed, purchase date & price | _____ |
| Total kms driven in taxation year | _____ |
| Kms driven for business purposes | _____ |
| If car was sold what was the sale price? | _____ |



Automobile Expenses

| ITEM | GROSS | HST | NET |
|--|-------|-----|-----|
| Fuel | | | |
| Repairs & Maintenance | | | |
| Lease Payments for Taxation Year | | | |
| Auto Insurance | | | |
| License & Registration | | | |
| Interest expense on money borrowed to purchase the vehicle | | | |
| Car Washes | | | |
| Parking | | | |
| | | | |
| | | | |
| | | | |
| | | | |



Home Office Related Expenses

Note: When calculating the percentage of your home used for business purposes use either a square footage ratio or the number of rooms you use divided by the total number of rooms in the home. In either case, eliminate common areas such as hallways and bathrooms.

Please complete the following if you use a part of your home in the course of your business activities.

What percentage of your home do you use for business?

| ITEM | GROSS | HST | NET |
|-------------------|-------|-----|-----|
| Heat | | | |
| Electricity | | | |
| Insurance | | | |
| Maintenance | | | |
| Mortgage Interest | | | |
| Property Taxes | | | |
| Telephone | | | |
| Internet | | | |
| | | | |
| | | | |
| | | | |
| | | | |



Other Noteworthy Information

Other Noteworthy Information (please specify):

Signature

*I hereby acknowledge that the above information is accurate and complete.

Date

Disclaimer

By submitting this form you agree to the following terms: Although every effort is made to reduce your tax payable by uncovering all available credits and deductions, TAXplan cannot be held responsible if something is missed. Your input and questions are both welcome and necessary to prepare the best possible tax return for you.

