



110 - 20 Circle Drive
 St Albert, AB T8N 7L4
 Phone: 780-458-8720
 Fax: 780-460-2167

YEAR _____

SELF EMPLOYED WITHOUT GST NUMBER

Name of Business: _____

Main Product or Service: _____

REVENUE

GROSS INCOME

INVENTORY

Self Employment Income _____

Inventory beginning of Year _____

Self Emp Income From T4A's _____

Inventory end of Year _____

BUSINESS EXPENSES

TOTAL EXPENSE

Purchases (Goods for Resale) _____

Subcontracts _____

Advertising _____

Full Costs of Meals (including tips) & Entertainment _____

Bad Debts _____

Business Insurance _____

Bank/Credit Card Interest & Service Charges _____

Business Tax, Fees, Licences, Dues _____

Office Expenses _____

Supplies _____

Legal, accounting and other professional fees _____

Management and Administration Fees _____

Commercial Rent _____

Maintenance and Repairs (except motor vehicle) _____

Salaries, wages and benefits & Employer Portion _____

Property Taxes _____

Travel - (airfare/hotel/taxi) _____

Telephone/Cell & Utilities _____

Fuel Cost (except for motor vehicles) _____

Delivery/Freight _____

TOTAL EXPENSES

YEAR _____

EQUIPMENT ON HAND ONLY IF FIRST YEAR OF BUSINESS (Fair Market Value)

Computer _____ Value
 Office Furniture _____ Value
 Vehicle _____ Value

EQUIPMENT PURCHASED DURING THE YEAR (More Than \$500)

ASSET	TOTAL COST
_____	_____
_____	_____
_____	_____

AUTO EXPENSES

Fair Market Value if First Year of Business _____
 Year and Type of Vehicle _____

Business Kilometers _____
 Total Kilometers _____

EXPENSE	TOTAL EXPENSE
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Gas & Oil	_____
Interest on Car Loan	_____
Insurance (no GST)	_____
Licence & Registration	_____
Maintenance & Repairs	_____
Year's Lease Payment	_____
Car Washes	_____
AMA	_____
Parking	_____

If a New Vehicle was purchased, please provide:

1. The purchase price including GST _____ and,
2. Details regarding disposal of previous vehicle:

Trade-in allowance? \$ _____	Reverted to personal use? _____
Sold privately? \$ _____	

If 1st year of lease, please provide:

Length of the Lease _____	Date of First Payment _____
Downpayment, if any _____	Payment Amount _____
Retail Price of Auto _____	

BUSINESS USE OF HOME EXPENSES

Total Square Footage of Office _____	Property Taxes _____
Total Square Footage of Home _____	Water/Sewer _____
Heat _____	Rent _____
Power _____	Telephone _____
Insurance _____	Condo Fees _____
General Repairs/Maintenance _____	Internet _____
Mortgage Interest _____	