SCHEDULE OF BUSINESS INCOME AND EXPENSES FOR PERSONAL TAX RETURN

| Your name | | | | | | 2017 |
|--|--------------------|-------------|----------|---------------|---------|------|
| Business name (if different from your name) | | | | | | |
| Business address (if different from your home) | | | | | | |
| Business number (if any) | • . | | G18.1 // | ٠, ٢١ ، | | |
| Business partners (list, if any) | Name | 2 | SIN# | % of business | Address | |
| | rtner 1 rtner 2 | | | | | |
| | rtner 3 | | | | | |
| Pd | rulei 5 | | | | | |
| Are you registered for HST? | Yes | HST number: | | | | |
| , | | | | | | |
| Income : | (not including | HST) | | | | |
| Sales | | | | | | |
| Commission | | | | | | |
| Professional | | | | | | |
| HET is to stood | | | | | | |
| HST you invoiced | | | | | | |
| Cost of goods sold: | Is HST included | d? □Yes | | | | |
| Inventory at January 1 (if we did not prepare your T1 last year) | | | | | | |
| Inventory at December 31 | | | | | | |
| Purchases | | | | | | |
| Direct labour | | | | | | |
| subcontracting | | | | | | |
| | | | | | | |
| Expenses: | Is HST included | d? □Yes | | | | |
| Advertising | | | | | | |
| Meals and entertainment | | | | | | |
| Insurance | | | | | | |
| Interest and bank charges | | | | | | |
| Business tax, fees, licenses, dues, memberships | | | | | | |
| Office Supplies | | | | | | |
| Supplies Legal fees | | | | | | |
| Accounting fees | | | | | | |
| Management fees | | | | | | |
| Rent | | | | | | |
| Repairs and maintenance | | | | | | |
| Employee wages and benefits | | | | | | |
| Travel | | | | | | |
| Telephone and internet | | | | | | |
| Conventions | | | | | | |
| | | | | | | |

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| Business assets purchased during year: Vehicle Computer Office equipment incl. monitor, printer, phone, etc. Other (describe) Other (describe) Other (describe) | attach invoice copy if over \$5,000 |
|--|-------------------------------------|
| Business assets sold during the year: Vehicle Computer Office equipment incl. monitor, printer, phone, etc. Other (describe) Other (describe) Other (describe) | attach invoice copy if over \$5,000 |
| Business use of vehicle: Total KMs driven in year Business KMs driven in year | |
| Fuel Insurance License Repairs and maintenance Leasing (attach copy of lease if not provided in prior year) Parking 407ETR | |
| Business use of home: Total square footage of home Business use square footage | |
| Gas Electricity Water/garbage Insurance Repairs and maintenance Mortgage interest Property taxes Alarm fees Home phone (if not included in expenses) | |

Home internet (if not included in expenses)

2017