

QUESTIONNAIRE FOR SELF-EMPLOYED WORKERS

(TO BE COMPLETED TO THE BEST OF YOUR KNOWLEDGE, A TECHNICIAN WILL CONTACT YOU IF NECESSARY)

Identification

Relevant tax year: Your _____

full name: _____

Company name (if GST-TVQ registered): Sector _____

of activity: _____

Property type: Sole owner

REVENUES

Enter the income shown in box 28 of your T4A slip Enter the income _____ \$

shown in box 20 of your T4A slip Enter the income shown in box 48 of _____ \$

your T4A slip Enter the remainder of your sales that is not shown on any _____ \$

other tax slip **TOTAL ANNUAL SALES** _____ \$

_____ \$

DIRECT EXPENSES

| | | | |
|--|-------|----|---------|
| Advertising | _____ | \$ | |
| Meals and entertainment expenses (with clients or suppliers only) | _____ | \$ | |
| Professional insurance | _____ | \$ | |
| Total interest and bank charges (specify the portion for business purposes) | _____ | \$ | _____ % |
| Professional dues and permits | _____ | \$ | |
| Accounting costs (we will add our costs for you) Legal and professional fees | _____ | \$ | |
| Supplies | _____ | \$ | |
| Postage and courier costs | _____ | \$ | |
| Commercial rent (home office section below) | _____ | \$ | |
| Business taxes | _____ | \$ | |
| Salaries and subcontracting | _____ | \$ | |
| Travel costs (accommodation and transport) | _____ | \$ | |
| Cell phone total costs (specify the portion for business purposes) | _____ | \$ | _____ % |
| Internet total costs (specify the portion for business purposes) | _____ | \$ | _____ % |
| Other: specify) : | | | |
| _____ | _____ | \$ | _____ % |
| _____ | _____ | \$ | _____ % |
| _____ | _____ | \$ | _____ % |

VEHICLE COSTS

Percentage of vehicle use for business purposes: _____%

(Ex.: 9,000 km / 20,000 km = 45% for business)

Vehicle make and model _____

If purchased in 2021, enter the purchase price before taxes: \$ _____

Otherwise, enter the market value of the vehicle (approx): \$ _____

If it is a leased vehicle, provide the manufacturer's suggested retail price (approx): \$ _____

Enter the total amounts paid in the year

| | | | |
|---|---|-------|----|
| Fuel costs | : | _____ | \$ |
| Insurance | : | _____ | \$ |
| Maintenance and repair | : | _____ | \$ |
| Registration and license | : | _____ | \$ |
| If car loan: enter the interest paid (not the monthly payments) | : | _____ | \$ |
| or Rental fees | : | _____ | \$ |

HOME OFFICE

Percentage of home use for business purposes: _____%

(Ex.: 1 piece / 4.5 = 22.2%)

Enter the total amounts, even if the expenses are shared between spouse or roommate.

| | | | |
|-------------------------|---|-------|----|
| Heating and electricity | : | _____ | \$ |
| Home insurance | : | _____ | \$ |
| If owner | | | |
| Mortgage interest | : | _____ | \$ |
| Condo fees | : | _____ | \$ |
| Municipal taxes | : | _____ | \$ |
| School taxes | : | _____ | \$ |
| If tenant | | | |
| Annual rent | : | _____ | \$ |

* If you submit this form, you do not have NOT to attach your receipts and invoice

COMMENTS: