



Aries Accounting
 877 Anders Road
 West Kelowna, BC V1Z 1K2 Phone: 250-454-9483

Self-Employment Personal Tax Checklist 2015

Name: _____ SIN: _____

Business Name: _____ Start date of business: (If new this year) _____

Business Address: _____

City: _____ Postal Code: _____

Phone Number: _____ Email: _____

Main Product or Service: _____ Website: _____

Sole Proprietorship Partnership

Partners Information

First Name	Last Name	SIN	Partnership
_____	_____	_____	_____ %
_____	_____	_____	_____ %
_____	_____	_____	_____ %

GST Registered? YES NO

Business Number: _____ RT _____

Have you previously filed a GST return for the 2015 year? YES NO

Sales

Sales \$ _____ Does this figure include GST? YES NO

Web Based Income? _____ %

Assets (Over \$200 – ex. New Computer, Auto, etc. – Please provide original receipts or invoices)

Item Purchased	Date Purchased (yyyy/mm/dd)	Value
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

Home Office

Square footage of entire house _____ sq. ft.

Square footage of room used for office (including areas used for business storage) _____ sq. ft.

Home Office Expenses (Please provide original receipts or invoices)

<input type="checkbox"/>	Heat	\$
<input type="checkbox"/>	Electricity	\$
<input type="checkbox"/>	House/Apartment Insurance	\$
<input type="checkbox"/>	Repairs & Maintenance	\$
<input type="checkbox"/>	Mortgage Interest	\$
<input type="checkbox"/>	Property Tax	\$
<input type="checkbox"/>	Rent	\$
<input type="checkbox"/>	Internet	\$
<input type="checkbox"/>	Water and Sewer	\$
<input type="checkbox"/>	Other (Please Specify):	\$

Vehicle Checklist (Auto log is required. If a new vehicle was leased, purchased or sold in the year, please provide all documents)

Kilometers driven in 2015 _____ Personal Use Percentage _____ %

Vehicle Make _____ Vehicle Year _____

<input type="checkbox"/>	Vehicle Maintenance and Repairs	\$
<input type="checkbox"/>	Vehicle Fuel	\$
<input type="checkbox"/>	Vehicle Loan Interest (please provide loan agreement)	\$
<input type="checkbox"/>	Vehicle Lease Payments (please provide lease agreement)	\$
<input type="checkbox"/>	Vehicle Insurance	\$

Additional Information

- 2015 Income Statement or working papers (Excel or Accounting Software Backups)
- _____
- _____
- _____