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Interview Form Business Tax Return

Tax Year: 20 _____

Reporting Start Date: _____ Reporting End Date: _____

Section 1 - Business Information:

Business Name: _____ Business Number (BN): _____

Industry Code: _____ Fiscal Year-End: _____

Address: _____ City: _____ Province: _____ Postal Code: _____

Email: _____ Mobile: _____ Time to Call: _____

Location of Books & Records (if different from above): _____

Legal Structure: Sole proprietorship Partnership Corporation

CRA Account Type: GST/HST Payroll Import/Export Corporate Tax

I am filing a nil return (all fields are \$0)

Section 2 - Business Ownership & Officers:

Primary Owner/Officer Name: _____ SIN (if applicable): _____

Date of Birth: _____ Percentage of Ownership: _____

Other Owners/Shareholders (if applicable):

Full Name: _____ % Ownership: _____

Full Name: _____ % Ownership: _____

Full Name: _____ % Ownership: _____

Shareholder Loans: Yes No (If yes, provide details)

Section 3 - Income and Revenue:

Sources of Income (check all that apply): Sales Revenue Rental Income Service Revenue

Investment Income Foreign Income Other: _____

Title	\$ Total Amount	Description
Total Sales/Revenue		

GST/HST Registered? No Yes: GST/HST Number: _____

Total GST/HST Collected: \$ _____ Total GST/HST Paid on Expenses: \$ _____



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Section 4 - Business Expenses & Deductions:

Please provide total amounts for the following categories, including supporting documentation where available:

Title	\$ Total Amount	Description
Advertising and marketing		
Business Insurance		
Depreciation on Capital Assets		
Interest (e.g., business loan interest)		
Legal and professional fees		
Office expenses and supplies		
Rent (business premises)		
Repairs and maintenance		
Salaries and wages (including owner's salary)		
Travel & Meals expenses (business-related)		
Utilities (e.g., electricity, phone, internet)		

Payroll & Contractor Payments:

Number of Employees: _____ T4 Slips Issued to Employees? Yes No

Total Salaries Paid: \$ _____ Total Employer CPP/EI Contributions: \$ _____

Total Bonuses Paid: \$ _____ Contractor Payments (T4A Required?): \$ _____

Home Office Expenses (If applicable, Business Use %: ____%):

Rent/Mortgage Interest: \$ _____ Property Tax: \$ _____

Utilities: \$ _____ Internet: \$ _____ Maintenance: \$ _____

Vehicle Expenses (Business Use %: ____%):

Fuel: \$ _____ Maintenance: \$ _____ Insurance: \$ _____ Lease Payments: \$ _____

Kilometers Driven for Business: _____ km

Section 5: Investments, Capital Assets, & Other Financials

New Equipment or Property Purchased? No Yes: Description: _____

Purchase Date: _____ Purchase Price: \$ _____

Assets Sold or Disposed? No Yes: Sale Date: _____ Sale Price: \$ _____

Business Loans & Financial Liabilities: Total: \$ _____ Interest Paid: \$ _____

Dividends & Shareholder Transactions:

Dividends Paid to Shareholders: \$ _____ T5 Slips Issued? Yes No



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Section 6: Tax Installments & CRA Correspondence

Total Tax Instalments Paid: \$ _____ Any CRA Notices or Audits? No Yes

Details: _____

Section 7: Foreign Assets & International Business Activities

Did the business own foreign assets exceeding CAD 100,000? No Yes

Did the business engage in transactions with non-residents? No Yes

Amount & Nature of Transactions: _____

Was a foreign subsidiary or branch involved? No Yes

Section 8: Special Tax Situations

Any losses carried forward from previous years? No Yes: Amount: \$ _____

Any scientific research & experimental development (SR&ED) claims? No Yes

Any capital gains or capital losses realized in the tax year? No Yes

Section 9: Finalizing the Tax Filing

Does this filing include: T2 Corporate Tax Return GST/HST Return T4 & T4A Slips for Employees & Contractors Dividend Reporting (T5) Other Filings: _____

Other relevant information for tax considerations:

Authorization & Signature

By signing below, I confirm as an authorized signing person that the information provided is accurate to the best of my knowledge.

Last name: _____ First name: _____ Position: _____

Date: _____ Signature: _____ Phone number: _____