



# ADL ACCOUNTING INC.

ACCURACY YOU CAN TRUST

Contact: +1 (604) 398-2040

Email: [info@adlaccounting.ca](mailto:info@adlaccounting.ca)

## Business Income & Expense Worksheet (Self-Employed)

### 1. Business Information:

- a. Business / Trade name: \_\_\_\_\_
- b. Owner's name: \_\_\_\_\_
- c. Business number (if registered for GST/ HST): \_\_\_\_\_
- d. Business address: \_\_\_\_\_
- e. Nature of business activity: \_\_\_\_\_

### 2. Business Income:

- a. Total business income: \_\_\_\_\_
- b. GST / HST collected (if applicable): \_\_\_\_\_

### 3. Business expenses:

- a. Advertising: \_\_\_\_\_
- b. Office expenses: \_\_\_\_\_
- c. Software subscriptions: \_\_\_\_\_
- d. Supplies: \_\_\_\_\_
- e. Small tools / equipments: \_\_\_\_\_
- f. Subcontractor payments: \_\_\_\_\_
- g. Professional fees (legal / accounting): \_\_\_\_\_
- h. Business licenses & permits: \_\_\_\_\_
- i. Business / liability insurance: \_\_\_\_\_
- j. Rent / lease payments: \_\_\_\_\_
- k. Utilities: \_\_\_\_\_
- l. Telephone expenses: \_\_\_\_\_
- m. Internet expenses: \_\_\_\_\_
- n. Bank charges / merchant fees: \_\_\_\_\_
- o. Travel expenses: \_\_\_\_\_
- p. Meals & entertainment: \_\_\_\_\_
- q. Professional development / training: \_\_\_\_\_
- r. Other expenses (please specify): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### 4. Home Office Expenses:

- a. Home office address: \_\_\_\_\_
- b. Total home square footage: \_\_\_\_\_
- c. Office workspace square footage: \_\_\_\_\_
- d. Rent paid (if applicable): \_\_\_\_\_
- e. Home insurance: \_\_\_\_\_
- f. Interest on mortgage: \_\_\_\_\_
- g. Property taxes: \_\_\_\_\_
- h. Repair & maintenance: \_\_\_\_\_
- i. BC Hydro (electricity): \_\_\_\_\_
- j. Fortis BC Gas (heating): \_\_\_\_\_
- k. Water/ Sewage: \_\_\_\_\_
- l. Internet: \_\_\_\_\_



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**5. Vehicle Expenses (if used for business):**

- a. Vehicle Make / Model / Year: \_\_\_\_\_
- b. Odometer reading (start of the year): \_\_\_\_\_
- c. Odometer reading (end of the year): \_\_\_\_\_
- d. Total KM driven for business: \_\_\_\_\_
- e. Auto repair & maintenance: \_\_\_\_\_
- f. Auto fuel expenses: \_\_\_\_\_
- g. Auto insurance: \_\_\_\_\_
- h. Lease payments or interest on loan: \_\_\_\_\_
- i. Parking receipts (business related): \_\_\_\_\_

**6. Assets purchased or Sold (Vehicles / Equipments / Tools):**

- a. Description: \_\_\_\_\_ Cost: \_\_\_\_\_
- b. Description: \_\_\_\_\_ Cost: \_\_\_\_\_
- c. Description: \_\_\_\_\_ Cost: \_\_\_\_\_

**7. Additional Notes:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**8. Client Declaration:**

- a. Client Name: \_\_\_\_\_
- b. Signature: \_\_\_\_\_
- c. Date (YYYY/MM/DD): \_\_\_\_\_