

Form 3
STATEMENT OF 2020 EMPLOYMENT/PARTNERSHIP ACTIVITIES

Name	Period over which expenses incurred (if not entire tax year):	
EMPLOYMENT EXPENSES (including GST/HST):		TOTAL FOR YEAR
Accounting and legal fees**		
Advertising and promotion**		
Allowable motor vehicle expenses (from below)		
Entertainment promotion for clients:*		
Tickets - total		
Other - total		
Meals - total		
Total cost X 50%		
Business parking (do not list a second time in the auto expense section below)		
Other expenses (specify on separate list)		
TOTAL EXPENSES		
* club membership fees are not deductible		

AUTOMOBILE EXPENSES	TOTAL FOR YEAR	DETAILS OF OWNERSHIP
EXPENSES:		Make & model of auto
Fuel (gasoline, propane, oil)		Was auto purchased, leased or disposed of in year?
Maintenance and repairs (including washes)		Date of purchase or lease (if such event occurred during tax year)
Insurance		Total cost of auto if purchased
License and registration fees		Total monthly lease payment if leased (If leased, please list MSRP)
Capital cost allowance (Sims will calculate)		(manufacturer's suggested retail)
Interest exp (if auto is financed)		Date of disposition or lease termination (if such event occurred during the tax year)
Leasing expense (total paid for the year)		Proceeds of disposition (if applicable)
Other expenses (specify)		A. KM driven for employment purposes
Other:		B. Total KM driven during the year
Total expenses (D)		C. Employment usage (A/B)
Employment portion (D X C)		
Re-imbbursement from employer		

Form 3A

Name	Period over which expenses incurred (if not entire tax year):	
EMPLOYMENT EXPENSES (including GST/HST):	TOTAL FOR YEAR	TOTAL FOR YEAR
Salary & Commission**	_____	Commission Only:
Office**	_____	
Stationary	_____	Licenses _____
Other (postage)	_____	Bonding _____
Telephone	_____	Equipment Rental _____
		Training _____
Other Expenses		Other _____
Salary paid to assistant		
Allowable motor vehicle expenses (from below)	_____	
Entertainment promotion for clients:*		
Tickets - total _____		
Other - total _____		
Meals - total _____		
Total cost -total _____ X 50%		
Lodging costs	_____	
Other travel costs	_____	
Office supplies	_____	
Telephone	_____	
Allowable portion - office in home (from below)	_____	
TOTAL EXPENSES	_____	TOTAL COMMISSION EXPENSES
	_____	_____
*club membership fees are not deductible		** only commissioned salespersons can claim

WORK SPACE IN HOME EXPENSES:	TOTAL FOR YEAR
Heat	_____
Electricity	_____
Water	_____
Home maintenance and repairs	_____
Insurance** (commission employees only)	_____
Property taxes** (commission employees only)	_____
Rent	_____
Other home related expense (specify)	_____
Total home expenses	=====
(A) Total square feet available in home	_____
(B) Total square feet used exclusively for employment purposes	_____
% used exclusively for employment (A/B)	_____
DEDUCTIBLE AMOUNT	=====
** only commissioned salespersons can claim	