# CORPORATION INFORMATION:

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| --- | --- |
| Articles of Incorporation |  Send us a copy of the ‘Articles of Incorporation’ |
| Corporation Name |  |  |
| Business Number | 9-digit #: RC |
| Year-End Date |  |  |
| Industry Type | Product/Service: |  |
|  | Product/Service: |  |
|  | Product/Service: |  |
|  | Product/Service: |  |
| Director or President | Name:  |
|  | Phone:  |
|  | Address: |  |
|  | Name: |  |
|  | Phone: |  |
|  | Address: |  |
| Shareholders | Name: |  |
|  | SIN # (if individual): |  |
|  | Business # (if corporation): |  |
|  | Number of Shares Owned: |  |
|  | Class of Shares Owned: | CommonPreferred |
|  | Name: |  |
|  | SIN # (if individual): |  |
|  | Business # (if corporation): |  |
|  | Number of Shares Owned: |  |
|  | Class of Shares Owned: | CommonPreferred |

1. ACCOUNTING INFORMATION:

Please provide the following information:

Bookkeeping file (including version & password) OR Balance Sheet Income Statement – Profit and Loss

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Bank Account & Credit Card Statements (last month of the corporation year only) or closing balance.

# ACCOUNTING INFORMATION:

If this corporation has filed an income tax return previously, please provide the following: Previous corporation income tax return and Notice of Assessment (NOA)

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# OTHER INFORMATION:

If the corporation is related or associated with any other corporation, please provide the following:

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| Name of the corporation(s) |
| Country of Residence of Corporation |
| Business # |
| Relationship: Related, Associated,Parent, Subsidiary |
| # of Common Shares Owned and % of Common Shares Owned |
| # of Preferred Shares Owned and % of Preferred Shares Owned |
| Book Value of Capital Stock |

# FOREIGN INTEREST AND TRANSACTION REPORTING REQUIREMENTS:

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| --- |
| Has your corporation owned foreign property with a cost of more than $100,000?YES NO  |
| Does your corporation have any controlled/non-controlled foreign affiliates?YES NO  |
| Has your corporation entered any non-arm’s length transactions with non-residents? YES NO  |

1. FINANCIAL INFORMATION:

**Please provide the following information (if applicable):**

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| **Bookkeeping Information** Bookkeeping Records (copy of QuickBooks file, Excel or printed trial balance at your year-end) Gross Corporation Income (net of HST) Bank Statements for your fiscal year (including cancelled cheques) Credit Card and LOC Statements for your fiscal Year GST/HST Returns for your fiscal year, including reports filed in the year, reporting method and reporting period Inventory, as at your year end - item description, quantity on hand, purchasecost, total value |
| **Corporation Expense (Net of HST)** |
| Advertising & Promotions | $ | Salaries & Wages (T4 Sum) | $ |
| Business Insurance |  $  | Subcontractors | $ |
| Rental |  $  | Home Office Expenses | $ |
| Licenses & Memberships |  $  | Interest & Bank Charges | $ |
| Credit Card Charges |  $  | Meals & Entertainment | $ |
| Franchise Fees |  $  | Professional Fees | $ |
| Internet |  $  | Purchase of Materials | $ |
| Telephone |  $  | Supplies | $ |
| Training |  $  | Travel expenses | $ |
| Vehicle Expenses (km driven to earn business) |  $  |  |
| General & Administrative Expenses |  |  $  |  |
| Shipping & Warehouse Expenses |  |  $  |  |
| Other Expenses |  |  | $ |  |
| **Dividends** |  |
|  Shareholders Dividends (attach T5) |  |

|  |
| --- |
| **Accounts Receivables and Accounts Payables** |
|  | Accounts Receivables:Accounts Payables: | $ |
|  $  |
| **Cost of Corporation Capital Assets** |
|  | EquipmentCopies of purchase agreements for new fixed assets Copies of all fixed assets sold or scrapped |
| **Payroll** |  |
|  | Payroll Summary for your fiscal yearMost recent source deduction statement of accounts Employer Health Tax (EHT) return & statement of accountsWorkplace Safety Insurance (WSIB) returns & statement accounts |
| **Investment** |  |
|  | All broker statements and transaction slips for your fiscal yearAll T-slips for yearly summaries |