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e: info@kmacpa.ca w: www.kmacpa.ca

REAL ESTATE RENTAL

Identification

lucitification					
Your name		Your social	insurance number		
Fiscal Year/Month/Day Year/Month/Day		<u> </u>			
Period: to:		Final year o	f rental operation?	<u>Y</u> es □ <u>N</u> o □	
Business Number (15 characters)		Vour ⁰	% of ownership		
RT		Tour /	% of ownership		
Income			# of units	Gross rents	_
Address					
City Province	Postal Code				
Enter the total of your gross rents					_
Other related income (for example, premiums and leases, shared	cropping)				_
Gross rental income					a
Expenses					
Personal use percentage			%		
	Total expense		Personal portion		
Advertising					
Insurance					
Interest					
Office expenses					
Legal, accounting, and other professional fees					
Management and administration fees					
Maintenance and repairs					
Salaries, wages, and benefits					
(including employer's contributions)					
Property taxes		_			
Travel					
Utilities					
Motor vehicle expenses (not including CCA)					
Other expenses		_			
Total					
Deductible expenses (total expenses minus personal portion)					_ b
If you rent out a portion of your home, please comp	lete the follow	ving:			
Square footage of home:		_			
Square footage of rented space:					
Square footage of common use area:		<u></u>			

Details of Other Partners

Partner's First Name:	Last Name:	SIN:	
		% of Partnership:	
Address:		\$ Share:	
Partner's First Name	Last Name	SIN:	
		% of Partnership:	
Address:		\$ Share	
Partner's First Name	Last Name	SIN:	
		% of Partnership:	
Address:		\$ Share	