2203 Highway 6
Vernon, BC V1T 9T8
Ph/fax (250) 503-1577

FITNESS WEST

June 10, 2014

Re: Krishna Brown

This is to confirm that Krishna Brown has been employed since January 2005 as a personal trainer and group fitness instructor at Fitness West.

Regards,

Jackie Cote'

Office administrator

BROWN, Krishna

Trainer

Salary	8.75	262.50	5,582.70	CPP	6.87
			0.00	EI	5.14
	0	0.00	0.00	Tax	25.00
Commission		0.00	1,074.68		
Vac Pay		10.92	276.86		
Gross Pay		273.42	6,934.24	Withheld	37.01
Less Advance				**Net Pay**	**236.41**
Net Gross Pay		**273.42**		Vacation Earned	10.92
				EI Insurable Hours	8.75

BROWN, Krishna

Trainer

Salary	28.17	845.00	5,320.10	CPP	36.90
			0.00	EI	16.55
	0	0.00	0.00	Tax	90.90
Commission		0.00	1,074.68		
Vac Pay		35.15	266.04		
Gross Pay		880.15	6,660.82	Withheld	144.35
Less Advance				**Net Pay**	**735.80**
Net Gross Pay		**880.15**		Vacation Earned	35.15
				EI Insurable Hours	28.17

INVOICE-GROUP FITNESS

Date: May 2014 Invoice for month of:

From: Kristina Brown
7382 L&A Road
Vernon B.C
V1B 3S6

To: Brian Doyon
Fitness West
2203 Hwy 6
Vernon, BC V1T 9T8

~~123~~
342
1365
1707

8
24
192

6
25

Services provided to Fitness West Vernon:

DATE	TIME	CLASS/TYPE	# OF PEOPLE	AMOUNT
			4	$24
May 1	12:10	Spin		25
5	8:50	Power	17	24
6	12:10	Spin	8	25
7	8:50	Power	15	25
May 12	8:50	Power	17	24
13	12:10	Spin	9	25
14	12:10	Power	19	24
15	12:10	Spin	7	24
20	12:10	Spin	6	25
21	8:50	Power	19	24
22	12:10	Spin	2	25
26	8:50	Power	17	24
27	12:10	Spin	5	24
28	8:50	Power	14	
			Total	$342.00

All Fit

1365.00
342
$ 1707.00

INVOICE-GROUP FITNESS

Date: All Fit May

Invoice for month of:

From: [illegible] Braun
7382 [illegible] Road
Vernon BC

To: Brian Doyon
Fitness West
2203 Hwy 6
Vernon, BC V1T 9T8

Services provided to Fitness West Vernon:

DATE	TIME	CLASS/TYPE	# OF PEOPLE	AMOUNT $
9:00 am	(13-5)	8x	= 24x	1320.00
12:10		11x		
			commission	45.00
				1365.00

All Fit

957.00
364.00
$1321.00

INVOICE-GROUP FITNESS

Date: April 2014 Invoice for month of:______

From:
Krishna Braun
7382 L&A Road
Vernon BC

957.00

To: Brian Doyon
Fitness West
2203 Hwy 6
Vernon, BC V1T 9T8

Services provided to Fitness West Vernon:

DATE	TIME	CLASS/TYPE	# OF PEOPLE	AMOUNT
				$
9:00 Am	x 10		21	
			minus 5	16x55
			2 (on payroll)	
12:10	x10			
				880.00
Commission			+	77.00
				957.00
			Total	$ 941.60

INVOICE-GROUP FITNESS

Date: March / April 2014

Invoice for month of: April 2014

From: Krishna Brown
7382 L&A Road
Vernon BC
V1B 3S6

Total $ 364.00

To: Brian Doyon
Fitness West
2203 Hwy 6
Vernon, BC V1T 9T8

Services provided to Fitness West Vernon:

DATE	TIME	CLASS/TYPE	# OF PEOPLE	AMOUNT
March 31	8:50	Power	~~[illegible]~~ 18	$ 25.00
April 1	12:10	SPIN	7	24
April 2	8:00	Spin	4	24
April 2	8:50	Power	21	25
April 7	8:50	Power	17	25
8	SPIN	12:10	12	24
9	SPIN	8:00	3	24
9	Power	8:50	14	24
April 14	8:50	Power	21	25
15	12:10	Spin	7	24
16	8:50	Power	12	24
22	12:10	Spin	9	24
23	8:50	Power	12	24
29	12:10	Spin	7	24
30	8:50	Power	17	24

T451 E (11)

Canada Revenue Agency | Agence du revenu du Canada

NOTICE OF ASSESSMENT

2

Date	Name	Social insurance no.	Tax year	Tax centre
ay 12, 2011	KRISHNA BROWN	726 130 446	2010	Surrey BC V3T 5E1

0286723

Summary

Line	Description		$ Amount
150	Total income		13,306
	Deductions from total income		1,031
236	Net income		12,275
260	Taxable income		12,275
350	Total federal non-refundable tax credits		1,816
6150	Total British Columbia non-refundable tax credits		591
420	Net federal tax		10.34
421	CPP contributions payable		603.02
435	Total payable		613.36
437	Total income tax deducted		597.56
482	Total credits		597.56
	(Total payable minus Total credits)		15.80
	Balance from this assessment	DR	15.80
	Balance due (Please see the explanation page)	DR	15.80

Linda Lizotte-MacPherson
Commissioner of Revenue

Date	Name	Social insurance no.	Tax year	Tax centre
May 12, 2011	KRISHNA BROWN	726 130 446	2010	Surrey BC V3T 5E1

Your 2011 RRSP Deduction Limit Statement

The back of this notice contains important information. Amounts marked with an asterisk (*) cannot be less than zero.

RRSP deduction limit for 2010		$10,547
Minus: Allowable RRSP contributions deducted for 2010		$700
Unused RRSP deduction limit at the end of 2010		$9,847
Plus: 18% of 2010 earned income of $9,429 = (max. $22,450)	$1,697	
Minus: 2010 pension adjustment	$0	$1,697 *
		$11,544
Minus: 2011 net past service pension adjustment		$0
Plus: 2011 pension adjustment reversal		$0
Your **RRSP deduction limit for 2011**		$11,544 *(A)

You have $500 **(B) of unused RRSP contributions** available for 2011. If this amount is more than amount **(A)** above, you may have to pay a tax on the excess contributions.

Do not use this area	172					171				

Canada Revenue Agency / Agence du revenu du Canada

NOTICE OF ASSESSMENT

T451 E (12)

2

Date	Name	Social insurance No.	Tax year	Tax centre
June 7, 2012	KRISHNA BROWN	726 130 446	2011	Surrey BC V3T 5E1

0010852

Summary

Line	Description	$ Amount
150	Total income	20,872 ✓
	Deductions from total income	969
236	Net income	19,903
260	Taxable income	19,903 ✓
350	Total federal non-refundable tax credits	2,358 ✓
6150	**Total British Columbia non-refundable tax credits**	**636**
420	Net federal tax	622.38
421	CPP contributions payable	873.08
428	**Net British Columbia tax**	**51.59**
435	Total payable	1,547.05 ✓
437	Total income tax deducted	998.02 ✓
486	Payment on filing	549.03
482	Total credits	1,547.05
	(Total payable minus Total credits)	0.00
	Balance from this assessment	0.00
	Final balance	**Nil**

Linda Lizotte-MacPherson
Commissioner of Revenue

Date	Name	Social insurance No.	Tax year	Tax centre
June 7, 2012	KRISHNA BROWN	726 130 446	2011	Surrey BC V3T 5E1

Your 2012 RRSP Deduction Limit Statement

The back of this notice contains important information. Amounts marked with an asterisk (*) cannot be less than zero.

RRSP deduction limit for 2011		$11,544
Minus: Allowable RRSP contributions deducted for 2011		$500
Unused RRSP deduction limit at the end of 2011		$11,044
Plus: 18% of 2011 earned income of $20,848 = (max. $22,970)	$3,752	
Minus: 2011 pension adjustment	$0	$3,752 *
		$14,796
Minus: 2012 net past service pension adjustment		$0
Plus: 2012 pension adjustment reversal		$0
Your **RRSP deduction limit for 2012**		$14,796 ✓ *(A)

You have $0 **(B)** of **unused RRSP contributions** available for 2012. If this amount is more than amount **(A)** above, you may have to pay a tax on the excess contributions.

Canada Revenue Agency / Agence du revenu du Canada

NOTICE OF ASSESSMENT

T451 E (12)

1

Date	Name	Social insurance No.	Tax year	Tax centre
June 7, 2012	KRISHNA BROWN	726 130 446	2011	Surrey BC V3T 5E1

0010851

At a later date, we may review your return to verify income you reported or deductions and credits you claimed. Keep all your slips, receipts, and other supporting documents in case we ask to see them.

Explanation of changes and other important information

2YW4JD77

Thank you for filing your income tax return. This notice explains the results of our assessment and any changes we may have made. Please refer to the "Summary" area for additional information.

Our records show that you have unused non-capital losses of other years. The amount that is available to apply to other years is $14.

A Tax-Free Savings Account (TFSA) allows Canadian residents, who are 18 years of age or older, to earn tax-free investment income throughout their lifetimes. To find out how much you can contribute to your TFSA for 2012, go to www.cra.gc.ca/myaccount or call our Enquiries service at the number shown on this notice. For more information concerning TFSAs, go to www.cra.gc.ca/tfsa.

Use My Account to access and manage your tax and benefit information online. Make changes to your return, check your RRSP information, set up direct deposit and more. To register for My Account, go to www.cra.gc.ca/myaccount.

If you have any questions about your assessment, please call our Enquiries service at 1-800-959-8281. If you need to contact another area of the Agency, see the telephone listings in the government section of your telephone book.

... 2

Linda Lizotte-MacPherson
Commissioner of Revenue

Canada Revenue Agency / Agence du revenu du Canada

SURREY BC V3T 5E1

11 (U)

KRISHNA BROWN
C/O AGAR SCHNEIDER & LETT
3105 37 AVE
VERNON BC V1T 2Y3

Canada Revenue Agency | Agence du revenu du Canada

INFORMATION RETURN FOR ELECTRONIC FILING OF AN INDIVIDUAL'S INCOME TAX AND BENEFIT RETURN

Protected B when completed

- Before you complete this form, read the information and instructions on the back.
- You have to complete Parts **A**, **B**, and **F of this form to allow your electronic filer to electronically file your 2012 income tax and benefit return**. Parts C, D, and E are optional.
- Your electronic filer has to complete parts **G** and **H**.
- Give the signed original of this form to your electronic filer, and keep a copy for yourself.

Part A - Identification and address as shown on your 2012 return (mandatory)

First name and initial	Last name	Social insurance number
KRISHNA	BROWN	726 130 446

Mailing address: Apt. No. – Street No. Street name
3105 37TH AVENUE

P.O. Box	R.R.	City	Prov./Terr.	Postal code
		VERNON	BC	V1T 2Y3

Part B - Declaration (mandatory)

Enter the following amounts from your 2012 return, if applicable:

Total income (line 150)	17,075.42		
Taxable income (line 260)	16,426.10	Refund (line 484)	432.00
Total federal non-refundable tax credits (line 350 of Schedule 1)	2,012.63	**or** Balance owing (line 485)	

Part C - Direct deposit (optional)

To start direct deposit, or to change banking information you already gave us, complete this part. Do **not** complete this part if you already use direct deposit and your banking information has not changed. Tick the payments you want deposited directly to your bank account held in Canada:

	Branch	Institution number	Account number
☐ Income tax refund, GST/HST credit and related provincial payments, Working Income Tax Benefit (WITB) advance payments, and any other deemed overpayment of tax to which you are entitled or to which you may become entitled			
☐ Canada Child Tax Benefit (CCTB) payments deposited into the the **same bank account** as your income tax refund, GST/HST credit and related provincial payments, WITB advance payments, and any other deemed overpayment of tax **or** ☐ CCTB and payments from certain related provincial or territorial programs into a **different bank account**			
☐ Tick this box to have your Universal Child Care Benefit (UCCB) payments deposited into the **same bank account** as your income tax refund, GST/HST credit and related provincial payments, WITB advance payments, and any other deemed overpayment of tax			
☐ Tick this box to have your UCCB payments deposited into the **same bank account** as your CCTB payments			
☐ Tick this box to have your UCCB payments deposited into a **different bank account**			

Part D - Alternative address authorization (optional)

Complete this part if you want us to mail your Notice of Assessment and your tax refund, or only your Notice of Assessment, to you at the address of the electronic filer named in Part G. Tick the appropriate box to tell us which information to mail to the electronic filer's address.

☐ 2012 Notice of Assessment and tax refund **or** ☐ 2012 Notice of Assessment

Part E - Authorizing an electronic filer to represent you (optional)

☒ I authorize the Canada Revenue Agency to deal with the electronic filer named in Part G as my representative for income tax matters of my 2012 return. This authorization will expire on ________________. Read page 2 of this form for more details.
If you do not show an expiry date, this authorization **will remain in effect** until you, the undersigned, cancel it.

Signature (individual identified in Part A or legal representative) | Name and title of legal representative | Date: 2013/05/23

Part F - Declaration and authorization (mandatory)

I declare that the information entered in Part A and the amounts shown in Part B above are correct and complete, and fully disclose my income from all sources. I also declare that I have read the information on the back of this form, and I authorize the electronic filer identified in Part G to electronically file my 2012 return and to communicate with the Canada Revenue Agency to correct any errors or omissions.

Signature (individual identified in Part A or legal representative) | Name and title of legal representative | Date: 2013/05/23

Your electronic filer has to complete parts G and H (mandatory).

Part G - Electronic filer identification

By signing Part F above, the individual in Part A authorizes the following person or firm to electronically file his or her 2012 return. Part F **must be signed** before the return is electronically transmitted.

Name of person or firm: AGAR SCHNEIDER & LETT
Electronic filer number: B3169

Part H - Document control number or confirmation number

Enter the document control or confirmation number for the individual's electronic record:
B316900NL5QRE

Protected B - when completed

Canada Revenue Agency | Agence du revenu du Canada

T1 GENERAL 2012

Income Tax and Benefit Return

Complete all the sections that apply to you. For more information, see the guide.

7

Identification

First name and initial
KRISHNA

Last name
BROWN

Care of
AGAR SCHNEIDER & LETT

Mailing address: Apt No – Street No Street name
3105 37TH AVENUE

PO Box

RR

City
VERNON

Prov./Terr.
BC

Postal Code
V1T 2Y3

Information about your residence

Enter your province or territory of residence on **December 31, 2012**: BRITISH COLUMBIA

If your province or territory of residence changed in 2012, enter the date of your move.

Is your home address the same as your mailing address ? ☐ Yes ☐ No

Enter the province or territory where you **currently** reside if it is not the same as your mailing address above:

If you were self-employed in 2012, enter the province or territory of self-employment: BRITISH COLUMBIA

If you **became** or **ceased** to be a **resident of Canada** for income tax purposes **in 2012**, enter the date of:

entry (Month/Day) ________ or **departure** (Month/Day) ________

Information about you

Enter your social insurance number (SIN) 726 130 446

Enter your date of birth: (Year/Month/Day) 1972/03/10

Your language of correspondence:
Votre langue de correspondance : English ☒ Français ☐

Your marital status on December 31, 2012
(see the "Marital status" section in the guide for details)

1 ☒ Married 2 ☐ Living common-law 3 ☐ Widowed
4 ☐ Divorced 5 ☐ Separated 6 ☐ Single

Information about your spouse or common-law partner (if you ticked box 1 or 2 above)

Enter his or her social insurance number: 723 847 604

Enter his or her first name: DAVID

Enter his or her net income for 2012 to claim certain credits: 50,069.51

Enter the amount of UCCB included on line 117 of his or her return:

Enter the amount of UCCB repayment included on line 213 of his or her return

Tick this box if he or she was self-employed in 2012: 1 ☐

Person deceased in 2012

If this **return** is for a **deceased person**, enter the date of death: Year/Month/Day

Do not use this area

Do not use this area	172					171				

Elections Canada (see the Elections Canada page in the tax guide for details or visit **www.elections.ca**)

A) Are you a Canadian citizen? Yes [X] 1 No [ ] 2

Answer the following question **only if you are a Canadian citizen.**

B) As a Canadian citizen, do you authorize the Canada Revenue Agency to give your name, address, date of birth, and citizenship to Elections Canada to update the National Register of Electors? Yes [ ] 1 No [X] 2

Your authorization is valid until you file your next return. Your information will only be used for purposes permitted under the *Canada Elections Act* which includes sharing the information with provincial/territorial election agencies, Members of Parliament and registered political parties, as well as candidates at election time.

Goods and services tax/harmonized sales tax (GST/HST) credit application

See the guide for details.

Are you applying for the GST/HST credit (including any related provincial credit)? Yes [ ] 1 No [X] 2

Please answer the following question

Did you own or hold foreign property at any time in 2012 with a total cost of more than CAN$100,000? (see the "Foreign income" section in the guide for details) 266 Yes [ ] 1 No [X] 2

If **yes**, complete and attach Form T1135 to your return.

If you had dealings with a non-resident trust or corporation in 2012, see the "Foreign income" section in the guide.

Your guide contains valuable information to help you complete your return.
When you come to a line on the return that applies to you, look up the line number in the guide for more information.

As a Canadian resident, you have to report your income from all sources both inside and outside Canada.

Total income

Employment income (box 14 on all T4 slips)			101	18,909 49
Commissions included on line 101 (box 42 on all T4 slips)	102			
Other employment income			104	
Old Age Security pension (box 18 on the T4A(OAS) slip)			113	
CPP or QPP benefits (box 20 on the T4A(P) slip)			114	
Disability benefits included on line 114 (box 16 on the T4A(P) slip)	152			
Other pensions or superannuation			115	
Elected split-pension amount (**attach** Form T1032)			116	
Universal Child Care Benefit (UCCB)			117	
UCCB amount designated to a dependant	185			
Employment Insurance and other benefits (box 14 on the T4E slip)			119	
Taxable amount of dividends (eligible **and** other than eligible) from taxable Canadian corporations (**attach** Schedule 4)			120	1 46
Taxable amount of dividends other than eligible dividends, included on line 120, from taxable Canadian corporations	180			
Interest and other investment income (**attach** Schedule 4)			121	
Net partnership income: limited or non-active partners only			122	
Registered disability savings plan income			125	
Rental income	Gross 160	9,600 00	Net 126	(9,894 62)
Taxable capital gains (**attach** Schedule 3)			127	
Support payments received	Total 156		Taxable amount 128	
RRSP income (from all T4RSP slips)			129	
Other income	Specify:		130	
Self-employment income				
Business income	Gross 162	18,613 00	Net 135	8,059 09
Professional income	Gross 164		Net 137	
Commission income	Gross 166		Net 139	
Farming income	Gross 168		Net 141	
Fishing income	Gross 170		Net 143	
Workers' compensation benefits (box 10 on the T5007 slip)	144			
Social assistance payments	145			
Net federal supplements (box 21 on the T4A(OAS) slip)	146			
Add lines 144, 145, and 146 (see line 250 in the guide).		▸	147	
Add lines 101, 104 to 143, and 147		This is your **total income.**	150	17,075 42

Attach your Schedule 1, *Federal Tax* here.
Also attach here any other schedules, information slips, forms, receipts, and documents that you need to include with your return.

Net income

Enter your **total income** from line 150		150	17,075.42
Pension adjustment (box 52 on all T4 slips and box 034 on all T4A slips)	206		
Registered pension plan deduction (box 20 on all T4 slips and box 032 on all T4A slips)	207		
RRSP deduction (see Schedule 7 and **attach** receipts)	208		
Deduction for elected split-pension amount (**attach** Form T1032)	210		
Annual union, professional, or like dues (box 44 on all T4 slips, and receipts)	212		
Universal Child Care Benefit repayment (box 12 on all RC62 slips)	213		
Child care expenses (**attach** Form T778)	214	200.00	
Disability supports deduction	215		
Business investment loss — Gross 228 — Allowable deduction	217		
Moving expenses	219		
Support payments made — Total 230 — Allowable deduction	220		
Carrying charges and interest expenses (**attach** Schedule 4)	221	50.40	
Deduction for CPP or QPP contributions on self-employment and other earnings (**attach** Schedule 8)	222	398.92 •	
Exploration and development expenses (**attach** Form T1229)	224		
Other employment expenses	229		
Clergy residence deduction	231		
Other deductions — Specify:	232		
Add lines 207 to 224, 229, 231, and 232.	233	649.32 ▶	649.32
Line 150 minus line 233 (if negative, enter "0"). This is your **net income before adjustments.**		234	16,426.10
Social benefits repayment (if you reported income on line 113, 119, or 146, see Line 235 in the guide) Use the federal worksheet to calculate your repayment.		235	•
Line 234 minus line 235 (if negative, enter "0"). If you have a spouse or common-law partner, see Line 236 in the guide. This is your **net income.**		236	16,426.10

Taxable income

Canadian Forces personnel and police deduction (box 43 on all T4 slips)	244		
Employee home relocation loan deduction (box 37 on all T4 slips)	248		
Security options deductions	249		
Other payments deduction (if you reported income on line 147, see Line 250 in the guide)	250		
Limited partnership losses of other years	251		
Non-capital losses of other years	252		
Net capital losses of other years	253		
Capital gains deduction	254		
Northern residents deductions (**attach** Form T2222)	255		
Additional deductions — Specify:	256		
Add lines 244 to 256.	257	▶	
Line 236 minus line 257 (if negative, enter "0") This is your **taxable income.**		260	16,426.10

Use your taxable income to calculate your federal tax on Schedule 1 and your provincial or territorial tax on Form 428.

Refund or Balance owing

Net federal tax: enter the amount from line 58 of Schedule 1 (**attach** Schedule 1, even if the result is "0")		420	451 07
CPP contributions payable on self-employment and other earnings (**attach** Schedule 8)		421	797 85
Employment Insurance premiums payable on self-employment and other eligible earnings (**attach** Schedule 13)		430	
Social benefits repayment (enter the amount from line 235)		422	
Provincial or territorial tax (**attach** Form 428, even if the result is "0")		428	
Add lines 420, 421, 430, 422, and 428.	This is your **total payable.**	435	1,248 92 •
Total income tax deducted	437	1,680 92 •	
Refundable Québec abatement	440	•	
CPP overpayment (enter your excess contributions)	448	•	
Employment Insurance overpayment (enter your excess contributions)	450	•	
Refundable medical expense supplement (use the federal worksheet)	452	•	
Working Income Tax Benefit (WITB) (**attach** Schedule 6)	453	•	
Refund of investment tax credit (**attach** Form T2038(IND))	454	•	
Part XII.2 trust tax credit (box 38 on all T3 slips)	456	•	
Employee and partner GST/HST rebate (**attach** Form GST370)	457	•	
Tax **paid** by instalments	476	•	
Provincial or territorial credits (**attach** Form 479 if it applies)	479	•	
Add lines 437 to 479. These are your **total credits.**	482	1,680 92 ▸	1,680 92
Line 435 minus line 482		This is your **refund** or **balance owing**.	(432 00)

If the result is negative, you have a **refund**. If the result is positive, you have a **balance owing**.
Enter the amount below on whichever line applies.

Generally, we do not charge or refund a difference of $2 or less.

Refund 484 432 00 •

Balance owing 485 •

Amount enclosed 486 •

Attach to page 1 a **cheque** or **money order** payable to the Receiver General, or make your payment online (go to **www.cra.gc.ca/mypayment**). Your payment is due no later than April 30, 2013.

Direct deposit - Start or change (see line 484 in the guide)

You do not have to complete this area every year. Do not complete it this year if your direct deposit information has not changed. **Income tax refund, GST/HST credit, WITB advance payments, and any other deemed overpayment of tax** – To start direct deposit or to change account information, complete lines 460, 461, and 462 below.

Notes: To deposit your **CCTB** payments (including certain related provincial or territorial payments) into the **same** account, also tick box 463. To deposit your **UCCB** payments into the **same** account, also tick box 491.

Branch number	Institution number	Account number	CCTB	UCCB
460	461	462	463	491
(5 digits)	(3 digits)	(maximum 12 digits)		

I certify that the information given on this return and in any documents attached is correct, complete, and fully discloses all my income.

Sign here

It is a serious offence to make a false return.

Telephone (250) 260-6590 Date 2013/05/23

490 X

If a fee was charged for preparing this return, complete the following:

Name AGAR SCHNEIDER & LETT

Telephone (250) 545-7117

EFILE number (if applicable): 489 B3169

Do not use this area 487 488 •

Canada Revenue Agency / Agence du revenu du Canada

Statement of Real Estate Rentals

Protected B when completed

Identification

Your name KRISHNA BROWN	Your social insurance number 726 130 446
Fiscal period: Year/Month/Day 2012/01/01 to: Year/Month/Day 2012/12/31	Final year of rental operation? Yes ☐ No ☒
Name and address of person or firm preparing this form AGAR SCHNEIDER & LETT 3105 37TH AVENUE VERNON, British Columbia V1T2Y3	Partnership Business Number (9 digits) Tax shelter identification number
Account Number (15 characters) RT	Your % of ownership 100.0000 % — Industry code 531111

Income

			# of units	Gross rents
Address 7382 L&A ROAD				
City VERNON	Province BC	Postal code V1B 3S6		9,600 00
Address				
City	Province	Postal code		
Enter the total of your gross rents			8141	9,600 00
Other related income (for example, premiums and leases, sharecropping)			8230	
Gross rental income - Enter this amount on line 160 of your income tax and benefit return			8299	9,600 00 a

Expenses

Personal use percentage ______ %

		Total expense	Personal portion
Advertising	8521		
Insurance	8690	1,637 04	
Interest	8710	9,428 05	
Office expenses	8810		
Legal, accounting, and other professional fees	8860		
Management and administration fees	8871		
Maintenance and repairs	8960	336 00	
Salaries, wages, and benefits (including employer's contributions)	9060		
Property taxes	9180	1,381 32	
Travel	9200		
Utilities	9220	600 00	
Motor vehicle expenses (not including CCA)	9281		
Other expenses WASTE	9270	222 44	
Other expenses TREES	9270		
Other expenses HYDRO	9270	4,929 77	
Other expenses TERASEN (FORTIS)	9270	960 00	
Other expenses	9270		
Total		19,494 62	9949

Deductible expenses (total expenses **minus** personal portion)		19,494 62 b
Net income (loss) before adjustments (line a **minus** line b)	9369	(9,894 62)
Co-owners - Your share of line 9369 above		(9,894 62) c
Minus: Other expenses of the co-owner	9945	
Subtotal		(9,894 62)
Plus: Recaptured capital cost allowance (co-owners – enter your share of the amount) (see Chapter 3)	9947	
Subtotal		(9,894 62)
Minus: Terminal loss (co-owners – enter your share of the amount) (see Chapter 3)	9948	
Subtotal		(9,894 62)
Minus: Capital cost allowance (from Area A)	9936	
Net income (loss) - If you are a sole proprietor or a co-owner, enter this amount on line 9946		(9,894 62) d
Partnerships - Your share of line d above or the amount from slip T5013 or T5013A		(9,894 62) e
Plus: GST/HST rebate for partners received in the year	9974	
Minus: Other expenses of the partner	9943	

On the basis of information provided, we have compiled this statement. We have not performed an audit or a review engagement on this statements, and accordingly we express no assurance thereon. Readers are cautioned that this statements may not be appropriate for their purposes.

AGAR SCHNEIDER & LETT VERNON British Columbia 2013/05/23

Your net income (loss) - Enter this amount on line 126 of your income tax and benefit return)	**9946**	(9,894 62)

On the basis of information provided, we have compiled this statement. We have not performed an audit or a review engagement on this statements, and accordingly we express no assurance thereon. Readers are cautioned that this statements may not be appropriate for their purposes.

AGAR SCHNEIDER & LETT VERNON British Columbia 2013/05/23

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Details of other co-owners and partners

Co-owner or partner's first name	Last name	Percentage of ownership %
Address:		Share of net income (loss)
Co-owner or partner's first name	Last name	Percentage of ownership %
Address:		Share of net income (loss)
Co-owner or partner's first name	Last name	Percentage of ownership %
Address:		Share of net income (loss)
Co-owner or partner's first name	Last name	Percentage of ownership %
Address:		Share of net income (loss)
Co-owner or partner's first name	Last name	Percentage of ownership %
Address:		Share of net income (loss)

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Child Care Expenses Deduction for 2012

Read the attached information sheet. On the sheet we define **child care expenses**, **eligible child**, **net income**, **earned income**, and **educational program**. For more information, see Interpretation Bulletin IT-495, *Child Care Expenses*.

Each person claiming the child care expenses deduction must attach a completed Form T778 to his or her return. Do not include receipts, but keep them in case we ask to see them.

If you are the **only person** claiming child care expenses, complete parts A and B, and, if it applies, Part D.
If there is **another person** (as described under "Who can claim child care expenses?") and you are the one with the **lower net income**, complete parts A and B.
If there is **another person** (as described under "Who can claim child care expenses?") and you are the one with the **higher net income**, complete parts A, B, C, and, if it applies, Part D.

Child care expense details

Name of child	Organization or name and social insurance number		# weeks**	Amount	Claim
TANNER	CAMP HURLBURT		2	432.00	200.00

**Enter the # of weeks spent at boarding school, overnight sports school or overnight camp.

Part A - Total child care expenses

- List the **first and last names** and the **dates of birth** of all your eligible children, even if you did not pay child care expenses for all of them.
- Indicate who received the payments. Provide the **name of the child care organization** or the **name and social insurance number of the individual**.

Child's Last and First Name	Date of Birth	Name and SIN of individual, or name of organization	Number of weeks	Child care expenses paid
BROWN, TANNER	2002/10/24	CAMP HURLBURT	2	200 00
		Total child care expenses		200 00

Note: The maximum you can claim for expenses that relate to a stay in a boarding school (other than education costs) or an overnight camp (including an overnight sports school) is **$175 per week** for a child included on line 1 in Part B, **$250 per week** for a child included on line 2, and **$100 per week** for a child included on line 3.

Enter any child care expenses included above that were incurred in 2012 for a child who was 18 or older. 6795

Part B - Basic limit for child care expenses

Number of eligible children:

Born in 2006 or later, for whom the disability amount cannot be claimed	X $7,000 =			1
Born in 2012 and earlier, for whom the disability amount can be claimed*	X $10 000 =	6796		2
Born in 1996 to 2005, (or born in 1995 or earlier, with a mental or physical impairment,for whom the disability amount cannot be claimed)	1 X $4,000 =		4,000 00	3
Add lines 1, 2, and 3.			4,000 00	4
Enter your **total child care expenses** from Part A.			200 00	5
Enter your **earned income.**	26,968 58 X 2/3 =		17,979 05	6
Enter the amount from line 4, 5, or 6, whichever is **least**			200 00	7

If you are the person with the higher net income, go to Part C. Leave lines 8 and 9 blank.

Enter any child care expenses that the **other person** (as described under "Who can claim child care expenses?") with the higher net income deducted on line 214 of his or her 2012 return.		8
Line 7 minus line 8. If you attended school in 2012 and you are the only person making a claim, also go to Part D. Otherwise, enter this amount on line 214 of your return. **Allowable deduction**	200 00	9

* Attach Form T2201, *Disability Tax Credit Certificate*. If this form has already been filed for the child, attach a note to your return showing the name and social insurance number of the person who filed the form and the tax year for which it was filed.

Part C - Are you the person with the higher net income?

Complete Part C if, in 2012, **another person** (as described under "Who can claim child care expenses?") with lower net income was in a situation described below. Give the name, social insurance number, and the net income of the other person, **and** tick the boxes that apply.

Name of person with lower net income	Social insurance number	Net income

- ☐ **a)** The other person attended school and was enrolled in a **part-time** educational program (see "Educational program" on the T778 information sheet).
- ☐ **b)** The other person attended school and was enrolled in a **full-time** educational program (see "Educational program" on the T778 information sheet).
- ☐ **c)** The other person was not capable of caring for children because of a mental or physical infirmity. That person must have been confined for a period of at least two weeks to a bed or wheelchair, or as a patient in a hospital, or other similar institution. Attach a statement from the attending physician certifying this information.
- ☐ **d)** The other person was not capable of caring for children because of a mental or physical infirmity, and this situation is likely to continue for an indefinite period. Attach a statement from the attending physician certifying this information.
- ☐ **e)** The other person was confined to a prison or similar institution for a period of at least two weeks.
- ☐ **f)** You and your spouse or common-law partner were, due to a breakdown in your relationship, living separate and apart at the end of 2012 and for a period of at least 90 days beginning in 2012, but you reconciled before March 1, 2013.

Line 4 (in Part B)		**x 2.5 % =**			10
Number of **months** in 2012 that the situation in **a)** existed (other than a month that includes a week that any of the situations in **b)** to **f)** existed)		x line 10		=	11
Number of **weeks** in 2012 that any of the situations in **b)** to **f)** existed		x line 10		=	12
Add lines 11 and 12				6798	13
Enter the amount from line 7 (in Part B) or line 13, whichever is **less**. If you attended school in 2012, go to Part D. Otherwise, enter this amount on line 214 of your return			**Allowable deduction**		14

Part D - Are you enrolled in an educational program in 2012?

Complete Part D if, at any time in 2012, either of the following situations applied to you:

- You were the **only person** making a claim, line 7 equals line 6 in Part B, and you were enrolled in a program (see "Educational program").
- You were the **person with the higher net income**, line 7 equals line 6 in Part B, and, at the same time in 2012, you **and another person** (as described under "Who can claim child care expenses?") were enrolled in a program (see "Educational program"). **But first, complete Part C.**

Part D does not apply to the person with the lower net income, since the other person will claim this part of the deduction for both of them.

Line 4 (in Part B)	4,000.00	**x 2.5 % =**		100 00	15
Number of **weeks** in 2012 during which you were enrolled in a **full-time** educational program. If there was **another person** (as described under "Who can claim child care expenses?"), he or she must also have been enrolled in a **full-time** educational program during the **same weeks**.		x line 15	100 00 =		16
Number of **months** (other than any month that includes a week used to calculate the amount on line 16) in 2012 during which: • there was no **other person** (as described under "Who can claim child care expenses?") and you were enrolled in a **part-time** educational program; or • you and the other person were enrolled in a **full-time** or **part-time** educational program during the **same months**.		x line 15	100 00 =		17
Add lines 16 and 17				6801	18
Line 4 (in Part B) minus line 9 (in Part B) or line 14 (in Part C), whichever applies to you				3,800 00	19
Line 5 (in Part B) minus line 9 (in Part B) or line 14 (in Part C), whichever applies to you					20
Enter your **net income** (not including amounts on line 214 or 235)	16,626 10	**X 2/3 =**		11,084 07	21
If you completed Part C: Line 13 (in Part C) minus line 6 (in Part B)					22
Enter the amount from line 18, 19, 20, 21, or (if it applies) 22, whichever is **least**.					23
Enter the amount from line 9 (in Part B) or line 14 (in Part C), whichever applies to you.					24
Add line 23 and line 24. Enter this amount on line 214 of your return.			**Allowable deduction**		25

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CALCULATION OF CUMULATIVE NET INVESTMENT LOSS (CNIL)TO DECEMBER 31, 2012

Protected B when completed

- Use this form if you had any **investment income** or **investment expenses** for 2012.
- Your CNIL reduces the amount of your cumulative gains limit for the year and may affect the allowable amount of your capital gains deduction.
- Even if you are not claiming a capital gains deduction in 2012, you should still complete this form if you had any investment income or expenses in 2012.
- Because the balance in your CNIL account is a cumulative total, you may need this information in a future year. Keep a copy for your records and attach another to your return.
- If you need more information, call **1-800-959-8281**.

Note
If you have capital gains other than from the disposition of qualified farm property, qualified fishing property or qualified small business corporation shares in 2012, you should start by completing Chart A on the next page of this form to determine if you have additional investment income to include when you calculate your CNIL.

Part 1 - Investment expenses claimed on your 2012 return

Carrying charges and interest expenses (from line 221)			50.40	1	
Net rental losses (from line 126)			+ 9,894.62	2	
Limited or non-active partnership losses (from line 122) other than allowable capital losses			+	3	
Limited partnership losses of other years after 1985 (from line 251)			+	4	
50% of exploration and development expenses (from line 224)			+	5	
Any other investment expenses claimed in 2012 to earn property income:					
Foreign non-business tax deductions					
CCA claimed on certified films and videotapes (line 232)	+				
Limited or non-active partnership farming losses	+				
Limited or non-active partnership fishing losses	+				
Other (specify)	+				
Total	=	6808	+	6	
Additional investment expenses: Otherwise, enter the **lesser** of line 15 in Chart A, or the amount you claimed on line 253 of your return			+	7	
Total investment expenses claimed in 2012 (total of lines 1 to 7)			= 9,945.02 ▶		9,945.02 A

Part 2 - Investment income reported on your 2012 return

Investment income (from lines 120 and 121)			1.46	8	
Net rental income, including recaptured capital cost allowance (from line 126)			+	9	
Net income from limited or non-active partnerships (from line 122) other than taxable capital gains			+	10	
Any other property income reported in 2012:					
Limited or non-active partnership farming income					
Limited or non-active partnership fishing income	+				
Reported on T3 slips	+				
Withdrawals from AgriInvest Fund 2	+				
CPP death benefit payments	+				
Annuity payments taxable under p.56(1)(d) **minus** the capital portion deducted under p.60(a)	+				
Capital losses included in limited partnership losses of other years (line 251)	+				
Other (specify)	+				
Total	=	6810	+	11	
50% of income from the recovery of exploration and development expenses (from line 130)		6811	+	12	
Additional investment income: Enter the amount from line 15 in Chart A			+	13	
Total investment income reported in 2012 (total of lines 8 to 13)			= 1.46 ▶		1.46 B

Other investment expenses

Include: • repayments of inducements • repayments of refund interest • the uncollectible portion of proceeds from dispositions of depreciable property (except passenger vehicles that cost more than $30,000) • sale of agreement for sale or mortgage included in proceeds of disposition in a previous year under subsection 20(5) • foreign non-business tax under subsections 20(11) and 20(12) • life insurance premiums deducted from property income • capital cost allowance claimed on certified films and videotapes • farming or fishing losses claimed by a non-active partner or a limited partner

Do not include: • expenses incurred to earn business income • repayment of shareholders' loans deducted under paragraph 20(1)(j) • interest paid on money borrowed to: i) buy an income-averaging annuity contract; ii) pay a premium under a registered retirement savings plan; iii) make a contribution to a registered pension plan; and iv) make a contribution to a deferred profit-sharing plan

Other property income

Include: • amounts from insurance proceeds for the recapture of capital cost allowance (other than amounts already included on line 9) • home insulation or energy conversion grants under paragraph 12(1)(u) • payments received as an inducement or reimbursement • income from the appropriation of property to a shareholder • farming and fishing income reported by a non-active or a limited partner • other income from a trust • allowable capital losses included in partnership losses of other years after 1985. • amounts withdrawn from AgriInvest Fund 2 • CPP death benefit payments reported on your T1 return

Do not include: • income amounts that relate to business income • payments received from an income-averaging annuity contract • payments received from an annuity contract bought under a deferred profit-sharing plan. • shareholders' loans included in income under subsection 15(2)

Do not use this area
6813

Part 3 - Cumulative net investment loss (CNIL)

Total investment expenses claimed in 2012 (from line A in Part 1)	9,945.02	14		
Total investment expenses claimed in previous years (after 1987): Enter the amount from line 16 in Part 3 of Form T936 for 2011. If you did not complete Form T936 for 2011, see note 1 below	+ 11,657.47	15		
Cumulative investment expenses (total of lines 14 and 15)	= 21,602.49 ▶		21,602.49	16
Total investment income reported in 2012 (from line B in Part 2)	1.46	17		
Total investment income reported in previous years (after 1987): Enter the amount from line 19 in Part 3 of Form T936 for 2011. If you did not complete Form T936 for 2011, see note 2 below	+ 165.69	18		
Cumulative investment income (total of lines 17 and 18)	167.15 ▶		- 167.15	19
Cumulative net investment loss (CNIL) to December 31, 2012 (line 16 **minus** line 19; if negative, enter "0")			= 21,435.34	C

If you are claiming a capital gains deduction on your 2012 return, enter the amount from line C on line 28 of Form T657 for 2012.

Notes

1. To calculate your **total investment expenses from previous years**, complete Part 1 of Form T936 for each year from 1988 to 2011 in which you had investment expenses (do not complete line 7 for 1988 to 1991). Add the amounts from line A and enter the total on line 15 above.
2. To calculate your **total investment income from previous years**, complete Part 2 of Form T936 for each year from 1988 to 2011 in which you had investment income (do not complete line 13 for 1988 to 1991). Add the amounts from line B and enter the total on line 18 above.

Chart A

Enter the amount from line 199 of Schedule 3 (if negative, show it in brackets)				1
Enter the amount from line 173 of Schedule 3			+	2
Line 1 **plus** line 2 (if negative, enter "0"). If the amount on this line is zero, do not complete lines 4 to 14, and enter "0" on line 15			=	3
Enter the amount from line 1 above (if negative, enter "0")				4
Enter the total of the amounts from lines 107, 110, and 124 of Schedule 3 (if negative, show it in brackets)		5		
If you reported an amount on line 192 of Schedule 3, enter the total of the amounts from lines 6683 and 6690 on Form T2017. Otherwise, enter the amount from line 5 on line 7	+	6		
Line 5 **plus** line 6 (if negative, enter "0")	=	7		
Enter 1/2 of line 7			-	8
Line 4 **minus** line 8 (if negative, enter "0"). If the amount on this line is zero, do not complete lines 10 to 14, and enter "0" on line 15			=	9
Total net non-eligible taxable capital gains (line 3 or line 9, **whichever is less**). If the amount on this line includes an amount from a T3 slip, complete lines 11 to 13 below. Otherwise, enter "0" on line 14.				10
Enter the amount from box 21 of all 2012 T3 slips	5334	11		
Enter the amount from box 30 of all 2012 T3 slips	-	12		
Line 11 **minus** line 12	5365 =	13		
Enter 1/2 of line 13			-	14
Additional investment income (line 10 **minus** line 14; if negative, enter "0")			=	15

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Authorizing or Cancelling a Representative

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Complete this form to give the Canada Revenue Agency (CRA) your consent to deal with another person (such as your spouse or common-law partner, other family member, friend, or accountant) who would act as your representative for income tax matters or to cancel any existing representatives on your file. For **individual** accounts, complete this form only if you have a valid social insurance number (SIN), temporary tax number (TTN) or individual tax number (ITN). Only forms received with a valid SIN, TTN or ITN will be processed. Send your completed form to your CRA tax centre. You can find the address of your tax centre on the attached information sheet. You can also give or cancel a consent by providing the requested information online through "Authorize my representative" on our Web site at **www.cra.gc.ca/ myaccount**. To **immediately cancel** a consent, call us at **1-800-959-8281**.

Note

We will accept a change of address only from **you** or your **legal representative**. If you have registered with the **My Account** online service, you can change your address by going to **www.cra.gc.ca/myaccount**. If you have recently moved, call us at **1-800-959-8281** before submitting this form to ensure we have your current mailing address.

To **authorize** a representative, complete Part 1, Part 2 **or** Part 3, Part 4, and Part 6.
To **cancel** a representative, complete Part 1, Part 5, and Part 6.

Part 1 – Taxpayer information

Complete this part to identify yourself and to give your account number.
You will need to complete a **separate Form T1013** for each account.

First name	Last name	Work telephone number	Home telephone number
KRISHNA	BROWN	- -	250-260-6590

Complete the one that applies:	Individual	Trust	T5
	SIN, TTN or ITN: 726 130 446	Trust account number: T	T5 filer identification number: HA

Part 2 – Giving consent for a representative (including online access)

You must complete a **separate Form T1013** for each representative. Online access is not available for **trust** accounts. Refer to Part 3.

To grant online access to your representative, enter his or her identification number.

For an individual
RepID:

or

For a group
GroupID: G

or

For a business
Business Number: 882300924

Your representative must have registered the BN with the CRA **"Represent a client"** service.

Enter the full name of the individual, group or business.

Name of individual associated to the RepID

First name:____________ Last name: ____________

Name of the group associated to the GroupID

____

Name of the business associated to the BN

AGAR SCHNEIDER & LETT

Enter the **level of authorization** (level 1 or 2): 2

If you **do not specify a level** of authorization, we will **assign a level 1.** Our online services do not have a year-specific option.Therefore, your representative will have access to **all tax years**.

Part 3 – Giving consent for a representative (other than online access, including trust accounts)

You must complete a separate Form T1013 for each representative.

- If you are giving consent for an individual, enter the individual's full name in the appropriate box below.
- If you are giving consent for a business, enter the name of the business in the appropriate box below.

Name of individual	Name of business		
First name:			
Last name:	Telephone: - -	Ext:	Fax: - -

(Vous pouvez obtenir ce formulaire en français à **www.arc.gc.ca** ou au **1-800-959-3376**.)

Canada

Part 3 – (Continued)

Tick either
- **Box A** below to give consent for **all** tax years **and** specify the level of authorization; **or**
- **Box B** below to give consent for a **specific** tax year or years **and** specify the level of authorization for **each** tax year.

If you **do not specify a level** of authorization, we will **assign a level 1**.

☐ **A.** All (past, present, and future) tax years **Level of authorization** (specify either level 1 or 2): ______

☐ **B.** Enter the applicable tax year or years (past and/or present), and specify the level of authorization (level 1 or 2) for **each** tax year.

Tax year(s)										
Level of authorization										

If this consent is for a **trust account** and the year-end is not December 31, enter the month and day of the year-end: ______

Part 4 – Consent expiry date

Enter an expiry date for the consent given in **Part 2** or **Part 3** if you want the consent to end at a particular time. Your consent will stay in effect until **you** or **your representative** cancels it, it reaches the expiry date you choose, or we are notified of your death. ______

Part 5 – Cancelling one or more existing consents

Complete this section **only** to cancel an existing consent. Tick the appropriate box.

☐ **A.** Cancel **all** consents. ☐ **B.** Cancel the consents given for the individual or business identified below:

Name of individual

First name: | Last name:

Name of business

RepID **or** GroupID G **or** Business Number

Part 6 – Signature

You or **your legal representative** (for example, a person with your power of attorney, your guardian, or an executor or administrator of the taxpayer's estate) must sign and date this form. If you are signing and dating this form as the legal representative, tick the box below. If two or more legal representatives are acting jointly on the taxpayer's behalf, the signature of each legal representative is required. Also, send us a copy of the legal document that identifies you as the legal representative, if you have not already done so.

By signing and dating this form, you authorize us to deal with the individual, group, or business identified in **Part 2** or **Part 3** and/or to cancel the consents shown in **Part 5**.

We will process this form only if you provided your **account number** and it is **signed and dated** by you or your legal representative. This form must be received by the CRA **within six months** of its signature date. If not, it will not be processed.

☐ **I am not the taxpayer named in part 1 of this form**. However, I have power of attorney for this taxpayer, I am the legal guardian of this taxpayer, or I am the executor/administrator of this taxpayer's estate, or I am the trustee or custodian of this trust account.

KRISHNA BROWN
Print name of taxpayer or legal representative

2013/05/23
Date of signature

X
Taxpayer or legal representative signature

Privacy Act Personal Information Bank number CRA PPU 005 and CRA PPU 175

Canada Revenue Agency / Agence du revenu du Canada

Statement of Business or Professional Activities

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Identification

Your name BROWN, KRISHNA	Your social insurance number 726 130 446
Business Name KRISHNA BROWN	Account Number (15 characters) RT
Business address Number Street, P.O. Box 7382 L&A ROAD Apartment or suite	
City VERNON Province or territory BC Postal code V1B 3S6	
Fiscal Period From: Year/Month/Day 2012/01/01 to: Year/Month/Day 2012/12/31 CALENDAR YEAR	Was 2012 your last year of business? Yes [ ] No [X]
Main product or service GROUP FITNESS COORDINATOR	Industry code (see the appendix in Guide T4002) 711329
Tax shelter identification number TS / Partnership Business Number (9 digits)	Your percentage of the partnership 100.0000 %

Name and address of person or firm preparing this form
AGAR SCHNEIDER & LETT
3105 37TH AVENUE
VERNON, British Columbia V1T2Y3

Part 1 – Business income

2. [X] If you have business income, tick this box and complete this part. **Do not complete parts 1 and 2 on the same form.**

Type of income [X] Business [ ] Commission

Gross sales, commissions, or fees (including GST/HST collected or collectible)	18,613.00	
Income reported on T4 slips		
Income reported on T4A slips		
	18,613.00	A
Minus PST, GST/HST, returns, allowances, discounts included in sales, and GST/HST adjustments		(i)
Subtotal (line A **minus** line (i))	18,613.00	B
(For those using the Quick Method) Government assistance calculated as follows: GST/HST collected or collectible on sales, commissions and fees eligible for the Quick Method		(ii)
GST/HST remitted, calculated on (sales, commissions and fees eligible for the Quick Method plus GST/HST collected or collectible) multiplied by Quick Method remittance rate		(iii)
Subtotal (line (ii) minus line (iii))		(iv)
Adjusted gross sales (line B **plus** line (iv)) (enter this amount on line 8000 in Part 3 below)	18,613.00	C

Part 2 – Professional income

3. [ ] If you have professional income, tick this box and complete this part. **Do not complete parts 1 and 2 on the same form.**

Gross professional fees including work-in-progress (WIP) and GST/HST collected or collectible		
Income reported on T4A slips		
		D
Minus PST, GST/HST included in the fees, GST/HST adjustments and WIP at the end of the year if you elect to exclude it (see Chapter 2 of the guide)		(i)
Subtotal (line D **minus** line (i))		E
(For those using the Quick Method) Government assistance calculated as follows: GST/HST collected or collectible on professional fees eligible for the Quick Method		(ii)
GST/HST remitted, calculated on (professional fees eligible for the Quick Method plus GST/HST collected or collectible) multiplied by Quick Method remittance rate		(iii)
Subtotal (line (ii) minus line (iii))		(iv)
Work-in-progress (WIP), start of the year, per election to exclude WIP (see Chapter 2 of Guide T4002)		(v)
Adjusted professional fees (line E **plus** lines (iv) and (v)) (enter this amount on line 8000 in Part 3 below)		F

On the basis of information provided, we have compiled this statement. We have not performed an audit or a review engagement on this statements, and accordingly we express no assurance thereon. Readers are cautioned that this statements may not be appropriate for their purposes.

Part 3 – Gross business or professional income

Adjusted gross sales (from line C in Part 1) or adjusted professional fees (from line F in Part 2)		8000	18,613.00 G
Plus			
Reserves deducted last year	8290		
Recapture of CCA and CEC			
Other income	8230		
Total of the above lines			H
Gross business or professional income (line G **plus** line H)		8299	18,613.00

Enter this amount on the appropriate line of your income tax and benefit return: business on line 162, professional on line 164, or commission on line 166

If GST/HST has been remitted and/or an input tax credit has been claimed, do not include GST/HST in the calculation of cost of goods sold, expenses or net income (loss) in parts 4 to 6.

Part 4 – Cost of goods sold and gross profit

If you have business income, complete this part. Enter only the business part of the costs.

Gross business income from line 8299 in Part 3			18,613.00 I
Opening inventory (include raw materials, goods in process, and finished goods)	8300		
Purchases during the year (net of returns, allowances, and discounts)	8320		
Direct wage costs	8340		
Subcontracts	8360		
Other costs	8450		
Total of the above five lines			
Minus			
Closing inventory (include raw materials, goods in process, and finished goods)	8500		
Cost of goods sold	8518		J
Gross profit (line I **minus** line J)		8519	18,613.00

On the basis of information provided, we have compiled this statement. We have not performed an audit or a review engagement on this statements, and accordingly we express no assurance thereon. Readers are cautioned that this statements may not be appropriate for their purposes.

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Part 5 – Net income (loss) before adjustments

Gross profit from line 8519 in Part 4 above, or gross income from line 8299 in Part 3					18,613.00	K
Expenses (enter only the business part)						
Advertising			8521	664.25		
Meals and entertainment	1,475.74	x 50%				
Meals and entertainment (long haul truck drivers)		x 80%	8523	737.87		
Bad debts			8590			
Insurance			8690	160.00		
Interest			8710			
Business tax, fees, licences, dues, memberships, and subscriptions			8760			
Office expenses			8810	973.53		
Supplies			8811	664.44		
Legal, accounting, and other professional fees			8860	340.60		
Management and administration fees			8871			
Rent			8910	2,397.00		
Maintenance and repairs			8960			
Salaries, wages, and benefits (including employer's contributions)			9060	943.00		
Property taxes			9180			
Travel (including transportation fees, accomodations, and allowable part of meals)			9200			
Telephone and utilities			9220	1,149.21		
Fuel costs (except for motor vehicles)			9224			
Delivery, freight, and express			9275			
Motor vehicle expenses (not including CCA) (see Chart A) - from worksheet						
Motor vehicle expenses (not including CCA) (see Chart A) - other		636.00	9281	636.00		
Allowance on eligible capital property			9935			
Capital cost allowance (from Area A)			9936			
EDUCATION		101.80				
BANK CHARGES		164.85				
Other expenses	=	266.65	9270	266.65		
		Total business expenses	9368	8,932.55	8,932.55	L
Net income (loss) before adjustments (line K **minus** line L)				9369	9,680.45	

Part 6 – Your net Income (loss)

Your share of the amount on line 9369 in Part 5 or the amount from slip T5013 or T5013A		9,680.45	M		
Plus : GST/HST rebate for partners received in the year (see Chapter 3)	9974		N		
Total (line M **plus** line N)		9,680.45		9,680.45	O
Minus - Other amounts deductible from your share of net partnership income (loss) (from the chart on page 3)			9943		P
Net income (loss) after adjustments (line O **minus** line P)				9,680.45	Q
Minus - Business-use-of-home expenses (from the chart on page 3)			9945	1,621.36	R
Your net income (loss) (line Q **minus** line R)			9946	8,059.09	

Enter this amount on the appropriate line of your income tax and benefit return: business on line 135, professional on line 137, or commission on line 139

On the basis of information provided, we have compiled this statement. We have not performed an audit or a review engagement on this statements, and accordingly we express no assurance thereon. Readers are cautioned that this statements may not be appropriate for their purposes.

Other amounts deductible from your share of net partnership income (loss)

Claim expenses you incurred that were not included in the partnership statement of income and expenses, and for which the partnership did not reimburse you.

Other amounts deductible from your share of the partnership (total of the above lines) (enter this amount on line 9943, in Part 6)	

Calculation of business-use-of-home expenses

Area of home used for business	(A) 130		
Total area of home	(B) 1,130		
Heat		891 00	
Electricity		1,761 41	
Insurance			
Maintenance			
Mortgage interest		9,898 34	
Property taxes		1,200 00	
WATER			
INTERNET			
GARBAGE		342 59	
	Subtotal	14,093 34	
Minus - Personal-use part		12,471 98	
	Subtotal	1,621 36	
Plus - Amount carried forward from previous year			
	Subtotal	1,621 36	1
Minus - Net income (loss) after adjustments (from line Q in Part 6) (If negative, enter "0")		9,680 45	2
Business-use-of-home expenses available to carry forward (line 1 **minus** line 2) (If negative, enter "0")			
Allowable claim (the lesser of amounts 1 or 2 above) (Enter this amount on line 9945 in Part 6)		1,621 36	3

Details of other partners

Partner's first name	Last name	% of partnership %
Address:		$ share
Partner's first name	Last name	% of partnership %
Address:		$ share
Partner's first name	Last name	% of partnership %
Address:		$ share
Partner's first name	Last name	% of partnership %
Address:		$ share
Partner's first name	Last name	% of partnership %
Address:		$ share

Details of equity

Total business liabilities	9931	
Drawings in 2012	9932	
Capital contributions in 2012	9933	

On the basis of information provided, we have compiled this statement. We have not performed an audit or a review engagement on this statements, and accordingly we express no assurance thereon. Readers are cautioned that this statements may not be appropriate for their purposes.

Date	Name	Social insurance No.	Tax year	Tax centre
June 3, 2013	KRISHNA BROWN	726 130 446	2012	Surrey BC V3T 5E1

Summary

0044629

Line	Description		$ Amount
150	Total income		17,075
	Deductions from total income		648
236	Net income		16,427
260	Taxable income		16,427
350	Total federal non-refundable tax credits		2,012
6150	**Total British Columbia non-refundable tax credits**		**650**
420	Net federal tax		451.08
421	CPP contributions payable		797.84
435	Total payable		1,248.92
437	Total income tax deducted		1,680.92
482	Total credits		1,680.92
	(Total payable minus Total credits)		432.00
	Balance from this assessment	CR	432.00
	Direct deposit	**CR**	**432.00**

Andrew Treusch
Commissioner of Revenue

Date	Name	Social insurance No.	Tax year	Tax centre
June 3, 2013	KRISHNA BROWN	726 130 446	2012	Surrey BC V3T 5E1

Your 2013 RRSP Deduction Limit Statement

The back of this notice contains important information. Amounts marked with an asterisk (*) cannot be less than zero.

RRSP deduction limit for 2012		$14,796	
Minus: Allowable RRSP contributions deducted for 2012		$0	
Unused RRSP deduction limit at the end of 2012		$14,796	
Plus: 18% of 2012 earned income of $17,074 = (max. $23,820)	$3,073		
Minus: 2012 pension adjustment	$0	$3,073	*
		$17,869	
Minus: 2013 net past service pension adjustment		$0	
Plus: 2013 pension adjustment reversal		$0	
Your **RRSP deduction limit for 2013**		$17,869	*(A)

You have $0 **(B)** of **unused RRSP contributions** available for 2013. If this amount is more than amount **(A)** above, you may have to pay a tax on the excess contributions.

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