

Calgary's Choice Tax Services

COVID-19 Employment Home Office Checklist

Does your employment normally require you to work from home? YES ___ NO ___

If yes, then please complete our regular 'Employment Expense' checklist (not this one)

ONLY complete this checklist if you worked from home at any time in 2020 due *solely* to COVID

(ie. you don't normally work from home)

If you began working from home due to COVID on a date other than March 16, 2020 (when the work-from-home order came into effect), please Indicate the date _____

Did you work at home from the above date through Dec 31, 2020 inclusive? YES ___ NO ___

If NO, what was the 2020 date that you ceased working from home? _____

Do you rent your residence? YES ___ NO ___

If YES, complete PART A, if NO, complete PART B

PART A: (for employees that RENT their residence)

Total Sq. ft of residence: _____

Did you have a dedicated office in your residence? YES ___ NO ___

If YES, Total Sq ft of office: _____

If NO, what room in your residence did you use? _____

What is Sq ft of that room: _____

How many hours per day did you work in that space? _____ / day

How many days per week did you work in that space? _____ / week

How much rent do you pay per month? \$ _____

What is the total you paid in utilities, including heat, electricity, water (from date you began working from home, until Dec 31 or date you ceased working from home)? \$ _____. How much was internet for same period? _____

***If we determine it is financially beneficial for you, we may ask you to inquire with your employer as to whether you can obtain the COVID, simplified T2200 form (if we determine a deduction of more than the \$400 max, no form required amount), signed and completed? Once we have completed our calculations, we will let you know right away.

PART B: (for employees that OWN their residence)

Mortgage interest is not an eligible home office expense for employees

What is the total you paid in utilities (from date you began working from home, until Dec 31 or date you ceased working from home?)

Heat \$ _____ Electricity \$ _____

Internet \$ _____

House Insurance (commission employees only) \$ _____

Property Taxes (commission employees only) \$ _____

***If we determine it is financially beneficial for you, we may ask you to inquire with your employer as to whether you can obtain the COVID, simplified T2200 form (if we determine a deduction of more than the \$400 max, no form required amount), signed and completed? Once we have completed our calculations, we will let you know right away.

PART C: Other Home Office Expenses

Did you have to purchase any furniture or other office equipment, that you were not reimbursed for, that was necessary to purchase in order to work from home?

Item: _____ Amount: \$ _____

Item: _____ Amount: \$ _____

Item: _____ Amount: \$ _____

Were any renovations necessary for your home office to enable you to work from home?

Repair: _____ Amount: \$ _____

Repair: _____ Amount: \$ _____

In order to claim any "other" home office expenses, your employer will be required to sign the simplified, COVID, T2200 form.

"Let us worry about your taxes, so you don't have to"

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