

## **Declaration of Conditions of Employment**

The **employer** must complete this form and give it to the employee for the employee to be able to deduct employment expenses from their income.

The **employee** does not have to file this form with their return, but must keep it in case the Canada Revenue Agency (CRA) asks to see it. For details about claiming employment expenses, see the following publications:

- Guide T4044, Employment Expenses
- Archived Interpretation Bulletin IT-352R2, Employee's Expenses, Including Work Space in Home Expenses
- Archived Interpretation Bulletin IT-522R, Vehicle, Travel and Sales Expenses of Employees

## Part A – Employee information

La	ast name	Firs	t name	Tax year
Er	nployer address			
Jc	b title and brief description of duties			
Pa	art B – Conditions of employm	ent		
1.			xpenses while carrying out the duties of a reimbursement in respect of some or	🗌 Yes 🗌 No
	If <b>no</b> , the employee is <b>not</b> entitled to answer any of the other questions		enses, and you are not required to	
2.	Enter the period(s) of employment du	uring the year:		
	Year Month Day From	Year Month o	Day	
	If there was a break in employment,	specify the dates:		
3.	Did you pay this employee wholly or contracts negotiated?	partly by commission a	ccording to the volume of sales made or	🗌 Yes 🗌 No
	If <b>yes</b> , enter the commissions paid contracts negotiated	\$ a	nd the type of goods sold or	
	Is there a business development acc which the employee's employment e		mmission income account available from nbursed?	🗌 Yes 🗌 No
	If yes, is the commission income from	n this account included	in box 14 of the T4 slip?	🗌 Yes 🗌 No
4.	Did you require this employee to pay reimbursement?	for expenses for which	they <b>did</b> or <b>will</b> receive a	🗌 Yes 🗌 No
	If <b>yes</b> , enter the amount and type of	expenses that were:		Included on
		Amount	Type of expense	T4 slip
	received upon proof of payment	\$		🗌 Yes 🗌 No
	<ul> <li>charged to the employer, such as credit card charges</li> </ul>	\$		🗌 Yes 🗌 No

5.	Did this employee's contract of employment require them to:	
	rent an office away from your place of business?	🗌 Yes 🗌 No
	employ a substitute or an assistant?	☐ Yes ☐ No
	pay for supplies that the employee used directly in their work?	☐ Yes ☐ No
	• pay for the use of a cell phone?	Yes No
	Did you or will you reimburse this employee for any of these expenses?	🗌 Yes 🗌 No
	If <b>yes</b> , enter the type of expense and amount you did or will reimburse:	Included on
	Amount Type of expense	T4 slip
	\$	🗌 Yes 🗌 No
	\$	🗌 Yes 🗌 No
	\$	🗌 Yes 🗌 No
6.	Did you require the employee to use a part of their home for work?	🗌 Yes 🗌 No
	<b>Note</b> : This does not have to be part of the employee's employment contract, and may be a written or verbal agreement between you and your employee.	
	If <b>yes</b> , about what percentage of the employee's duties of employment were performed at their home office?%	
	Did you or will you reimburse this employee for any of their work-space-in-the-home expenses?	🗌 Yes 🗌 No
	If yes, enter the type of expense and amount you did or will reimburse:	Included on
	Amount Type of expense	T4 slip
	\$	🗌 Yes 🗌 No
	\$	🗌 Yes 🗌 No
	\$	🗌 Yes 🗌 No
lf t	he employee only had home office expenses, skip to "Employer declaration" section.	
7.	Did you normally require this employee to travel to locations that were not your place of business or between different locations of your places of business, during the course of performing their employment duties?	🗌 Yes 🗌 No
	If <b>yes</b> , what was the employee's area of travel (be specific)?	
8.	Did you require this employee to be away for at least 12 <b>consecutive</b> hours from the municipality and metropolitan area (if there is one) of your business where the employee normally reported for work?	🗌 Yes 🗌 No
	If yes, how often?	
9.	Did this employee receive or were they entitled to receive a motor vehicle allowance?	🗌 Yes 🗌 No
	If <b>yes</b> , enter:	
	• the amount received as a fixed allowance, such as a flat monthly allowance \$	
	the per kilometre (km) rate used (\$/km) and the amount received \$	
	• the amount of the allowance that was included on the employee's T4 slip \$	
	Did this employee have the use of a company vehicle?	🗌 Yes 🗌 No
	Was the employee responsible for any of the expenses incurred for the company vehicle?	
	was the employee responsible for any of the expenses incurred for the company venicle:	🔄 Yes 🔛 No
	If yes, enter the amount and type of expenses:	Yes No
		🗌 Yes 🔝 No
	If yes, enter the amount and type of expenses: Amount Type of expense	∐ Yes ∐ No
	If yes, enter the amount and type of expenses: Amount Type of expense	∐ Yes ∐ No

## Protected B when completed

10.	Did you require this employee to pay other expenses for which they did <b>not</b> receive any allowance or reimbursement?	ר 🗌	∕es 🗌 No
	If <b>yes</b> , enter the type(s) of expenses:		
11.	Did this employee work for you as a tradesperson?	<u>ר</u> א	′es 🗌 No
	If <b>yes</b> , did you require this employee, as a condition of employment, to buy and provide tools that were used directly in their work?		′es 🗌 No
	If <b>yes</b> , do all of the tools on the list given to you by the employee satisfy this condition?	ר 🗌	∕es 🗌 No
	Please sign and date the list.		
12.	Did this employee work for you as an apprentice mechanic?	ר 🗌 ו	∕es 🗌 No
	If <b>yes</b> , was this employee registered in a program established under the laws of Canada, or of a province or territory, that leads to a designation under those laws as a mechanic licensed to repair self-propelled motorized vehicles?	ı []	⁄es 🗌 No
	Did you require this apprentice mechanic, as a condition of employment, to buy and provide tools that were used directly in their work?	ו 🗌	∕es 🗌 No
	If <b>yes</b> , are all of the tools on the list given to you by the employee used in connection with the employee's work for you as an apprentice mechanic in the program described in this question?	ı ا	∕es 🗌 No
	Please sign and date the list.		
13.	Did this employee work for you in forestry operations?	ר 🗌	′es 🗌 No
	Did you require the employee, as a condition of employment, to provide a power saw (including a chain saw or tree trimmer)?	ר []	∕es 🗌 No

## **Employer declaration**

I certify that the information given on this form is, to the best of my knowledge, correct and complete.

Note: Enter the name and telephone number of the authorized person in case the CRA needs to call to verify information.

Name of employer		Name and title of authorized person	
Date	ext. Telephone number	Signature of employer or auth	norized person *
The CRA will accept a	n electronic signature if it is applied in	accordance with the guidance specified b	by the CRA.
	n electronic signature if it is applied in omplete this section if the CRA asks th		by the CRA.

See the privacy notice on your return.