



The T2 Short Return

Who can use the *T2 Short Return*?

The T2 Short Return is a simpler version of the *T2 Corporation Income Tax Return*. There are two categories of corporations that are eligible to use this return:

- You can use this return if the corporation meets **all** of the following conditions:
 - it is a Canadian-controlled private corporation throughout the tax year;
 - it has either a nil net income for income tax purposes this year or a loss this year;
 - it has a permanent establishment in only one province or territory;
 - it is not claiming any refundable tax credits (other than a refund of instalments paid);
 - it did not receive or pay out any taxable dividends.
- You can also use this return for a tax-exempt corporation (such as a non-profit organization) that has a permanent establishment in only one province or territory.

If the corporation does not fit into either of the above categories, please file a regular *T2 Corporation Income Tax Return*.

Except for Quebec, Ontario, and Alberta, the T2 Short Return also serves as a provincial or territorial income tax return.

What should you attach to the *T2 Short Return*?

There are three things you have to attach to this return:

- Schedule 100, *Balance Sheet Information*, showing the financial position of the corporation at the end of the tax year;
- Schedule 125, *Income Statement Information*, showing the corporation's income and expenses for the year (if the corporation did not earn any income or incur any expenses, simply state "no income" or "no expenses"); and
- Schedule 141, *Notes Checklist*, for any notes to the financial statement information and to indicate the involvement of an accountant.

Depending on the circumstances, you may have to attach other forms or schedules. For more information, see page 2 of the *T2 Short Return*. For your convenience, this package includes the short version of Schedule 1, a Schedule 8, and a Schedule 50.

Note

If you need help completing this return, call our Business Enquiries line at 1-800-959-5525. If you need a copy of the *T2 Corporation – Income Tax Guide* or other schedules, visit our Web site at www.cra.gc.ca/forms or call 1-800-959-2221.



NET INCOME (LOSS) FOR INCOME TAX PURPOSES

Corporation's name, Business Number, Tax year-end (Year, Month, Day)

- This schedule lets you reconcile the corporation's net income (loss) as reported on the financial statements and its net income (loss) for tax purposes.
Please give us the applicable details in the identification area, and complete the applicable lines that contain a numbered black box. Report amounts according to Generally Accepted Accounting Principles (GAAP).
For more information, see the T2 Corporation - Income Tax Guide.

Net income (loss) after taxes and extraordinary items per financial statements ... A

Additions:

Table with 2 columns: Description and Box Number (101-125). Items include Provision for income taxes, Amortization of tangible/intangible assets, Recapture of capital cost allowance, etc.

Other additions:

Table with 2 columns: Box Number (600-604) and Description lines.

Total of lines 101 to 294 ... 500 ... B

Subtotal (amount A plus amount B) ... C

Deductions:

Table with 2 columns: Description and Box Number (304-417). Items include Bad debt, Book income of joint venture, Equity in income from subsidiaries, etc.

Other deductions:

Table with 2 columns: Box Number (700-704) and Description lines.

Total of lines 304 to 394 ... 510 ... D

Nil net income or (loss) for income tax purposes - amount C minus amount D ... E

Enter amount E on line 300 on page 1 of the T2 Short return. If the amount on line E is a positive amount, please file a regular T2 Corporation - Income Tax Return.



CAPITAL COST ALLOWANCE (CCA) (2006 and later tax years)

Name of corporation	Business Number	Taxation year end Year Month Day
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For more information, see the section called "Capital Cost Allowance" in the *T2 Corporation Income Tax Guide*.

Is the corporation electing under Regulation 1101(5q)? **101** 1 Yes 2 No

1 Class number	2 Undepreciated capital cost at the beginning of the year (undepreciated capital cost at the end of the year from column 13 of last year's CCA schedule)	3 Cost of acquisitions during the year (new property must be available for use) See note 1 below	4 Net adjustments (show negative amounts in brackets) See note 2 below	5 Proceeds of dispositions during the year (amount not to exceed the capital cost)	6 Undepreciated capital cost (column 2 plus column 3 plus or minus column 4 minus column 5)	7 50% rule (1/2 of the amount, if any, by which the net cost of acquisitions exceeds column 5) See note 3 below	8 Reduced undepreciated capital cost (column 6 minus column 7)	9 CCA rate %	10 Recapture of capital cost allowance	11 Terminal loss	12 Capital cost allowance (column 8 multiplied by column 9; or a lower amount) See note 4 below	13 Undepreciated capital cost at the end of the year (column 6 minus column 12)
200	201	203	205	207		211		212	213	215	217	220
1.												
2.												
3.												
4.												
5.												
6.												
7.												
8.												
9.												
10.												

Note 1. Include any property acquired in previous years that has now become available for use. This property would have been previously excluded from column 3. List separately any acquisitions that are not subject to the 50% rule, see Regulation 1100(2) and (2.2).
Note 2. Include amounts transferred under section 85, or on amalgamation and winding-up of a subsidiary. See the *T2 Corporation Income Tax Guide* for other examples of adjustments to include in column 4.
Note 3. The net cost of acquisitions is the cost of acquisitions (column 3) plus or minus certain adjustments from column 4. For exceptions to the 50% rule, see Interpretation Bulletin IT-285, *Capital Cost Allowance – General Comments*.
Note 4. If the tax year is shorter than 365 days, prorate the CCA claim. Some classes of property do not have to be prorated. See the *T2 Corporation Income Tax Guide* for more information.

Totals

Enter the total of column 10 on line 107 of Schedule 1.
 Enter the total of column 11 on line 404 of Schedule 1.
 Enter the total of column 12 on line 403 of Schedule 1.



SHAREHOLDER INFORMATION (2006 and later taxation years)

Name of corporation	Business Number	Taxation year-end Year Month Day
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All private corporations must complete this schedule for any shareholder who holds 10% or more of the corporation's common and/or preferred shares.

Provide only one number per shareholder					
Name of shareholder (after name, indicate in brackets if the shareholder is a corporation, partnership, individual, or trust)	Business Number (If a corporation is not registered, enter "NR")	Social insurance number	Trust number	Percentage common shares	Percentage preferred shares
100	200	300	350	400	500
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Attachments

Financial statement information – Use GIFI schedules 100, 125, and 141.

Schedules – Depending on the circumstances, you may need to attach some schedules to this return. Answer the following questions.
For each **yes** response, attach the schedule that applies to the T2 Short return.

	Yes	Schedule
Is the net income/loss shown on the financial statements different from the nil net income or net loss for income tax purposes?	201 <input type="checkbox"/>	1
(i) Is the corporation including a schedule to show the continuity of losses? or		
(ii) Do you want to carry back the current year's loss to a previous tax year?	204 <input type="checkbox"/>	4
Has the corporation realized any capital gains or incurred any capital losses during the tax year?	206 <input type="checkbox"/>	6
Does the corporation have any property that is eligible for capital cost allowance?	208 <input type="checkbox"/>	8
Is the corporation related to any other corporations?	150 <input type="checkbox"/>	9
Does the corporation have any property that is eligible capital property?	210 <input type="checkbox"/>	10
Has the corporation had any transactions, including section 85 transfers, with its shareholders, officers, or employees, other than transactions in the ordinary course of business? Exclude non-arm's-length transactions with non-residents.	162 <input type="checkbox"/>	11
Is the corporation claiming reserves of any kind?	213 <input type="checkbox"/>	13
Has the corporation paid any royalties, management fees, or other similar payments to residents of Canada?	164 <input type="checkbox"/>	14
Is the corporation claiming a deduction for payments to a type of employee benefit plan?	165 <input type="checkbox"/>	15
Is the corporation an associated Canadian-controlled private corporation?	160 <input type="checkbox"/>	23
Does the corporation (private corporations only) have any shareholders who own 10% or more of the corporation's common and/or preferred shares?	173 <input type="checkbox"/>	50

Additional information

Is the corporation inactive? **280** 1 Yes 2 No

Has the major business activity changed since the last return was filed? (enter **yes** for first-time filers) **281** 1 Yes 2 No

What is the corporation's major business activity? **282** _____
(only complete if **yes** was entered at line 281)

If the major activity involves the resale of goods, indicate whether it is wholesale or retail. **283** 1 Wholesale 2 Retail

Specify the principal product(s) mined, manufactured, sold, constructed, or services provided, giving the approximate percentage of the total revenue that each product or service represents.

284 _____	285 _____ %
286 _____	287 _____ %
288 _____	289 _____ %

Certification

I, **950** _____ **951** _____ **954** _____,
(Last name in block letters) (First name in block letters) (Position, office, or rank)

am an authorized signing officer of the corporation. I certify that I have examined this return, including accompanying schedules and statements, and that the information given on this return is, to the best of my knowledge, correct and complete. I further certify that the method of calculating income for this tax year is consistent with that of the previous year except as specifically disclosed in a statement attached to this return.

955 _____ **956** _____
(Date (yyyy/mm/dd)) (Signature of an authorized signing officer of the corporation) (Telephone number)

Is the contact person the same as the authorized signing officer? If **no**, complete the information below **957** 1 Yes 2 No

958 _____ **959** _____
(Name in block letters) (Telephone number)

Language of correspondence – Langue de correspondance

990 Indicate the language of correspondence by entering 1 for English or 2 for French.
Indiquez la langue de correspondance en inscrivant 1 pour anglais ou 2 pour français.