



SHAWINIGAN QC G9P 5H9

2015

### Notice details

Social insurance number	483 444 469
Tax year	2015
Date issued	June 09, 2016
Tax centre	Shawinigan QC G9P 5H9

JR94W72S

1255 (U)

DEIRDRE A MOORE  
1244 LAMPMAN CRES  
OTTAWA ON K2C 1P8

## Notice of assessment

We assessed your 2015 income tax and benefit return and calculated your balance.

You need to pay **\$6,098.36**.

To avoid additional interest charges please pay by **June 29, 2016**.

Thank you,

Andrew Treusch  
Commissioner of Revenue

### Account summary

You have an amount due. If you already paid the full amount, please ignore this request.

**Amount due:** \$6,098.36

**Pay by:** June 29, 2016

### Payment options

You can:

- pay online
- pay at your financial institution

For more information, see page 5.

## Explanation of changes and other important information

We changed your RRSP/PRPP deduction from \$16,500 to \$13,889, which is the maximum allowed. For more information, see Guide T4040, RRSPs and Other Registered Plans for Retirement.

Based on the employment income you reported, we gave you a federal Canada employment amount of \$1,146. For more information, see the explanation for line 363 in the General Income Tax and Benefit Guide.

Because of a change to your taxable income or your federal non-refundable tax credits, we changed your family tax cut from \$1,200.59 to \$1,278.99.

Because of a change to your taxable income and your Ontario non-refundable tax credits, we revised your Ontario tax from \$14,005.00 to \$19,631.34. Your total payable has also changed.

We gave you a CPP overpayment as a credit against your total payable. If needed, we changed your federal and Ontario amounts for CPP or QPP contributions through employment.

We changed your Ontario dividend tax credit to \$4,192.69. This tax credit is a percentage of the taxable amount of dividends from taxable Canadian corporations.

This assessment includes Ontario tax credits of \$110.20 financed by the Government of Ontario.

We recalculated your federal non-refundable tax credits and changed your total on line 350 from \$2,646 to \$2,806.

We recalculated your Ontario non-refundable tax credits and changed your total to \$551.

Your balance due includes arrears interest compounded daily at a set rate. We calculated this interest from the due date of your balance to the date of this notice.

You can avoid more interest if you pay the balance due by June 29, 2016.



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

Please answer the following question:

If you own or hold specified foreign property where the total cost amount of all such property, at any time in 2015, was more than CAN\$100,000?  
See "Specified foreign property" in the guide for more information. . . . .  266 Yes  1 No  2

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

If you had dealings with a non-resident trust or corporation in 2015, see "Foreign income" in the guide.

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

**Total income**

Employment income (box 14 of all T4 slips)	101	17 874 87
Commissions included on line 101 (box 42 of all T4 slips)	102	
Wage loss replacement contributions (see line 101 in the guide)	103	
Other employment income	104 +	
Old age security pension (box 18 of the T4A(OAS) slip)	113 +	
CPP or QPP benefits (box 20 of the T4A(P) slip)	114 +	
Disability benefits included on line 114 (box 16 of the T4A(P) slip)	152	
Other pensions and superannuation	115 +	
Elected split-pension amount (attach Form T1032)	116 +	
Universal child care benefit (UCCB)	117 +	1443 02
UCCB amount designated to a dependant	185	
Employment insurance and other benefits (box 14 of the T4E slip)	119 +	
Taxable amount of dividends (eligible and other than eligible) from taxable Canadian corporations (attach Schedule 4)	120 +	93 151 02
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	Net 126 +
Taxable capital gains (attach Schedule 3)		127 +
Support payments received	Total 156	Taxable amount 128 +
RRSP income (from all T4RSP slips)		129 + 82 603 52
Other income	Specify:	130 +
Self-employment income		
Business income	Gross 162	Net 135 +
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 of the T5007 slip)	144	
Social assistance payments	145 +	
Net federal supplements (box 21 of 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 = 195 109 50

*forced to cash-in RSP to buy a new home for children at J. Terrence May*

**Attach your Schedule 1 (federal tax) and Form 428 (provincial or territorial tax) here. Attach only the other documents (schedules, information slips, forms, or receipts) requested in the guide to support any claim or deduction.**

Keep all other supporting documents.

**Net income**

Enter your **total income** from line 150. 150 195 109 50

Pension adjustment (box 52 of all T4 slips and box 034 of all T4A slips)	206	
Registered pension plan deduction (box 20 of all T4 slips and box 032 of all T4A slips)	207	
RRSP/pooled registered pension plan (PRPP) deduction (see Schedule 7 and attach receipts)	208 +	<u>16 500 00</u>
PRPP employer contributions (amount from your PRPP contribution receipts)	205	
Deduction for elected split-pension amount (attach Form T1032)	210 +	
Annual union, professional, or like dues (box 44 of all T4 slips, and receipts)	212 +	
Universal child care benefit repayment (box 12 of all RC62 slips)	213 +	
Child care expenses (attach Form T778)	214 +	
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 +
Deduction for CPP or QPP contributions on self-employment and other earnings (attach Schedule 8 or Form RC381, whichever applies)		222 +
Exploration and development expenses (attach Form T1229)		224 +
Other employment expenses		229 +
Energy residence deduction		231 +
Other deductions Specify:		232 +
Add lines 207, 208, 210 to 224, 229, 231, and 232.		233 =
Line 150 minus line 233 (if negative, enter "0")	This is your <b>net income before adjustments.</b> 234 = <u>178 609 50</u>	
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")	This is your <b>net income.</b> 236 = <span style="border: 1px solid black; padding: 2px;"><u>178 609 50</u></span>	

**Taxable income**

Canadian Forces personnel and police deduction (box 43 of all T4 slips)	244	
Employee home relocation loan deduction (box 37 of 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 <b>taxable income.</b> 260 = <span style="border: 1px solid black; padding: 2px;"><u>178 609 50</u></span>	

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

Net federal tax: enter the amount from line 64 of Schedule 1 (attach Schedule 1, even if the result is "0") 420 26 300 00

CPP contributions payable on self-employment and other earnings (attach Schedule 8 or Form RC381, whichever applies) 421 +

Employment insurance premiums payable on self-employment and other eligible earnings (attach Schedule 13) 430 +

Provincial benefits repayment (amount from line 235) 422 +

Provincial or territorial tax (attach Form 428, even if the result is "0") 428 + 14 005 58

Add lines 420, 421, 430, 422, and 428. This is your total payable. 435 = 40 829 74

Total income tax deducted 437 26 145 39

Refundable Quebec 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 of all T3 slips) 456 +

Employee and partner GST/HST rebate (attach Form GST370) 457 +

Children's fitness tax credit Eligible fees 458 2000 00 x 15% = 459 + 300 00

Tax paid by instalments 476 + 3 732 00

Provincial or territorial credits (attach Form 479 if it applies) 479 + 110 20

Add lines 437 to 479. These are your total credits. 482 = 32 205 59

Line 435 minus line 482 This is your refund or balance owing. = 10 522 40

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.

Refund 484

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

Balance owing 485 10 522 40

For more information on how to make your payment, see line 485 in the guide or go to [www.cra.gc.ca/payments](http://www.cra.gc.ca/payments). Your payment is due no later than April 30, 2016.

Direct deposit - Enrol or update (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.

To enrol for direct deposit, to update your banking information, or to request that all of your CRA payments you may be receiving or owed be deposited into the same account as your T1 refund, complete lines 460, 461, and 462 below

By providing my banking information I authorize the Receiver General to deposit in the bank account number shown below any amounts payable to me by the CRA, until otherwise notified by me. I understand that this authorization will replace all of my previous direct deposit authorizations.

Branch number 460 (5 digits) Institution number 461 (3 digits) Account number 462 (maximum 12 digits)

Ontario Ontario opportunities fund

You can help reduce Ontario's debt by completing this area to donate some or all of your 2015 refund to the Ontario opportunities fund. Please see the provincial pages for details.

Amount from line 484 above		1
Your donation to the Ontario opportunities fund	465	2
Net refund (line 1 minus line 2)	466	3

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

Sign here \_\_\_\_\_

It is a serious offence to make a false return.

Telephone \_\_\_\_\_ Date \_\_\_\_\_

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

Name of preparer: \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 EFILE number (if applicable): 489

Personal information is collected under the Income Tax Act to administer tax, benefits, and related programs. It may also be used for any purpose related to the administration or enforcement of the Act such as audit, compliance and the payment of debts owed to the Crown. It may be shared or verified with other federal, provincial/territorial government institutions to the extent authorized by law. Failure to provide this information may result in interest payable, penalties or other actions. Under the Privacy Act, individuals have the right to access their personal information and request correction if there are errors or omissions. Refer to Info Source [www.cra.gc.ca/gncy/tp/nfsrc/nfsrc-eng.html](http://www.cra.gc.ca/gncy/tp/nfsrc/nfsrc-eng.html), personal information bank CRA PPU C25.

Do not use this area 487 488 486

Complete this schedule and **attach** a copy to your return.  
For more information, see the related line in the guide.

Personal amount	claim \$11,327	300	11,327	1
Amount (if you were born in 1950 or earlier) (use the federal worksheet)	(maximum \$7,033)	301 +		2
Spouse or common-law partner amount (attach Schedule 5)		303 +		3
Amount for an eligible dependant (attach Schedule 5)		305 +		4
Family caregiver amount for children under 18 years of age				
Number of children born for whom you are claiming family caregiver amount	352 2 × \$2,093 =	367 +	4,186	5
Amount for infirm dependants age 18 or older (attach Schedule 5)		306 +		6
Employer or QPP contributions:				
Employment from box 16 and box 17 of all T4 slips (attach Schedule 8 or Form RC381, whichever applies)		308 +	791.76	7
Self-employment and other earnings (attach Schedule 8 or Form RC381, whichever applies)		310 +		8
Employment insurance premiums:				
Employment from box 18 and box 55 of all T4 slips (maximum \$930.60)		312 +	336.73	9
Self-employment and other eligible earnings (attach Schedule 13)		317 +		10
Volunteer firefighters' amount		362 +		11
Search and rescue volunteers' amount		395 +		12
Canada employment amount				
Amount reported employment income on line 101 or line 104, see line 363 in the guide.) (maximum \$1,146)		363 +		13
Public transit amount		364 +		14
Arts amount		370 +	1,000	15
Home buyers' amount		369 +		16
Charitable contribution expenses		313 +		17
Income amount (use the federal worksheet) (maximum \$2,000)		314 +		18
Charitable giving amount (attach Schedule 5)		315 +		19
Charitable contribution amount (for self) (claim \$7,899, or if you were under 18 years of age, use the federal worksheet)		316 +		20
Charitable contribution amount transferred from a dependant (use the federal worksheet)		318 +		21
Interest paid on your student loans		319 +		22
Tuition, education, and textbook amounts (attach Schedule 11)		323 +		23
Tuition, education, and textbook amounts transferred from a child		324 +		24
Tuition amounts transferred from your spouse or common-law partner (attach Schedule 2)		326 +		25
Medical expenses for self, spouse or common-law partner, and your dependent children born in 1998 or later	330			26
Less \$2,208 or 3% of line 236 of your return, whichever is less.				27
Line 26 minus line 27 (if negative, enter "0")				28
Available amount of medical expenses for other dependants (recalculation at line 331 in the guide)	331 +			29
Sum of lines 28 and 29		332 +		30
Sum of lines 1 to 25, and line 30.		335 =	47,347.34	31
General non-refundable tax credit rate			x 15%	32
Apply line 31 by line 32.		338 =		33
Charitable contributions and gifts (attach Schedule 9)		349 +		34
Sum of lines 33 and 34.				
Transfer this amount on line 47 on the next page.		Total federal non-refundable tax credits 350 =	2,316.61	35

Continue on the next page.

Step 2 - Federal tax on taxable income

Enter your taxable income from line 260 of your return.

179,609.56 36

Complete the appropriate column depending on the amount on line 36.

Line 36 is \$44,701 or less

Line 36 is more than \$44,701 but not more than \$89,401

Line 36 is more than \$89,401 but not more than \$138,586

Line 36 is more than \$138,586

Enter the amount from line 36.

0.00

44,701.00

89,401.00

179,609.56  
138,586.00

Line 37 minus line 38 (cannot be negative)

=

=

=

= 40,023.56 39

Multiply line 39 by line 40.

x 15%

x 22%

x 26%

x 29%

Add lines 41 and 42.

+ 0.00

+ 6,705.00

+ 16,539.00

+ 29,327.00 42

46,041.00 43

Step 3 - Net federal tax

Enter the amount from line 43.

46,041.00 44

Federal tax on split income (from line 5 of Form T1206)

424+ 0.00 45

Add lines 44 and 45.

404= 46,041.00 46

Enter your total federal non-refundable tax credits from line 35 on the previous page.

350 2,046.00 47

Family tax cut (attach Schedule 1-A)

423+ 1,200.00 48

Federal dividend tax credit

425+ 5,764.00 49

Overseas employment tax credit (attach Form T626)

426+ 0.00 50

Minimum tax carryover (attach Form T691)

427+ 0.00 51

Add lines 47 to 51.

= 14,010.00 52

46 minus line 52 (if negative, enter "0")

Basic federal tax 429= 26,822.39 53

Federal foreign tax credit (attach Form T2209)

405- 0.00 54

Line 53 minus line 54 (if negative, enter "0")

Federal tax 406= 26,822.39 55

Total federal political contributions (attach receipts)

409 56

Federal political contribution tax credit (use the federal worksheet)

(maximum \$650) 410 0.00 57

Investment tax credit (attach Form T2038(IND))

412+ 0.00 58

Labour-sponsored funds tax credit

Net cost 413 Allowable credit 414+ 0.00 59

Add lines 57, 58, and 59.

416= 0.00 60

Line 55 minus line 60 (if negative, enter "0")

If you have an amount on line 45 above, see Form T1206.

417= 26,822.39 61

Working income tax benefit advance payments received (box 10 of the RC210 slip)

415+ 0.00 62

Special taxes (see line 418 in the guide)

418+ 0.00 63

Add lines 61, 62, and 63.

Enter this amount on line 420 of your return.

Net federal tax 420= 26,822.39 64

line 423 in the guide to see if you are eligible for the family tax cut.  
 Complete this schedule to claim the family tax cut, one claim per family.  
 Attach a copy of this schedule to your return.

Make sure that you have completed the "Information about your spouse or common-law partner" section on page 1 of your return.  
 To receive the maximum benefit of this credit, make sure you and your spouse or common-law partner claim all of the  
 refundable tax credits you may be entitled to when completing Schedule 1, Federal Tax, even if you do not need the  
 amounts to reduce your or your spouse's or common-law partner's tax. Complete both columns.

Part 1 - Federal tax before income sharing

	Column 1 You	Column 2 Eligible spouse or common-law partner
Enter the tax on taxable income from line 43 of Schedule 1.	40 232 10	17 519 21
Enter the total non-refundable tax credits from line 35 of Schedule 1.	- 2 646 11	- 1 614 05
1 minus line 2 (if negative, enter "0")	= 37 585 99	= 15 905 16

Part 2 - Adjusted federal tax after income sharing

Enter the taxable income from line 260 of the return.	128 607 50	93 171 05
---	------------	-----------

Enter the difference between the highest and lowest taxable income amounts that you reported at line 4.  $\times 50\% =$

Enter the amount from line 5 or \$50,000, whichever is less, in the column with the higher income at line 4. Enter "0" in the other column.	- 50 000	- 0
5 plus line 6	= 128 607 50	= 93 171 05

Enter the amount from line 5 or \$50,000, whichever is less, in the column with the lower income at line 4. Enter "0" in the other column.	+ 0	+ 50 000
7 plus line 8	= 128 607 50	= 143 171 05
<b>Adjusted taxable income</b>		

Enter the adjusted taxable income (use charts 1 and 2 on the next page) amount from line 2.	26 933 71	20 519 21
10 minus line 11 (if negative, show it in brackets)	- 3 646 11	- 1 614 05
	= 23 287 60	= 18 905 16

Enter the spouse or common-law partner amount from line 303 of Schedule 1. If the claim on line 303 includes the family caregiver amount, use chart 3 on the next page to calculate the amount to enter on this line.	13 498	13
---	--------	----

Enter the amounts transferred from your spouse or common-law partner from line 326 of Schedule 1. If this amount includes a transfer of tuition, education, textbook amounts on line 360 of Schedule 2, reduce the amount to be reported on this line by the amount from line 326 or line 360, whichever is less.	+ 0	+ 0
13 plus line 14	= 13 498	= 13

Enter the federal non-refundable tax credit rate	x 15%	x 15%
15 multiplied by line 16	= 2 024 82	= 1 935 05
<b>Adjustment to non-refundable tax credits</b>		

Enter the amount from line 12 (if negative, show it in brackets).	2 105 7	28 820 16
Enter the amount on line 18 is positive, add lines 17 and 18. If the amount on line 18 is in brackets (negative), subtract the amount from line 17 (if the result is negative, enter "0").	= 24 087	= 28 820 16
<b>Adjusted federal tax after income sharing</b>		

Part 3 - Family tax cut

Enter the amounts from line 3 in columns 1 and 2.	54 107	75 20
Enter the amounts from line 19 in columns 1 and 2.	- 52 907	- 16 21

20 minus line 21 (if negative, enter "0")

Enter the amount from line 22 or \$2,000, whichever is less. Enter this amount on line 423 of Schedule 1.	1 200	59
<b>Family tax cut</b>		

Chart 1 - Tax calculation chart for you (column 1)

Enter your adjusted taxable income from line 9 on the previous page. 128,609.50

Complete the appropriate column depending on the amount on line 1 above.	Line 1 is \$44,701 or less	Line 1 is more than \$44,701 but not more than \$89,401	Line 1 is more than \$89,401 but not more than \$138,586	Line 1 is more than \$138,586
Enter the amount from line 1.	= 0.00	= 44,701.00	= 128,609.50	= 143,171.15
Line 2 minus line 3 (cannot be negative)	=	=	= 89,401.00	= 138,586.00
Multiply line 4 by line 5.	x 15%	x 22%	x 26%	x 29%
	=	=	= 10,174.21	= 13,900.21
Add lines 6 and 7. Enter this amount on line 10 on the previous page.	+ 0.00	+ 6,705.00	+ 16,539.00	+ 29,327.00
	=	=	= 26,733.21	= 30,517.21

Chart 2 - Tax calculation chart for eligible spouse or common-law partner (column 2)

Enter your spouse's or common-law partner's adjusted taxable income from line 9 on the previous page. \_\_\_\_\_

Complete the appropriate column depending on the amount on line 1 above.	Line 1 is \$44,701 or less	Line 1 is more than \$44,701 but not more than \$89,401	Line 1 is more than \$89,401 but not more than \$138,586	Line 1 is more than \$138,586
Enter the amount from line 1.	= 0.00	= 44,701.00	= 89,401.00	= 138,586.00
Line 2 minus line 3 (cannot be negative)	=	=	=	=
Multiply line 4 by line 5.	x 15%	x 22%	x 26%	x 29%
	=	=	=	=
Add lines 6 and 7. Enter this amount on line 10 on the previous page.	+ 0.00	+ 6,705.00	+ 16,539.00	+ 29,327.00
	=	=	=	=

Chart 3 - Line 236 adjustment for the family caregiver amount (line 13 on the previous page)

Enter the spouse or common-law partner amount from line 303 of your or your spouse's or common-law partner's Schedule 1. \_\_\_\_\_

Family caregiver amount		2,093.00	2
Enter the net income of the infirm individual being claimed for the spouse or common-law partner amount (line 236 of his or her return).			3
Base amount	= 11,327.00		4
Line 3 minus line 4 (if negative, enter "0")	=		5
Line 2 minus line 5 (if negative, enter "0")	=		6
Line 1 minus line 6 (if negative, enter "0")	=		7
Enter this amount on line 13 on the previous page.			

Complete this form and attach a copy to your return. For more information, see the related line in the forms book.

## Step 1 - Ontario non-refundable tax credits

		For internal use only	5605		
Personal amount		claim \$9,863	5804		1
Amount (if born in 1950 or earlier) (use the <i>Provincial Worksheet</i> )		(maximum \$4,815)	5808 +		2
Use or common-law partner amount					
Base amount	9,212	00			
Minus: his or her net income from page 1 of your return	-				
Result: (if negative, enter "0")	=		(maximum \$8,375) ▶ 5812 +		3
Amount for an eligible dependant					
Base amount	9,212	00			
Minus: his or her net income from line 236 of his or her return	-				
Result: (if negative, enter "0")	=		(maximum \$8,375) ▶ 5816 +		4
Amount for infirm dependants age 18 or older (use the <i>Provincial Worksheet</i> )			5820 +		5
RRSP or QPP contributions:					
Amount from line 308 of your federal Schedule 1)			5824 +	771 72	6
Amount from line 310 of your federal Schedule 1)			5828 +		7
Employment insurance premiums:					
Amount from line 312 of your federal Schedule 1)			5832 +	336 42	8
Amount from line 317 of your federal Schedule 1)			5829 +		9
Charitable contribution expenses		(maximum \$12,033)	5833 +		10
Charitable contribution income amount		(maximum \$1,364)	5836 +		11
Spouse or common-law partner amount (use the <i>Provincial Worksheet</i> )			5840 +		12
Spouse or common-law partner amount (for self)			5844 +		13
Amount (if born in 1968, or if you were under 18 years of age, use the <i>Provincial Worksheet</i> )			5848 +		14
Charitable contribution amount transferred from a dependant (use the <i>Provincial Worksheet</i> )			5852 +		15
Interest paid on your student loans (amount from line 319 of your federal Schedule 1)			5856 +		16
Tuition and education amounts [use and attach Schedule ON(S11)]			5860 +		17
Tuition and education amounts transferred from a child			5864 +		18
Medical expenses:					
Amount from line 5868 in the forms book.)	5868				19
Minus: \$2,232 or 3% of line 236 of your return, whichever is less.	-				20
Result: (if negative, enter "0")	=				21
Available amount of medical expenses for other dependants (use the <i>Provincial Worksheet</i> )	5872	+			22
Lines 21 and 22.	5876	=			23
Lines 1 to 18, and line 23.	5880	=		10 991 57	24
Ontario non-refundable tax credit rate			x	5.05%	25
Apply line 24 by line 25.	5884	=		555 03	26
Charitable contributions and gifts:					
Amount from line 345 of your federal Schedule 9		x 5.05% =			27
Amount from line 347 of your federal Schedule 9		x 11.16% =	+		28
Lines 27 and 28.	5896	=			29
Lines 26 and 29.					
Ontario non-refundable tax credits	6150	=		555 03	30

Continue on the next page.

## Step 2 - Ontario tax on taxable income

Protected B when completed

Enter your **taxable income** from line 260 of your return.  
 If this amount is more than \$20,000, you must complete **Step 7 - Ontario health premium.**

178,609.57

Complete the appropriate column depending on the amount on line 31.

	Line 31 is \$40,922 or less	Line 31 is more than \$40,922 but not more than \$81,847	Line 31 is more than \$81,847 but not more than \$150,000	Line 31 is more than \$150,000 but not more than \$220,000	Line 31 is more than \$220,000	
Enter the amount from line 31						
Line 32 minus line 33 (cannot be negative)	- 0.00	- 40,922.00	- 81,847.00	- 150,000.00	- 220,000.00	32
	=	=	=	=	=	33
Multiply line 34 by line 35.	x 5.05%	x 9.15%	x 11.16%	x 12.16%	x 13.16%	34
	=	=	=	=	=	35
Add lines 36 and 37.	+ 0.00	+ 2,067.00	+ 5,811.00	+ 13,417.00	+ 21,929.00	36
<b>Ontario tax on taxable income</b>	=	=	=	=	=	37
				16,845.72		38

## Step 3 - Ontario tax

Enter your Ontario tax on taxable income from line 38.  
 Enter your Ontario tax on split income from Form T1206.  
 Add lines 39 and 40.

6151 + 16,845.72 = 22,996.72

Enter your Ontario non-refundable tax credits from line 30.  
 Ontario overseas employment tax credit:  
 Amount from line 426 of your federal Schedule 1 × 38.5% = 6153 +  
 Add lines 42 and 43.  
 Line 41 minus line 44 (if negative, enter "0")

535.72 = 22,996.72  
 6153 + 535.72 = 23,532.44  
 23,532.44 - 22,996.72 = 535.72

Ontario minimum tax carryover:  
 Enter the amount from line 45.  
 Enter your Ontario dividend tax credit from line 6152 of the *Provincial Worksheet*.  
 Line 46 minus line 47 (if negative, enter "0").  
 Amount from line 427 of your federal Schedule 1 × 33.67% =

16,840.85 = 23,532.44  
 7,681.70 = 23,532.44  
 7,023.31 = 23,532.44

Enter the amount from line 48 or 49, whichever is less.  
 Line 45 minus line 50 (if negative, enter "0")

6154 = 23,532.44  
 23,532.44 - 23,532.44 = 0

Ontario additional tax for minimum tax purposes:  
 Amount from line 95 of Form T691 × 33.67% =  
 Add lines 51 and 52.

0 + 0 = 0  
 0 + 0 = 0

Complete lines 54 to 56 only if the amount on line 53 is **more than \$4,418**.  
 Otherwise, enter "0" on line 56 and continue completing the form.

### Ontario surtax

(Line 53 minus \$4,418) × 20% (if negative, enter "0") =  
 (Line 53 minus \$5,654) × 36% (if negative, enter "0") =  
 Add lines 54 and 55.  
 Add lines 53 and 56.

2,234.18 = 2,234.18  
 2,234.18 + 2,234.18 = 4,468.36  
 4,468.36 + 2,234.18 = 6,702.54

Ontario dividend tax credit:  
 Enter your Ontario dividend tax credit from line 6152 of the *Provincial Worksheet*.  
 Line 57 minus line 58 (if negative, enter "0")

6152 = 4,418.00  
 4,418.00 - 4,418.00 = 0

Continue on the next page.

Enter the amount from line 59 on the previous page.

13 255 58 60

If you are not claiming an Ontario tax reduction, there is an amount on line 52, or the amount on line 60 is "0", enter the amount from line 60 on line 68 and continue completing the form. Otherwise, complete lines 61 to 67 to calculate the Ontario tax reduction.

### Step 4 – Ontario tax reduction

Basic reduction

228 00 61

If you had a spouse or common-law partner on December 31, 2015, only the individual with the higher net income can claim the amounts on lines 62 and 63.

Reduction for dependent children born in 1997 or later

Number of dependent children 6269 2 x \$421 =

+ 842 62

Reduction for dependants with a mental or physical infirmity

Number of dependants 6097 x \$421 =

+ 2566 63

Add lines 61, 62, and 63.

= 3436 64

Enter the amount from line 64.

1010 x 2 =

2020 65

Enter the amount from line 60.

- 2020 66

Line 65 minus line 66 (if negative, enter "0")

Ontario tax reduction claimed

= 0 67

Line 60 minus line 67 (if negative, enter "0")

= 13 255 58 68

### Step 5 – Ontario foreign tax credit

Enter the Ontario foreign tax credit from Form T2036.

- 69

Line 68 minus line 69 (if negative, enter "0")

= 69 70

### Step 6 – Community food program donation tax credit for farmers

Enter the amount of qualifying donations that have also been claimed as charitable donations

6098 x 25% =

- 1524 71

Line 70 minus line 71 (if negative, enter "0")

= 1524 72

### Step 7 – Ontario health premium

If your taxable income (from line 31) is not more than \$20,000, enter "0". Otherwise, enter the amount calculated in the chart on the next page.

Ontario health premium

+ 300 73

Add lines 72 and 73.

Ontario tax

= 14 255 58 74

Enter the result on line 428 of your return.

Continue on the next page.

Superior Court of Justice, Family Court  
(Name of court)

at 161 Elgin Street, Ottawa, Ontario K2P 2K1  
Court office address

Court File Number  
FC-15-2446-0

Form 6B: Affidavit of Service  
sworn/affirmed  
Interim Support

**Applicant(s)**

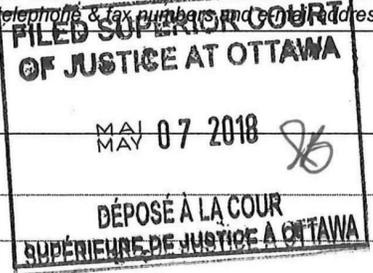
Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).  
**Jonathan Kiska**  
1244 Lampman Crescent, Ottawa, Ontario K2C 1P8  
mobile: 613-723-0010 jonathankiska@gmail.com

Lawyer's name & address — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).  
**Wade Smith**  
700-116 Lisgar Street, Ottawa, Ontario K2P 0C2  
phone: 613-237-3444 wsmith@bellbaker.com

**Respondent(s)**

Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).  
**Deirdre Moore**  
7 Vanson Avenue, Ottawa, Ontario K2E 6A9  
mobile: 613-261-3520 deirdre\_cfa@icloud.com

Lawyer's name & address — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).  
n/a



My name is (full legal name) Deirdre Ann Moore

I live in (municipality & province) City of Ottawa, Ontario

and I swear/affirm that the following is true:

1. On (date) May 7, 2018, at (time) 9:53 a.m., I served (name of person to be served) Wade Smith with the following document(s) in this case:

Name of document	Author (if applicable)	Date when document signed, issued, sworn, etc.
T1 - 2017 **NOA not available**	Deirdre Moore	May 7, 2018
T1 - 2016 **NOA requires correction**	Deirdre Moore	May 7, 2018
T1 - 2015 with NOA	Deirdre Moore	May 7, 2018

List the documents served

**NOTE:** You can leave out any part of this form that is not applicable.

2. I served the documents mentioned in paragraph 1 by:

- special service. (Go to paragraph 3 below if you used special service.)
- mail. (Go to paragraph 4 if you used mailed service.)
- same day courier. (Go to paragraph 5 if you used courier.)
- next day courier. (Go to paragraph 5 if you used courier.)
- deposit at a document exchange. (Go to paragraph 6 if you used a document exchange.)
- an electronic document exchange. (Go to paragraph 7 if you used an electronic document exchange.)
- fax. (Go to paragraph 8 if you used fax.)
- email. (Go to paragraph 9 if you used email.)
- substituted service or advertisement. (Go to paragraph 10 if you used substituted service or advertisement.)

Check one box only and go to indicated paragraph.

3. I carried out special service of the document(s) on the person named in paragraph 1 at (place or address)  
700-116 Lisgar Street, Ottawa, Ontario K2P 0C2

- by:
- leaving a copy with the person.
  - leaving a copy with (name) Elizabeth Vaughan
    - who is a lawyer who accepted service in writing on a copy of the document.
    - who is the person's lawyer of record.
    - who is the (office or position) receptionist  
of the corporation named in paragraph 1.
  - mailing a copy to the person together with a prepaid return postcard in Form 6 in an envelope bearing the sender's return address. This postcard, in which receipt of the document(s) is acknowledged, was returned and is attached to this affidavit.
  - leaving a copy in a sealed envelope addressed to the person at the person's place of residence with (name) \_\_\_\_\_  
who provided me with identification to show that he/she was an adult person residing at the same address and by mailing another copy of the same document(s) on the same or following day to the person named in paragraph 1 at that place of residence.
  - other (Specify. See rule 6 for details.) \_\_\_\_\_

4. I mailed the document(s) to be served by addressing the covering envelope to the person named in paragraph 1 at:  
(Set out address.) \_\_\_\_\_

- which is the address
- of the person's place of business.
  - of a lawyer who accepted service on the person's behalf.
  - of the person's lawyer of record.
  - of the person's home.
  - on the document most recently filed in court by the person.
  - other (Specify.) \_\_\_\_\_

Check appropriate paragraph and strike out paragraphs 3, 5, 6, 7, 8, 9 and 10.

5. The document(s) to be served was/were placed in an envelope that was picked up at \_\_\_\_\_ a.m./p.m. on (date) \_\_\_\_\_ by (name of courier service) \_\_\_\_\_

a private courier service, a copy of whose receipt is attached to this affidavit. The envelope was addressed to the person named in paragraph 1 at: (Set out address.) \_\_\_\_\_

- which is the address
- of the person's place of business.
  - of a lawyer who accepted service on the person's behalf.
  - of the person's lawyer of record.
  - of the person's home.
  - on the document most recently filed in court by the person.
  - other (Specify.) \_\_\_\_\_

Check appropriate paragraph and strike out paragraphs 3, 4, 6, 7, 8, 9 and 10.

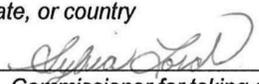
- 6. The document(s) was/were deposited at a document exchange. The exchange's date stamp on the attached copy shows the date of deposit. *(Strike out paragraphs 3, 4, 5, 7, 8, 9, 10 and 13.)*
- 7. The documents were served through an electronic document exchange. The record of service from the exchange is attached to this affidavit. *(Strike out paragraphs 3, 4, 5, 6, 8, 9, 10 and 13.)*
- 8. The document(s) to be served was/were faxed. The fax confirmation is attached to this affidavit. *(Strike out paragraphs 3, 4, 5, 6, 7, 9, 10 and 13.)*
- 9. The documents were served by email. Attached to this Affidavit is a copy of the email that the document was attached to. *(Strike out paragraphs 3, 4, 5, 6, 7, 8, 10 and 13.)*
- 10. An order of this court made on (date) \_\_\_\_\_ allowed
  - substituted service.
  - service by advertisement. *(Attach advertisement.)*

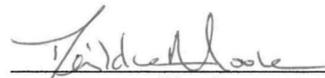
The order was carried out as follows: *(Give details. Then go to paragraph 13 if you had to travel to serve substitutionally or by advertisement.)*

11. My relationship to, or affiliation with, any party in this case is as follows:  
**Respondent**

12. I am at least 18 years of age.

13. To serve the document(s), I had to travel 9 kilometres. My fee for service of the document(s) is \$ 125.00 including travel.

Sworn/Affirmed before me at Ottawa  
\_\_\_\_\_ municipality  
in Ontario  
\_\_\_\_\_ province, state, or country  
on May 7, 2018  
\_\_\_\_\_ date  
  
Commissioner for taking affidavits  
*(Type or print name below if signature is illegible.)*

  
\_\_\_\_\_  
Signature  
*(This form is to be signed in front of a lawyer, justice of the peace, notary public or commissioner for taking affidavits.)*