

Canada Revenue Agency  
Agence du revenu  
du Canada**T1 GENERAL 2015****Income Tax and Benefit Return**

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

ON **8****Identification**

Print your name and address below.

First name and initial

Deirdre A

Last name

Moore

Mailing address: Apt No - Street No Street name

1244 Lampman Crescent

PO Box

RR

City

Prov./Terr.

Postal code

**Email address**I understand that by providing an email address, I am registering for online mail.  
I have read and I accept the terms and conditions on page 15 of the guide.

Enter an email address:

**Information about your residence**

Enter your province or territory of residence on December 31, 2015:

Ontario

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 2015, enter the province or territory of self-employment:

If you became or ceased to be a resident of Canada for income tax purposes in 2015, enter the date of:

entry Month Day

or

departure Month Day

**Information about you**

Enter your social insurance number (SIN):

4 8 3 4 4 4 4 6 9

Year Month Day

Enter your date of birth:

1 9 6 5 0 9 2 8

Your language of correspondence:

English

Français

Votre langue de correspondance :

☒☐**Is this return for a deceased person?**

If this return is for a deceased person, enter the date of death:

Year Month Day

**Marital status**

Tick the box that applies to your marital status on December 31, 2015:

- 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 SIN:

Enter his or her first name:

Enter his or her net income for 2015 to claim certain credits:

Enter the amount of universal child care benefit (UCCB) from line 117 of his or her return:

Enter the amount of UCCB repayment from line 213 of his or her return:

Tick this box if he or she was self-employed in 2015:

1 ☐

Do not use this area

**Elections Canada** (see the Elections Canada page in the tax guide for details or visit [www.elections.ca](http://www.elections.ca))A) Are you a Canadian citizen? ..... Yes ☒ 1 No ☐ 2Answer 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 ☐ 2Your authorization is valid until you file your next return. Your information will only be used for purposes permitted under the *Canada Elections Act*, which include sharing the information with provincial/territorial election agencies, members of Parliament, and registered political parties, as well as candidates at election time.

Do not use this area

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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:

Did 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 82
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 +	1442 03
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 +	93 171 23
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 56
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

**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.**

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### 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 <b>attach</b> receipts)	208	+ 16 500 00
PRPP employer contributions (amount from your PRPP contribution receipts)	205	
Deduction for elected split-pension amount ( <b>attach</b> 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 ( <b>attach</b> 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 ( <b>attach</b> Schedule 4)		221 +
Deduction for CPP or QPP contributions on self-employment and other earnings ( <b>attach</b> Schedule 8 or Form RC381, whichever applies)		222 +
Exploration and development expenses ( <b>attach</b> Form T1229)		224 +
Other employment expenses		229 +
Clergy 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> .	
Social benefits repayment (if you reported income on line 113, 119, or 146, see line 235 in the guide)		234 = 16 500 -
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> .	
If you have a spouse or common-law partner, see line 236 in the guide.		236 = 178 609 50

### 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 ( <b>attach</b> 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**. 260 178 609 50

**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

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Net federal tax: enter the amount from line 64 of Schedule 1 (attach Schedule 1, even if the result is "0") 420 26 222 32

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 +

Social benefits repayment (amount from line 235) 422 +

Provincial or territorial tax (attach Form 428, even if the result is "0") 428 + 14 055 58

Add lines 420, 421, 430, 422, and 428. This is your total payable. 435 40 227 92

Total income tax deducted 437 26 165 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 2 000 00 x 15% = 459 + 300 00

Tax paid by instalments 476 + 3 830 00

Provincial or territorial credits (attach Form 479 if it applies) 479 + 110 00

Add lines 437 to 479. These are your total credits. 482 30 305 39

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):

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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 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 005.

Do not use this area

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Federal Tax

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Schedule 1

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

Part 1 - Federal non-refundable tax credits

Basic personal amount	claim \$11,327	300	11 327	1
Age 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 the family caregiver amount	352 2 × \$2,093 =	367 +	4 186	5
Amount for infirm dependants age 18 or older (attach Schedule 5)		306 +		6
PP or QPP contributions:				
through employment from box 16 and box 17 of all T4 slips (attach Schedule 8 or Form RC381, whichever applies)		308 +	791 76	7
on self-employment and other earnings (attach Schedule 8 or Form RC381, whichever applies)		310 +		8
Employment insurance premiums:				
through employment from box 18 and box 55 of all T4 slips (maximum \$930.60)		312 +	336 13	9
on 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				
If you 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
Children's arts amount		370 +	10 83	15
Orphan's amount		369 +		16
Donation expenses		313 +		17
Pension income amount (use the federal worksheet) (maximum \$2,000)		314 +		18
Family caregiver amount (attach Schedule 5)		315 +		19
Disability amount (for self) (claim \$7,899, or if you were under 18 years of age, use the federal worksheet)		316 +		20
Disability amount transferred from a dependant (use the federal worksheet)		318 +		21
Interest paid on your student loans		319 +		22
Your tuition, education, and textbook amounts (attach Schedule 11)		323 +		23
Tuition, education, and textbook amounts transferred from a child		324 +		24
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		
Enter \$2,208 or 3% of line 236 of your return, whichever is less.		27		
Line 26 minus line 27 (if negative, enter "0")		28		
Allowable amount of medical expenses for other dependants to the calculation at line 331 in the guide)	331 +	29		
Add lines 28 and 29.		332 +		30
Add lines 1 to 25, and line 30.		335 =	14 641 34	31
Federal non-refundable tax credit rate		×	15%	32
Multiply line 31 by line 32.		338 =		33
Donations and gifts (attach Schedule 9)		349 +		34
Add lines 33 and 34.				
Enter this amount on line 47 on the next page.	Total federal non-refundable tax credits	350 =	2 646 41	35

Continue on the next page.

## Step 3 - Federal tax on taxable income

Enter your **taxable income** from line 260 of your return.

178,609.50 36

Complete the appropriate column  
depending on the amount on line 36.Line 36 is  
\$44,701 or lessLine 36 is more  
than \$44,701 but  
not more than  
\$89,401Line 36 is more  
than \$89,401 but  
not more than  
\$138,586Line 36 is more  
than \$138,586

Enter the amount from line 36.

- 0.00

- 44,701.00

- 89,401.00

178,609.50  
- 138,586.00 37

Line 37 minus line 38 (cannot be negative)

=

=

=

= 40,023.50 38

Multiply line 39 by line 40.

x 15%

x 22%

x 26%

x 29% 40

Add lines 41 and 42.

+ 0.00

+ 6,705.00

+ 16,539.00

+ 29,327.00 42

## Step 4 - Net federal tax

Enter the amount from line 43.

40,933.50 44

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

424 + 40,933.50 45

Add lines 44 and 45.

404 = 40,933.50 46

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

350 2,641.21 47

Family tax cut (attach Schedule 1-A)

423 + 1,200.50 48

Federal dividend tax credit

425 + 10,268.66 49

Overseas employment tax credit (attach Form T626)

426 + 50 50

Minimum tax carryover (attach Form T691)

427 + 51 51

Add lines 47 to 51.

= 14,111.47 52

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

Basic federal tax 429 = 26,822.39 53

Federal foreign tax credit (attach Form T2209)

405 -

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

57

Investment tax credit (attach Form T2038(IND))

412 + 58

Labour-sponsored funds tax credit

Net cost 413

Allowable credit 414 +

59

Add lines 57, 58, and 59.

416 = 60

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

417 = 26,822.39 61

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

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

415 + 62

Special taxes (see line 418 in the guide)

418 + 63

Add lines 61, 62, and 63.

Enter this amount on line 420 of your return.

Net federal tax 420 = 26,822.39 64

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## Family Tax Cut

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Schedule 1-A

See line 423 in the guide to see if you are eligible for the family tax cut.  
 Enter 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.  
 So, to receive the maximum benefit of this credit, make sure you and your spouse or common-law partner claim all of the non-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

Enter the tax on taxable income from line 43 of Schedule 1.

Enter the total non-refundable tax credits from line 35 of Schedule 1.

Line 1 minus line 2 (if negative, enter "0")

Column 1  
YouColumn 2  
Eligible spouse or  
common-law partner

42 733 122	1	17 519 21	1
- 264 21	2	496 - 1 614 05	2
= 28 257 59	3	= 15 820 16	3

## Part 2 - Adjusted federal tax after income sharing

Enter the taxable income from line 260 of the return.

Enter the difference between the highest and lowest taxable income amounts that you reported at line 4.

× 50% =

5

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.

Lines 4 minus line 6

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.

Add lines 7 and 8.

Adjusted taxable income

Tax on adjusted taxable income (use charts 1 and 2 on the next page)

Enter the amount from line 2.

Line 10 minus line 11 (if negative, show it in brackets)

Enter the spouse or common-law partner amount from line 303 of Schedule 1.  
 Note: 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.)

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, and textbook amounts on line 360 of Schedule 2, reduce the amount to be claimed on this line by the amount from line 326 or line 360, whichever is less.

Add lines 13 and 14.

Federal non-refundable tax credit rate

Multiply line 15 by line 16.

Adjustment to non-refundable tax credits

Enter the amount from line 12 (if negative, show it in brackets).

If 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 on line 17 (if the result is negative, enter "0").

Adjusted federal  
tax after income  
sharing

175 609 50	4	497 93 171 05	4
------------	---	---------------	---

- 50 000	6	- 0	6
= 125 609 50	7	= 93 171 05	7
+	8	+ 50 000	8
= 125 609 50	9	= 143 171 05	9
28 257 59	10	30 519 21	10
- 2 642 11	11	- 1 614 05	11
= 24 287 59	12	= 28 820 16	12

	13	498	13
+	14	499	14
= 0	15	= 0	15
× 15%	16	× 15%	16
= 0	17	= 0	17
24 287 59	18	28 820 16	18
= 24 287 59	19	= 28 820 16	19

## Part 3 - Family tax cut

Add the amounts from line 3 in columns 1 and 2.

Combined tax before income sharing

Add the amounts from line 19 in columns 1 and 2.

Combined adjusted tax after income sharing

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

Enter the amount from line 22 or \$2,000, whichever is less.

Subtract this amount on line 423 of Schedule 1.

Family tax cut

54 107 35	20
- 52 902 16	21
= 1 205 19	22
1 205 19	23



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

Enter your **adjusted taxable income** from line 9 on the previous page. 125,609.50

Complete the appropriate column depending on the amount on line 1 above.

Line 1 is  
\$44,701 or lessLine 1 is  
more than \$44,701  
but not more than  
\$89,401Line 1 is more than  
\$89,401 but not  
more than  
\$138,586Line 1 is  
more than  
\$138,586

Enter the amount from line 1.

Line 2 minus line 3 (cannot be negative)

Multiply line 4 by line 5.

Add lines 6 and 7. Enter this amount on line 10 on the previous page.

-	0.00	-	44,701.00	-	89,401.00	-	138,586.00
=		=		=	39,208.50	=	52,923.50
x	15%	x	22%	x	26%	x	26.29%
=		=		=	10,194.21	=	13,920.21
+	0.00	+	6,705.00	+	16,539.00	+	29,327.00
=		=		=	26,733.21	=	30,519.21

## 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 lessLine 1 is  
more than \$44,701  
but not more than  
\$89,401Line 1 is more than  
\$89,401 but not  
more than  
\$138,586Line 1 is  
more than  
\$138,586

Enter the amount from line 1.

Line 2 minus line 3 (cannot be negative)

Multiply line 4 by line 5.

Add lines 6 and 7. Enter this amount on line 10 on the previous page.

-	0.00	-	44,701.00	-	89,401.00	-	138,586.00
=		=		=		=	
x	15%	x	22%	x	26%	x	29%
=		=		=		=	
+	0.00	+	6,705.00	+	16,539.00	+	29,327.00
=		=		=		=	

## Chart 3 - Line 303 adjusted 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

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).

Base amount

Line 3 minus line 4 (if negative, enter "0")

Line 2 minus line 5 (if negative, enter "0")

Line 1 minus line 6 (if negative, enter "0")

Enter this amount on line 13 on the previous page.

	2,093.00						
-	11,327.00						
=							



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

Basic personal amount	For internal use only 5605	claim \$9,863 5804		1
Age amount (if born in 1950 or earlier) (use the <i>Provincial Worksheet</i> )	(maximum \$4,815) 5808	+		2
Spouse 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
PP or QPP contributions:				
(amount from line 308 of your federal Schedule 1)		5824	+	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	+	8
(amount from line 317 of your federal Schedule 1)		5829	+	9
Option expenses	(maximum \$12,033)	5833	+	10
Other income amount	(maximum \$1,364)	5836	+	11
Transfer amount (use the <i>Provincial Worksheet</i> )		5840	+	12
Disability amount (for self)		5844	+	13
Claim \$7,968, or if you were under 18 years of age, use the <i>Provincial Worksheet</i>		5848	+	14
Disability 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
Child and education amounts transferred from a child		5860	+	17
Amounts transferred from your spouse or common-law partner (use and attach Schedule ON(S2))		5864	+	18
Medical expenses:				
Read line 5868 in the forms book.)	5868			19
Enter \$2,232 or 3% of line 236 of your return, whichever is less.	-			20
Line 19 minus line 20 (if negative, enter "0")	=			21
Allowable amount of medical expenses for other dependants (use the <i>Provincial Worksheet</i> )	5872	+		22
Sum of lines 21 and 22.	5876	=		23
Sum of lines 1 to 18, and line 23.	5880	=	10,991.27	24
Ontario non-refundable tax credit rate		x	5.05%	25
Multiply line 24 by line 25.	5884	=	555.07	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
Sum of lines 27 and 28.	5896	=		29
Sum of lines 26 and 29.		+		
Ontario non-refundable tax credits	6150	=	555.07	30

Continue on the next page.

## Step 2 – Ontario tax on taxable income

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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**.

178 109 5

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
	x 5.05%	x 9.15%	x 11.16%	x 12.16%	x 13.16%	34
Multiply line 34 by line 35.						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
						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.

Enter your Ontario non-refundable tax credits from line 30.

Ontario overseas employment tax credit:

Amount from line 426 of your federal Schedule 1

Add lines 42 and 43.

Line 41 minus line 44 (if negative, enter "0")

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

Enter the amount from line 48 or 49, whichever is less.

Line 45 minus line 50 (if negative, enter "0")

Ontario additional tax for minimum tax purposes:

Amount from line 95 of Form T691

Add lines 51 and 52.

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.

### 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")

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".  
 e. 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 × \$421 =

+ 842 62

Reduction for dependants with a mental or physical infirmity

Number of dependants 6097 × \$421 =

+ 63 63

Add lines 61, 62, and 63.

= 1380 64

Enter the amount from line 64.

10.10 × 2 =

20.20 65

Enter the amount from line 60.

- 13.25558 66

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

Ontario tax reduction claimed

= 10.10 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")

= 13,255.58 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 × 25% =

- 1524.50 71

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

= 13,255.58 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

+ 70.00 73

Add lines 72 and 73.

Enter the result on line 428 of your return.

Ontario tax

= 14,025.58 74

Continue on the next page.

Employer's name - Nom de l'employeur  
**CARLETON UNIVERSITY**  
 1125 COLONEL BY DRIVE  
 OTTAWA, ON K1S 5B6

Canada Revenue Agency Agence du revenu du Canada  
 Year Année **2015**

**T4**  
 STATEMENT OF REMUNERATION PAID  
 ÉTAT DE LA RÉMUNÉRATION PAYÉE

54 Employer's account number / Numéro de compte de l'employeur  
 Social Insurance number / Numéro d'assurance sociale  
**483444469**

Province of employment / Province d'emploi  
**ON**  
 Employment code / Code d'emploi  
**29**

14	Employment income - line 101 Revenus d'emploi - ligne 101	17894	87	22	Income tax deducted - line 437 Impôt sur le revenu retenu - ligne 437	2378	64
16	Employee's CPP contributions - line 308 Cotisations de l'employé au RPC - ligne 308	791	96	24	EI insurable earnings Gains assurables d'AE	17894	87
17	Employee's QPP contributions - line 308 Cotisations de l'employé au RRQ - ligne 308			26	CPP/QPP pensionable earnings Gains ouvrant droit à pension - RPC/RRQ	17894	87
18	Employee's EI premiums - line 312 Cotisations de l'employé à l'AE - ligne 312	336	43	44	Union dues - line 212 Cotisations syndicales - ligne 212		
20	RPP contributions - line 207 Cotisations à un RPA - ligne 207			46	Charitable donations - line 349 Dons de bienfaisance - ligne 349		

Employee's name and address - Nom et adresse de l'employé  
 Last name (in capital letters) - Nom de famille (en lettres majuscules) First name - Prénom Initials - Initiales  
**MOORE, Deirdre**  
 1244 Lampman Crescent  
 Ottawa ON  
 K2C 1P8  
 CAN

Canada Revenue Agency Agence du revenu du Canada

**T5** Statement of Investment Income  
 État des revenus de placement

Year Année **2015**

Protected B / Protégé B  
 when completed / une fois rempli

**AMENDED**

24	Actual amount of eligible dividends Montant réel des dividendes déterminés	25	Taxable amount of eligible dividends Montant imposable des dividendes déterminés	26	Federal credit - Crédit fédéral Dividend tax credit for eligible dividends Crédit d'impôt pour dividendes déterminés	13	Interest from Canadian sources Intérêts de source canadienne	18	Capital gains dividends Dividendes sur gains en capital
10	Actual amount of dividends other than eligible dividends Montant réel des dividendes autres que des dividendes déterminés	11	Taxable amount of dividends other than eligible dividends Montant imposable des dividendes autres que des dividendes déterminés	12	Dividend tax credit for dividends other than eligible dividends Crédit d'impôt pour dividendes autres que des dividendes déterminés	21	Report Code A Code du feuillet	22	Recipient identification number 483444469 Numéro d'identification du bénéficiaire
	78,958.50		93,171.03		10,264.61			23	Recipient type 1 Type de bénéficiaire

Other information / Autres renseignements

Box / Case Amount / Montant

Recipient's name (last name first) and address - Nom, prénom et adresse du bénéficiaire  
**MOORE, DEIRDRE**  
 12-25 BAYSWATER AVENUE

Payer's name and address - Nom et adresse du payeur  
**ADVISORONTRACK INC.**  
**DEIRDRE MOORE**

Canada Revenue Agency Agence du revenu du Canada

Statement of RRSP Income  
 État du revenu provenant d'un REER

**T4RSP**

Year 2015 Année	16	Annuity payments Palements de rente	18	Refund of premiums Remboursement de primes	20	Refund of excess contributions Remboursement des cotisations excédentaires	22	Withdrawal and commutation payments Retrait et paiements de conversion	25	LLP withdrawal Retrait REEP	26	Amounts deemed received on death Montants réputés reçus lors de l'annulation de l'enregistrement
	28	Other income or deductions Autres revenus ou déductions	30	Income tax deducted Impôt sur le revenu retenu	34	Amounts deemed received on death Montants réputés reçus au décès			27	HBP withdrawal Retrait RAP	35	Transfers on breakdown of marriage or common-law part. Transferts après rupture de mariage ou de l'union de fait

Last name (print) / Nom de famille (en lettres majuscules) First Name / Prénom Initials / Initiales

003357

DEIRDRE A MOORE  
 1244 LAMPMAN CRES  
 OTTAWA ON K2C 1P8

17,894.87  
 93,171.03  
 82,603.56

24	Contributor spouse or common-law partner Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Époux ou conjoint de fait cotisant	36	Spouse's or common-law partner's social insurance number* Numéro d'assurance sociale de l'époux ou du conjoint de fait*
12	Social insurance number* 483 444 469 Numéro d'assurance sociale*	14	Contract number 380-91970-19 Numéro de contrat
60	Name of payer (issuer) of plan - Nom du payeur (émetteur) du régime <b>RBC DOMINION SECURITIES INC.</b>		
61	Account Number 889767471RP0004 Numéro de compte	40	Tax-paid amount Montant libéré d'impôt

\*If your social insurance number is not shown, see the back of this slip.  
 \*Si votre numéro d'assurance sociale n'est pas indiqué, consultez le verso de ce feuillet.

Protected B when completed / Protégé B une fois rempli  
 RC-15-421





Canada Revenue  
Agency

Agence du revenu  
du Canada

Statement of RRSP Income  
État du revenu provenant d'un REER

T4RSP

Year 2015 Année	16 Annuity payments Paiements de rente	18 Refund of premiums Remboursement de primes	20 Refund of excess contributions Remboursement des cotisations excédentaires	22 Withdrawal and commutation payments Retrait et paiements de conversion 82,603.56	25 LLP withdrawal Retrait REEP	26 Amounts deemed received on deregistration Montants réputés reçus lors de l'annulation de l'enregistrement
	28 Other income or deductions Autres revenus ou déductions	30 Income tax deducted Impôt sur le revenu retenu 23,786.73	34 Amounts deemed received on death Montants réputés reçus au décès		27 HBP withdrawal Retrait RAP	35 Transfers on breakdown of marriage or common-law part. Transferts après rupture du mariage ou de l'union de fait

Last name (print)  
Nom de famille (en lettres moulées)

First Name  
Prénom

Initials  
Initiales

DEIRDRE A MOORE  
1244 LAMPMAN CRES  
OTTAWA ON K2C 1P8

See the privacy notice on your return  
Consultez l'avis de confidentialité dans votre déclaration  
T4RSP (15)

24 Contributor spouse or common-law partner Yes Oui <input type="checkbox"/> No Non <input checked="" type="checkbox"/> Époux ou conjoint de fait cotisant	36 Spouse's or common-law partner's social insurance number* Numéro d'assurance sociale de l'époux ou du conjoint de fait*
12 Social insurance number* 483 444 469 Numéro d'assurance sociale*	14 Contract number 380-91970-19 Numéro de contrat
60 Name of payer (issuer) of plan - Nom du payeur (émetteur) du régime RBC DOMINION SECURITIES INC.	
61 Account Number 889767471RP0004 Numéro de compte	40 Tax-paid amount Montant libéré d'impôt

\*If your social insurance number is not shown, see the back of this slip.  
\*Si votre numéro d'assurance sociale n'est pas indiqué, lisez le verso de ce feuillet.

Protected B when completed / Protégé B une fois rempli  
RC-15-421



Canada Revenue  
Agency

Agence du revenu  
du Canada

Universal child care benefit statement  
État de la prestation universelle pour la garde d'enfants

RC62

009326C

Year 2015 Année	Social insurance number 483 444 469 Numéro d'assurance sociale
-----------------------	--

Issued by: Employment and Social Development Canada  
Émis par: Emploi et Développement social Canada

10 Total benefit paid 1,440.00 Prestation totale versée	
Year / Année	Amount / Montant

12 Repayment of benefits for previous years Remboursement de prestations d'années précédentes	
Year / Année	Amount / Montant

DEIRDRE A MOORE 1255 (G)  
1244 LAMPMAN CRES  
OTTAWA ON K2C 1P8

<b>Employer's name - Nom de l'employeur</b>  CARLETON UNIVERSITY 1125 COLONEL BY DRIVE OTTAWA, ON K1S 5B6		 Canada Revenue Agency Agence du revenu du Canada		<b>T4</b>  STATEMENT OF REMUNERATION PAID ÉTAT DE LA RÉMUNÉRATION PAYÉE	
		Year Année <b>2015</b>			
<b>54</b> Employer's account number / Numéro de compte de l'employeur  Social insurance number Numéro d'assurance sociale <b>12</b> <b>483444469</b>		Province of employment Province d'emploi <b>10</b> <b>ON</b>  Employment code Code d'emploi <b>29</b>		Employment income - line 101 Revenus d'emploi - ligne 101 <b>14</b> <b>17894</b> <b>87</b>  Employee's CPP contributions - line 308 Cotisations de l'employé au RPC - ligne 308 <b>16</b> <b>791</b> <b>96</b>  Employee's QPP contributions - line 308 Cotisations de l'employé au RRQ - ligne 308 <b>17</b>	
Exempt - Exemption CPP/QPP EI PPIP <b>28</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> RPC/RRQ AE RPAP		Income tax deducted - line 437 Impôt sur le revenu retenu - ligne 437 <b>22</b> <b>2378</b> <b>64</b>  EI insurable earnings Gains assurables d'AE <b>24</b> <b>17894</b> <b>87</b>  CPP/QPP pensionable earnings Gains ouvrant droit à pension - RPC/RRQ <b>26</b> <b>17894</b> <b>87</b>  Employee's EI premiums - line 312 Cotisations de l'employé à l'AE - ligne 312 <b>18</b> <b>336</b> <b>43</b>  RPP contributions - line 207 Cotisations à un RPA - ligne 207 <b>20</b>  Pension adjustment - line 206 Facteur d'équivalence - ligne 206 <b>52</b>		Union dues - line 212 Cotisations syndicales - ligne 212 <b>44</b>  Charitable donations - line 349 Dons de bienfaisance - ligne 349 <b>46</b>  RPP or DPSP registration number N° d'agrément d'un RPA ou d'un RPDB <b>50</b>	

**Employee's name and address - Nom et adresse de l'employé**  
 Last name (in capital letters) - Nom de famille (en lettres majuscules) First name - Prénom Initials - Initiales  
 MOORE, Deirdre  
 1244 Lampman Crescent  
 Ottawa ON  
 K2C 1P8  
 CAN

 Canada Revenue Agency Agence du revenu du Canada	<b>T5</b> Statement of Investment Income État des revenus de placement	Year Année <b>2015</b> Année	Protected B / Protégé B when completed / une fois rempli
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AMENDED			
<b>Dividends from Canadian corporations - Dividendes de sociétés canadiennes</b>		<b>Federal credit - Crédit fédéral</b>	
<b>24</b> Actual amount of eligible dividends Montant réel des dividendes déterminés	<b>25</b> Taxable amount of eligible dividends Montant imposable des dividendes déterminés	<b>26</b> Dividend tax credit for eligible dividends Crédit d'impôt pour dividendes déterminés	<b>13</b> Interest from Canadian sources Intérêts de source canadienne
<b>10</b> Actual amount of dividends other than eligible dividends Montant réel des dividendes autres que des dividendes déterminés <b>78,958.50</b>	<b>11</b> Taxable amount of dividends other than eligible dividends Montant imposable des dividendes autres que des dividendes déterminés <b>93,171.03</b>	<b>12</b> Dividend tax credit for dividends other than eligible dividends Crédit d'impôt pour dividendes autres que des dividendes déterminés <b>10,264.61</b>	<b>18</b> Capital gains dividends Dividendes sur gains en capital
		<b>21</b> Report Code Code du feuillet <b>A</b>	<b>22</b> Recipient identification number Numéro d'identification du bénéficiaire <b>462638834</b>
		<b>23</b> Recipient type Type de bénéficiaire <b>1</b>	
Other information Autres renseignements			
Recipient's name (last name first) and address - Nom, prénom et adresse du bénéficiaire <b>KISKA, JONATHAN</b> 1244 LAMPMAN CRESCENT OTTAWA ON K2C 1P8		Payer's name and address - Nom et adresse du payeur ADVISORONTRACK INC. DEIRDRE MOORE 1244 LAMPMAN CRESCENT OTTAWA ON K2C1P8	



## Provincial Worksheet

**2015**  
 T1 General

Use these charts to do the calculations you may need to complete Form ON428, *Ontario Tax*, and Form ON479, *Ontario Credits*.  
 You can find more information about completing these charts in the forms book.  
 Keep this worksheet for your records. **Do not attach it to the return you send us.**

**Line 5808 – Age amount**

Maximum amount			4,815 00	1
Your net income from line 236 of your return				2
Base amount	–	35,849 00		3
Line 2 minus line 3 (if negative, enter "0")	=			4
Applicable rate	×	15%		5
Multiply line 4 by line 5.	=			6
Line 1 minus line 6 (if negative, enter "0")	=			7

Enter this amount on line 5808 of Form ON428.

**Line 5820 – Amount for infirm dependants age 18 or older**

Complete this calculation for each dependant.

Base amount			11,257 00	1
Dependant's net income (line 236 of his or her return)	–			2
Line 1 minus line 2 (if negative, enter "0")	=			3
If you claimed this dependant on line 5816, enter the amount claimed.	–			4
Allowable amount for this dependant: line 3 minus line 4 (if negative, enter "0")	=			5

Enter on line 5820 of Form ON428 the total amount claimed for **all** dependants.

**Line 5840 – Caregiver amount**

Complete this calculation for each dependant.

Base amount			20,553 00	1
Dependant's net income (line 236 of his or her return)	–			2
Line 1 minus line 2 (if negative, enter "0")	=			3
If you claimed this dependant on line 5816, enter the amount claimed.	–			4
Allowable amount for this dependant: line 3 minus line 4 (if negative, enter "0")	=			5

Enter on line 5840 of Form ON428 the total amount claimed for **all** dependants.

**Line 5844 – Disability amount (for self)**

(supplement calculation if you were **under 18 years of age** on December 31, 2015)

Maximum supplement			4,648 00	1
Total of child care and attendant care expenses for you, claimed by you or by another person				2
Base amount	–	2,722 00		3
Line 2 minus line 3 (if negative, enter "0")	=			4
Line 1 minus line 4 (if negative, enter "0")	=			5

Enter on line 5844 of Form ON428 \$7,968 **plus** the amount from line 5 (maximum \$12,616), **unless** you are completing this chart to calculate the amount at line 5848.

## Provincial Worksheet (continued)

**Line 5848 – Disability amount transferred from a dependant**

Complete this calculation for each dependant.

Base amount

If the dependant was **under 18 years of age** on December 31, 2015, enter the amount from line 5 of the chart for line 5844 for the dependant. If the dependant was **18 years of age or older**, enter "0".

Add lines 1 and 2.

Total of amounts your dependant can claim on lines 5804 to 5840 of his or her Form ON428

Add lines 3 and 4.

Dependant's taxable income (line 260 of his or her return)

Allowable amount for this dependant: line 5 minus line 6 (if negative, enter "0")

Enter on line 5848 of Form ON428 the amount from line 3 or line 7, whichever is **less**.Enter on line 5848 of Form ON428 the total amount claimed for **all** disabled dependants.

If at the end of the year you and your dependant were not residents of the same province or territory, special rules may apply. Contact the Canada Revenue Agency to determine the amount you can claim.

7,968.00	1
+	2
=	3
+	4
=	5
-	6
=	7

**Line 5872 – Allowable amount of medical expenses for other dependants**

Complete this calculation for each dependant.

Medical expenses for other dependant

Enter \$2,232 or 3% of the dependant's net income (line 236 of his or her return), whichever is **less**.

Line 1 minus line 2 (if negative, enter "0")

(maximum \$12,033)

Enter on line 5872 of Form ON428 the total amount claimed for **all** other dependants.

	1
-	2
=	3

**Line 6152 – Ontario dividend tax credit**Calculate the amount to enter on line 6152 of Form ON428 by completing **one** of the following **two** calculations:

- If you entered an amount on line 120 but **no amount** on line 180 of your return, complete the following:

Line 120 of your return 93,171.03 × 10% =9,317.10

Enter this amount on line 6152 of Form ON428.

- If you entered amounts on lines 180 **and** 120 of your return, complete the following:

Line 120 of your return		1	
Line 180 of your return	-	2	× 4.5% =
Line 1 minus line 2	=	4	× 10% =
Add lines 3 and 5.			

	3
+	5
=	6

Enter this amount on line 6152 of Form ON428.

**Line 6 – Ontario political contribution tax credit**If your total political contributions (line 5 of Form ON479) were **\$3,026 or more**, enter \$1,330 on line 6 of Form ON479.

Otherwise, complete the appropriate column depending on the amount on line 5.

Enter your total contributions.

Line 1 minus line 2 (cannot be negative)

Multiply line 3 by line 4.

Add lines 5 and 6.

Enter this amount on line 6 of Form ON479.

Line 5 is \$399 or less	Line 5 is more than \$399 but not more than \$1,330	Line 5 is more than \$1,330
-	-	-
0.00	399.00	1,330.00
=	=	=
× 75%	× 50%	× 33.33%
=	=	=
+ 0.00	+ 299.25	+ 764.75
=	=	=





Government  
of Canada    Gouvernement  
du Canada

Canada Revenue Agency

Canada

▼ Home

▼ Tax returns

## Notice of reassessment

### Notice Details

Address:    **DEIRDRE A MOORE  
7 VANSON AVE  
OTTAWA ON K2E 6A9**

Social Insurance Number: **XXX XX4 469**

Tax Year: **2015**

Date Issued: **Jan 25, 2018**

We reassessed your 2015 income tax and benefit return and recalculated your balance.

You have a refund of **\$2,067.39**.

We will deposit your refund into your bank account.

Thank you,  
Bob Hamilton  
Commissioner of Revenue

### Account summary

You have a refund in the amount shown below.

Refund: **\$2,067.39**

### Tax reassessment

We calculated your taxes using the amounts below. The following summary is based on the information we have or you gave us.

We may review your return later to verify income you reported or deductions or credits you claimed. For more information, go to [canada.ca/taxes-reviews](http://canada.ca/taxes-reviews). Keep all your slips, receipts, and other supporting documents in case we ask to see them.

## Summary

Line	Description	\$ Amount on last assessment	CR/DR	\$ Final amount	CR/DR
150	Total income	195,108		195,108	
	Deductions from total income	13,889		13,889	
236	Net income	181,219		181,219	
260	Taxable income	181,219		181,219	
350	Total federal non-refundable tax credits	2,178		2,806	
6150	Total Ontario non-refundable tax credits	551		551	
420	Net federal tax	29,248.27		27,341.22	
428	Net Ontario tax	19,631.34		19,631.34	
435	Total payable	48,879.61		46,972.56	
437	Total income tax deducted	26,165.37		26,165.37	
448	CPP overpayment	79.46		79.46	
459	Children's fitness tax credit	300.00		300.00	
476	Tax paid by instalments	3,730.00		3,730.00	
	Subtotal credits	30,274.83		30,274.83	
	Ontario children's activity tax credit	110.20		110.20	
479	Total Ontario tax credits	110.20		110.20	
482	Total credits	30,385.03		30,385.03	
	Subtotal (Total payable minus Total credits)	18,494.58	DR	16,587.53	DR
	Change to tax payable (Final subtotal minus last subtotal)			1,907.05	CR
	Adjustment to arrears interest			141.34	CR
	Adjustment to refund interest			19.00	CR
	Balance from this reassessment			2,067.39	CR
	<b>Direct deposit</b>			<b>2,067.39</b>	<b>CR</b>

## Explanation of changes and other important information

We changed your return to cancel the reassessment dated **May 26, 2017**.

Please see the "Summary" area for your new total non-refundable tax credits.

We gave you a family tax cut of **\$1,278.99**.

We decreased the arrears interest we charged you earlier by **\$141.34**.

Your refund shows refund interest of **\$19.00**. Since this interest is taxable in the year you receive it, you have to include it as income on your 2018 tax return.

We will deposit your refund into your bank account.

## RRSP/PRPP deduction limit statement

For more information about the details listed below or how employer contributions to a PRPP or group RRSP will affect your contribution room for the year, go to [canada.ca/rrsp](http://canada.ca/rrsp) or refer to Guide T4040, RRSPs and Other Registered Plans for Retirement.

Description	\$ Amount
RRSP/PRPP deduction limit for 2016	3,220
Minus: Employer's PRPP contributions for 2016	0
Minus: Allowable RRSP/PRPP contributions deducted for 2016	0
Plus: 18% of 2016 earned income, up to a maximum of \$26,010	2,025
Minus: 2016 pension adjustment	0
Minus: 2017 net past service pension adjustment	0
Plus: 2017 pension adjustment reversal	0
<b>RRSP/PRPP deduction limit for 2017</b>	<b>5,245</b>
Minus: Unused RRSP/PRPP contributions previously reported and available to deduct for 2017	2,611
<b>Available contribution room for 2017</b>	<b>2,634</b>

Note: If your available contribution room is a negative amount (shown in brackets), you have no contribution room available for 2017 and may have over contributed to your RRSP/PRPP. If this is the case, you may have to pay tax on any excess contributions.

### **More information**

If you need more information about your income tax and benefit return, go to [canada.ca/taxes](http://canada.ca/taxes), go to My Account at [canada.ca/guide-my-cra-account](http://canada.ca/guide-my-cra-account), or call **1-800-959-8281**.

To find your tax centre, go to [canada.ca/cra-offices](http://canada.ca/cra-offices).

### **If you move**

Let us know your new address as soon as possible. For more information on changing your address, go to [canada.ca/cra-change-address](http://canada.ca/cra-change-address).

### **If you have new or additional information and want to change your return:**

- go to [canada.ca/change-tax-return](http://canada.ca/change-tax-return) for faster service; or
- write to the tax centre address shown on this notice, and include your social insurance number and any documents supporting the change.

### **If you want to register a formal dispute:**

- go to [canada.ca/cra-complaints-disputes](http://canada.ca/cra-complaints-disputes); you have 90 days from the date of this notice to register your dispute.

### **Definitions**

DR (debit) is the amount you owe us and CR (credit) is the amount we owe you.

### **Help for persons with hearing, speech, or visual impairments**

You can get this notice in braille, large print, or audio format. For more information about other formats, go to [canada.ca/cra-multiple-formats](http://canada.ca/cra-multiple-formats).

If you use a teletypewriter, you can get tax information by calling **1-800-665-0354**.

▼ Accounts and payments

▼ Benefits and credits

▼ RRSP and TFSA

▼ Personal information





Canada Revenue  
Agency

Agence du revenu  
du Canada

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SHAWINIGAN QC G9P 5H9

DEIRDRE A MOORE  
1244 LAMPMAN CRES  
OTTAWA ON K2C 1P8

1255 (U)

### Notice details

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

JR94W72S

## 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.