Tax Return Summary

Tax Year 2018

Name SHRIKANT DEVRE

Address 26 PENNYROYAL CRES, BRAMPTON, ON L6S 6J7

Phone: <u>778 067 242</u> Date: <u>2019/ 06/ 09</u>

Identification &			Refund		Spouse In			
	<u>548004340</u> 1970/02				Social Ins No Date of birth:		12	
Prov. Residence:		/ 08	Balance owing		Net income			
_	ON Married		Balance owing		Taxable inco	 me:		
_			•					
Total Income		-l	Expl./Dev. Exp.	224		Federal non-refu		1
Employment income	101 _	000		229		Basic personal amount	300 _	11,809 00
Other empl. Inc.	104 _		Clergy residence	231		Age amount	301	
Old age sec. pension			Other dedution	232		Spouse amount	303	
CPP	114 _		Soc. Benefits repmnt.	235		Amt. for eligible dep.	305	
Other pensions	115 _		Net Income	236		Family care amt.	367	
Split-pension amount						Amt. infirm dep. 18+	307	
UUCB	117 _		Taxable Income		1	CPP thru. Empl.	308	
El benefit	119 _		Canadian Forces/police	244		CPP on self-empl.	310	
Taxable dividends	120 _		Employee home reloc.	248		El thru. Empl.	312	
Interest/Investment	121 _		Security options	249		El on self-empl.	317 _	
Net partnership	122		Other pmnts deduction	250		Canada employment	363	
RDSP income	125		Ltd. Partnership losses	251		Public transit amt.	364	
Net rental income	126 _		Non-capital losses	252		Children's arts amt.	370	
Gross rental income	160 _		Net capital losses	253		Home accessibility	398	
Taxable capital gain	127		Capital gains ded.	254		Home buyer's amt.	369	
Taxable support	128		Northen residents ded.	255		Adoption exp.	313	
RRSP income	129		Additional ded.	256		Pension income amt.	314	
Other income	130		Taxable Income	260			_	
Net Bus. Income	135		,			Disability amt.	316	
Gross Bus. inc.	162 _		Federal tax			Disa. amt. transferred		
Net Prof. income	137		Fed. tax on split-inc.	424		Interest on stu. Loans	319	
Gross Prof. income	164 _		Fed. dividend tax cre.	425		Tuition/Edu./Textbooks	323	
Net Comm. Income	139		Min. tax carryover	427		Tuition transferred	324	
Gross Comm. Income	e 166 <u> </u>		Basic federal tax	429		Trans. from spouse	326	
Net Farm. Income	141		Foreign tax credit	405		Medical expenses	332	
Gross Farm. Income	168		Federal tax	406		Donations	349	
Net Fishing income	143		Tot. fed. political contr.	409		Tot. Non-ref credits	350	1,771 35
Gross Fishing income	e 170 <u> </u>		Fed. Poli. Contr. Cre.	410				
Workers' compensation	on 144 <u> </u>		Investment tax credit	412		Refundable Cred	its	
Social assistance	145 _		Special taxes	418		Tot.income tax ded.	437	000
Net federal suppl.	146		Net federal tax	420		Ref. QC abatement	440 _	
Total Income	150 _	000				CPP overpayment	448	
			Provincial Taxes			Climate action Incentive	449	
Net Income		•	CPP payable	421		EI overpayment	450 _	
RPP	207		El payable	430		Ref. med. exp. suppl.	452	
RRSP	208		Social benefits repmnt.	422	,	WITB	453	
Deduction Split-pensi	on 210 _		Provincial tax	428		Ref. invest. tax credit	454 _	
Union/prof. dues	212		Yukon First Nations tax	432		XII.2 trust tax credit	456	
UCCB repayment	213		Total payable	435	000	GST/HST rebate	457	
Child care exp.	214		_		;	Supply tax credit	469	
Disability supports	215		_		•	Tax paid by instalments	476	
ABIL deduction	217		_			Prov. (Terr.) tax credit	479	
Moving exp.	219		_			Tot. ref. credits	482	
Allowable support pm	nt. 220 _		_					
Carrying charges	221		_					
Deduction for CPP	222		-					
Benefit Summa	arv and C	arny-forw	ard Itoms					
	•				1	and Mayir = Free		i
GST Rebate (estimat	_	866 00				sed Moving Exp.		
CCTB Benefit (estima	_	10,962 00	='		<u> </u>	rio Trillium Benefit		
New RRSP Room ea		2 205 2 4	Unused Prov. Tuition	1	+-			
Ontario Child benefit	(esumate) _	2,805 84	Capital Loss		<u> </u>			

Prepared by: <u>V.P.PATEL,CPA</u>

Canada Revenue Agence du revenue Agence	2019-06-09 13:34:22	Confirmati	on: 0D	2\/0DSD						D	rotect	ed R wher	n completed
Income Tax and Benefit Return Step 1 – Identification and other information (Identification Print your name and address below. First name and initial SHRIKANT Last name DEVRE Mailing address: Apt No. – Sheet No. Street name 26 PENNYROYAL CRES PO Box IRI BRAMPTON Prov/Ter. Postal colors BRAMPTON First name and initial SHRIKANT Last name 26 PENNYROYAL CRES PO Box IRI BRAMPTON First page of correspondence: Email address Prov/Ter. Postal colors BRAMPTON First page of correspondence: Email address Prov/Ter. Postal colors BRAMPTON First page of correspondence: Email address Prov/Ter. Postal colors BRAMPTON First page of correspondence: Email address Prov/Ter. Postal colors BRAMPTON First page of correspondence: Email address Prov/Ter. Postal colors BRAMPTON First page of correspondence: Email address Prov/Ter. Postal colors BRAMPTON First page of correspondence: Email address Prov/Ter. Postal colors BRAMPTON First page of correspondence: Email address Prov/Ter. Postal colors BRAMPTON First page of correspondence: Email address Prov/Ter. Postal colors BRAMPTON First page of correspondence: Email address Prov/Ter. Postal colors BRAMPTON First page of correspondence: Email address Prov/Ter. Postal colors BRAMPTON First page of correspondence: Email address Prov/Ter. Postal colors BRAMPTON First page of correspondence: Enter the structure is or a fore-correct the first page of deceased provide fore-correct the first page of deceased providence in the fi	Canada Revenue	Agence du rever		OVERSE						r	TOLECT		
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Print your name and address below. First name and initial SHRIKANT Last name DEVRE Mailing address: Apt No. – Street No. Street name 26 PENNYROYAL CRES PO Box RR City Prov.Terr. Postal Cox BRAMPTON O N L 6 S 6 J 7 7 Brampton O N L 6 S 6 J 7 7 Information about your residence Enter your province or territory of residence on December 31, 2018: Enter the province or territory were your business had a permanent establishmen: If you became or ceased s be a esident of Canada for income tax purposes in 2019, which the date of: If you became or ceased s be a esident of Canada for income tax purposes in 2019, which the date of: If you became or ceased s be a esident of Canada for income tax purposes in 2019, which had be claim the date of: If you were self-employed in 2018, enter the province or territory were your business had a permanent establishmen: If you became or ceased s be a esident of Canada for income tax purposes in 2019, which had be claim certain reduce. Enter their first name: Enter their first name: SMITA Enter the amount of UCCB (sepayment from line 213 of their return: If you were self-employed in 2018; In this box if they were self-employed in 2018; The this box if they were self-employed in 2018; The this source of Elections Canada (For more information, see "Elections Canada" under Step 1, in the guide.) A) Do you have Canadaian citizenship or Elections Canada to update the National Register of Electors? Yes X 1 No 2 Your authorization is valid until you file your next tax return. Your information al dection agencies, members of Parliament, registered	Step 1 – Identii			ther i	nforn	nation							ON 8
First name and initial SHRIKANT Last name DEVRE Mailing address. Apt No. – Street No. Street name 26 PENNYROYAL CRES BR City Prov/Terr. Postal color BRAMPTON O N N L 6 S S J T 7 Syproviding an email address. By providing an email address, you are regist fring to receive email notifications from the CRA and agree to the Terms of use under filep 1 in the guide. Enter an email address. By providing an email address. City Information about your residence Enter an email address. City provides or territory of receive email notifications from the CRA and agree to the Terms of use under filep 1 in the guide. Enter your province or territory where you currently reside if it is not the same as your maining address above: Information about your residence or becember 31, 2018. Enter their province or territory where your business had a permanent establishment: If you became or ceased a be a esident of Canada for income tax purposes in 2018, enter the date of: If you were self-employed in 2018, enter the province or territory were your business had a permanent establishment: If you became or ceased a be a esident of Canada for income tax purposes in 2018, enter the date of: If you were self-employed in 2018. Their their not lincome for 2018 to dain enterial cradits: Enter the amount of universal child care benefit (LOCB) from line 117 of their critum: If you became or ceased a be a esident of Canada for income tax purposes in 2014, and the province of the provin							Fatourus			ation abou	t you	ı	
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Email address By providing an email address, you are regist-ring to receive email notifications from the CRA and agree to the Terms of use under step 1 in the guide. Enter an email address: Information about your residence Information about your spouse or common-law partner (if you ticked box 1 or 2 above) Enter your province or territory where your currently reside if it is not the same as your mailing address above: If you were self-employed in 2018, enter the province or territory where your Disiness had a permanent establishment: If you became or ceased be a esident of Canada for income tax purposes in 2018, enter the date of: If you became or ceased be a esident of Canada for income tax purposes in 2018, enter the date of: If you became or ceased be a esident of Canada for income tax purposes in 2018, enter the amount of UCCB repayment from line 213 of their return: If you became or ceased be a esident of Canada for income tax purposes in 2018, enter the amount of UCCB repayment from line 213 of their return: If you became or ceased be a esident of Canada for income tax purposes in 2018, enter the date of: If you became or ceased be a esident of Canada for income tax purposes in 2018, enter the amount of UCCB repayment from line 213 of their return: If you became or ceased be a esident of Canada for income tax purposes in 2018, enter the date of: If you became or ceased be a esident of Canada for income tax purposes in 2018, enter the amount of UCCB repayment from line 213 of their return: If you became or ceased be a esident of Canada (For more information, see "Elections Canada" under Step 1, in the guide.) A) Do you have 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 Regist			RR							· ·			
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Do not use 172 171													
Do not use 172 171													
Do not use 172 171													
	Do not use 172				171								

Page 1

Step 1 – Identification and other information (continued)

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 2018, was more than CAN\$100,000?
If yes , get and complete Form T1135, Foreign Income Verification Statement. There are substantial penalties for not completing and filing Form T1135 by the due date. For more information, see Form T1135.

Step 2 – Total income

As a resident of Canada, you have to report your income from all sources both incide and outside Canada. The Income Tax and Benefit Guide may have additional information for certain lines.

Employment income (box 14 of all T	4 slips)		101
Commissions included on line 101 (box 42 of all T-, sli, s)	102	
Wage loss replacement contribution	ns		
(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 1	14		
(box 16 of the T4A(P) slip)		152	,
Other pensions and superannuation	(See line 115 in the cuid	e and complete the	
Worksheet for Schedule 1 for line 3			115 +
Elected split-pension amount (Get a		2.)	116 +
Universal child care benefit (UCCB)			117 _+
UCCB amount designated to a depe		185	
Employment insurance and other be			119 +
Taxable amount of dividends (eligib			
Canadian corporations (Complete th		n.)	120 _+
Taxable amount of dividends other	,	400	
included on line 120, from taxe ble C	<u> </u>	180	404
Interest and other investment incom	· ·	eet for the return.)	121 +
Net partnership income: lin. tr d or n	•		122 +
Registered disability savings plan in			125 +
	<u> </u>	Net	126 +
Taxable capital gains (Complete Sci	, , , , , , , , , , , , , , , , , , ,		127 +
	<u>Total</u> 156	Taxable amount	
RRSP income (from all T4RSP slips	5)		129 +
Other income Specify:			130 +
Self-employment income Business income	Gross 162	Not	135 +
	Gross 164		137 +
	Gross 166		139 +
	Gross 168		141 +
	Gross 170		143 +
1 lorning in contro	110	1400	110
Workers' compensation benefits (bo	x 10 of the T5007 slip)	144	
Social assistance payments	17	145 +	
Net federal supplements (box 21 of	the T4A(OAS) slip)	146 +	
Add lines 144, 145, and 146. (See li	, , , ,		►147 + 0 00
Add lines 101, 104 to 143, and 147.	Th	nis is your total income.	150 = 000
		,	

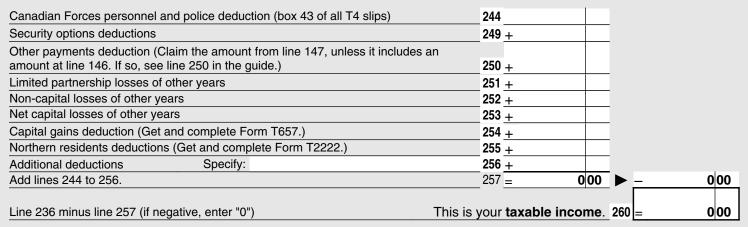
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Attach only the documents (schedules, information slips, forms, or receipts) **requested** to support any claim or deduction. Keep all other supporting documents.

Step 3 – Net income

Enter your total income from line 150.		150	0 00
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 T4', slips)	207		
RRSP and pooled registered pension plan (PRPP) deduction			
(See Schedule 7 and attach receipts.)	_ 208 _+		
Pooled registered pension plan (PRPP) employer contributions (amount from your PRPP contribution receipts) 205			
Deduction for elected split-pension amount (Get and complete Form Ti 732.)	210		
Annual union, professional, or like dues (receipts and box 44 of all T4 slips)	212 +		
Universal child care benefit repayment (box 12 of all RC62 slips)	21.\\ <u>-1.</u>		
Child care expenses (Get and complete Form T778.)	31 -, +		
Disability supports deduction (Get and complete Form Ty29.)	215 +		
Business investment loss Gross 228 Allowable deduction	217 ₊		
Moving expenses (Get and complete Form T1-N.)	219 +		
Support payments made Total 30 Allowable circulation	220 +		
Carrying charges and interest expenses (Co. mete the Worksheet for the inturn.)	221 +		
Deduction for CPP or QPP contributions on self-employment and other parnings			
(Complete Schedule 8 or get and complete Form RC381, which was a police.)	222 _+	•	
Exploration and development expenses (Get and completeorm 11229.)	224 _+		
Other employment expenses			
Clergy residence deduction (Get and complete Form 11253.)	_231 ₊		
Other deductions Specify:	_ 232 _+		
Add lines 207 to 224, 229, 231, and 232.		00	0 00
Line 150 minus line 233 (if negative, enter "5") This is your net incor	ne before adjustme	ents. 234 <u>= </u>	
Social benefits repayment (If you reported in co. he at I ne 119 and the amount at line 234 is great			
repayment chart on the back of your T4F slip. 'you reported income on lines 113 or 146, and the			
greater than \$75,910, complete the chart or line 235 on the Worksheet for the return. Otherwise,	, enter "U".)	235	
Line 234 minus line 235 (if ne rative, enter "0")	is is your net inco	me . 236 =	000

Step 4 - Taxable income



Step 5 - Federal tax Complete Schedule 1 to calculate your federal tax.

Step 6 – Provincial or territorial tax Complete Form 428 to calculate your provincial tax.

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Step 7 – Refund or balance owing	Protected B when completed
Net federal tax: enter the amount from line 61 of Schedule 1 (Attach Schedule 1, even if the result is "0".)	420
CPP contributions payable on self-employment and other earnings	420
(Complete Schedule 8 or get and complete Form RC381, whichever applies.)	421 +
Employment insurance premiums payable on self-employment and other eligible earnings (Complete 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 + 0 00
Add lines 420, 421, 430, 422, and 428. This is your total payable	. 435 = 0 00 •
Total income tax deducted (amounts from all Canadian slips) 437	_•
Refundable Quebec abatement (See line 440 in the guide.)	_•
CPP overpayment (See line 308 in the guide.) 448 +	_*
Employment insurance overpayment (See line 312 in the guide.) 450 +	_ •
Climate action incentive (Complete Schedule 14.) Potium de bla magnicul avvanue avvan	_ •
Refundable medical expense supplement (Complete the Works' eet for the return.) 452	_•
Working income tax benefit (WITB) (Complete Schedule 6.) 453 +	_*
Refund of investment tax credit (Get and complete Form T203c (IND).) 451.	- •
Part XII.2 trust tax credit (box 38 of all T3 slips and box 201 of 21 T5013 slips) Employee and partner GST/HST rebate (Get and complete Form GST370.) 457 +	-
	-
Eligible educator school supply tax credit	
Supplies expenses (maximum \$1,0.\0) 46 \\ \tag{469}_+	
Tax paid by instalments 476 +	_
Provincial or territorial credits (Comp. te 'orm 479, if it applies.) Add lines 437 to 457, and 469 to 479. These are voir trital credits. 482 = 000	-
Add lines 437 to 457, and 469 to 479. These are voir trial credits. $482 = 0000$ Line 435 minus line 482	
If the result is negatine, you have a refund . If the result is positive, you have a refund . If the result is positive, you have a refund . If the result is positive, you have a refund . If the result is positive, you have a refund . If the result is positive, you have a refund . If the result is positive, you have a refund . If the result is positive, you have a refund . If the result is positive, you have a refund . If the result is positive, you have a refund .	
Generally, we do not charge or refund a difference of \$2 or less.	▼
Refund 484 0 00 • Balance owing	485•
For more information on how to make your payment, see li	ne 485 in the guide or go
to canada.ca/payments . Your payment is due no	
Direct deposit – Enrol or updato By providing my banking information I authorize the Receiver General to deposit in the bank account number s amounts payable to me by the CFA, until otherwise notified by me. I understand that this authorization will re	
direct deposit authorization	
Branch number 460 Institution number 461 Account number 462	
	kimum 12 digits)
(5 digits) (6 digits) (max	diffulli 12 digits)
N-	
Ontario Ontario opportunities fund Amount from line 484 above	0 00 1
Your donation to the	
You can help reduce Ontario's debt by completing this area to Ontario opportunities fund	465_ • 2
donate some or all of your 2018 refund to the Ontario opportunities fund. Please see the provincial pages for details.	466= • 3
I certify that the information given on this return and in any If this return was completed by a tax provided the following the	
documents attached is correct and complete and fully discloses applicable box and provide the following	ig information.
all my income. Sign here 490 Was a fee charged? Yes	X 1 No 2
Sign here	5 0 0 4
	5 8 6 4
Telephone number: Name of tax professional: V.P.PAT	EL,CPA
Date Telephone number: 778 - 067 - 1	242
	· · · · · · · · · · · · · · · · · · ·
Personal information (including the SIN as a personal identifier) is collected for the purposes of the administration or enforcement of the Income and activities. This includes administering benefits, audit, compliance, and collection activities. It may be shared or verified with other federal, pr	· · · · · · · · · · · · · · · · · · ·
government institutions to the extent authorized by law. Failure to provide this information may result in interest payable, penalties or other action	ns. Under the Privacy Act,
individuals have the right to access their personal information, request correction, or file a complaint to the Privacy Commissioner of Canada reconditional information. Refer to Personal Information Bank CRA PPU 005 on Info Source at canada.ca/cra-info-source.	parding the handling of the
individuals personal information. Trefet to resonal information datik ond fro 003 off title Source at canada.ca/cra-into-source.	garding the nariding of the
Do not use 407 400 400	86

5006-R Page 4

Canada Revenue Agence du revenu

Information Return for Electronic Filing of an Individual's Income Tax and Benefit Return

Protected B when completed

Tax year: 2018

- The information found on this form corresponds to the tax year indicated on the right.
- Before you fill out this form, read the information and instructions on page 2 of this form.
- Part D must be signed by the individual identified in Part A or by the individual's legal representative. Your electronic filer must fill out Parts C (prior to your return being submitted) and Part E (once your return has been submitted).
- Give the signed original of this form to your electronic filer and keep a copy for yourself.

Part A – Identification and address as shown on your	return (n	nandator	y)			
First name	Last nam	ne			Social ins	urance number
SHRIKANT	DEV	/RE			5 4 8	0 0 4 3 4 0
Mailing address: Apt no – Street no Street name	PO Box	RR	City			Postal code
26 PENNYROYAL CRES			BRAMPTON	I	ON	L6S6J7
Get your CRA mail electronically delivered in My Acco	ount at ca	anada.ca	a/mv-account (or	otional)		
Email address:			arrij decemii (ep			
By providing an email address, I am registering to receive email r	otification	s from the	CRA and I agree to	the Terms of use on pag	e 2 of this	form.
Part B – Declaration of amounts from your General Inc	come Ta	x and Be	enefit Return (ma	indatory)		
Enter the following amounts from your return, if applicable:						
Total income (line 150)				Refund (line 484)		0.00_
Taxable income (line 260)		4 77	4.05	or		0.00
Total federal non-refundable tax credits (line 350 of Schedule 1).		1,77	1.35	Balance owing (line 485)	· · · · · —	0.00
Part C – Electronic filer identification (mandatory)						
By signing Part D below, I declare that the following person or firm		onically fili	ng the T1 return or t	the amended T1 return of t	the persor	n named in Part A.
Part D must be signed before the return is electronically transmi	tted.					
Name of person or firm: V.P.PATEL,CPA				Electronic filer number:	F58	64
Part D – Declaration and authorization (mandatory)						
I declare that the information entered in Part $\bf A, B$ and $\bf C$ is correct the information on page 2 of this form, and that the electronic files to correct any errors or omissions.						
Signature (individual identified in Part A or legal representative)	Nam	e and title o	of legal representative	Yea	r Mon	th Day
Part E – Document Control number (mandatory)						
The document control number generated for my electronic record Part F – Delivery of your notices of assessment and re			selection must be	made)	_	
, ,		,		,		
How do you want to receiv	•			d reassessment?		
I am registering (as indicated in Part A above) or I am alrea			lectronic options: eive email notification	ons from the CRA and can	view and	l access my notices
of assessment and reassessment online. I would like my electronic filer to receive a one time notice of	of assessr	ment and	reassessment electr	ronically in their software a	nd provid	e me with a copy.
Provide your electronic filer with authorization by filling out F		•	o o	•		
I understand that ticking the box above (\$\sqrt{1}\$) I am allowing the reassessment to the electronic filer (including a discounter) namy electronic filer. For more information, see page 2 of this form	ned in par	ectronicall t C. I will	y provide my assess now receive a copy	sment results and my notice of my notices of assessme	es of ass ent and re	essment and assessment from
		OR				
X I would like to receive paper notices of assessment and rea	assessme	nt through	Canada Post.			
I will receive my notices of assessment and reassessment throu registered to receive email notifications from the CRA and I tick						
Part G – Pre-authorized debit agreement (optional)						
Do you want to pre-authorize the CRA to withdraw a sp	ecified an	nount fro	m your bank accou	unt? If so, fill in the infor	mation be	elow:
I hereby authorize the electronic filer to create this personal pre my bank account as per the agreement details listed below. I ac page 2 of this form.						
Signature		-	Year M	onth Day		
One time payment for your Individual income tax (T1), to be withdrawn o	n L	ar Mor	, for the ar	mount of		

Privacy Act, personal information bank numbers CRA PPU 005 and CRA PPU 175

T183 E (18)

Disclaimer: Prepared without audit or verification from information supplied by the client.

Page 1 of 2 Canada

Information and instructions

Terms of use for Email Notifications

The Canada Revenue Agency (CRA) will send email notifications to the email address you have provided in order to notify you of any CRA mail available in My Account, and to notify you of certain changes to the account information, and other important information about the account. The notifications that are eligible for this service may change. As new types of notifications are added or removed from this service, you may not be notified of each change.

To view CRA mail online, you must be registered for My Account, and/or your representative must be registered for Represent a Client and be authorized on this account. All CRA mail available in My Account will be presumed to have been received on the date that the email notification is sent. Any mail that is eligible for electronic delivery will no longer be printed and mailed.

It is your responsibility to ensure that the email address provided to the CRA is accurate, and to update it when there is any change to that email address. CRA email notifications are subject to the terms of any agreement with your mobile carrier or Internet Service Provider. You are responsible for any fees imposed by them.

These email notifications are sent unencrypted and unsecured. The email notifications could be lost or intercepted, or could be viewed or altered by others who have access to your email account. You accept this risk and acknowledge that the CRA will not be liable if you are unable to access or receive the email notifications, nor for any delay or inability to deliver notifications.

These terms of use may be changed from time to time. The CRA will provide notice in advance of the effective date of the new terms. You agree that the CRA may notify you of these changes by emailing either the new terms, or notice of where the new terms can be found, to the email address that you provided. You agree that your use of the service after the effective date of any change to these terms constitutes your agreement to the new terms. If you do not agree to the new terms, you must remove the email address provided and no longer use the service.

Part D – Declaration and authorization (mandatory)

If your return is being sent by EFILE, you have to fill out Parts **A**, **B**, and **D**. By signing Part **D**, you acknowledge that under the Income Tax Act you have to:

- keep all records used to prepare your return for a period of six years, and provide this
 information to us on request
- give the signed original of this form to the electronic filer named in Part C, and keep a copy for yourself

By signing Part **D**, you declare that the electronic filer named in Part **C** is electronically filing your T1 return or your amended T1 return on your behalf. If there are any errors or omissions on your return, you authorize us to:

- · disclose these errors or omissions to the electronic filer
- if necessary, give the electronic filer your personal taxpayer information

You also authorize the electronic filer to correct errors if your return is rejected by making changes and transmitting your return again so we can accept it for electronic filing. The filer can do this as long as your refund or balance owing shown in Part B is not changed by more than \$300.

By signing Part **D**, you declare that the electronic filer named in Part **C** is authorized to provide your email address to the CRA for the purpose of you receiving your CRA correspondence electronically if you choose one of the electronic options included on this form.

By signing Part **D**, you acknowledge that we are responsible for ensuring the confidentiality of your electronically filed tax information **only** after we have accepted it.

In the case of a **trustee** or **legal representative** signing Part **D**, you declare that the information entered in Part **A** and the amounts showing in Part **B** are correct and complete, and fully disclose the income from all sources of the taxpayer you represent. If you are the executor or legal representative for a **deceased person**, you must give a copy of the death certificate to the electronic filer.

If you are a **farmer**, and with your return you apply to participate in the AgriStability and AgriInvest programs, by signing Part **D**, you authorize the CRA to share information from your income tax return with the minister of Agriculture and Agri-Food Canada. You also authorize the minister to share the information with provincial ministers of agriculture and administrators of other federal and provincial farm programs. You further authorize the minister of Agriculture and Agri-Food Canada to share any other information that you provide as your application is processed.

For more information on confidentiality, refer to Form T1273, Statement A - Harmonized AgriStability and AgriInvest Programs Information and Statement of Farming Activities for Individuals at canada.ca/cra-forms.

Part F – Delivery of your notices of assessment and reassessment

Use this part of the form to tell us how you want the CRA to deliver your notices of assessment and reassessment.

Already registered to receive email notifications from the CRA? If you are already registered to receive email notifications from the CRA, you must tick the first box in Part F on page 1 of this form.

Express NOA – Electronic filer will receive your notices of assessment and reassessment

After reading and agreeing with the information below, if you would like your electronic filer to receive your notices of assessment and reassessment through their software, you must select the second tick box in Part **F** on **page 1** of this form.

Your electronic filer must have a valid Form T1013, Authorizing or Cancelling a Representative on file with the CRA in order to receive your notices of assessment and reassessment.

If you tick the box to have your notices of assessment and reassessment made available electronically to your electronic filer, including discounters, named in Part **C**, the CRA **will not send you** a paper copy of the notices of assessment and reassessment.

If you are receiving a tax refund and you have not signed up for direct deposit, we will make the notice available electronically to your electronic filer and your refund cheque will be mailed to you. If your return is being discounted and you are receiving a tax refund, your refund and notice of assessment will be sent to the discounter. In order for your discounter to receive the Express NOA, please select the electronic option by ticking the second box in Part F on page 1 of this form

This electronic option is valid for current tax year assessments and reassessments only, and will not affect all other correspondence, any CCB, GST/HST credit and related provincial payments, WITB advance payment, or any other deemed overpayment of tax.

Paper notices of assessment and reassessment

If you tick the last box in Part **F** on **page 1** of this form, you will receive your notices of assessment and reassessment through Canada Post once your return or amended return has been assessed. If you have already registered to receive email notifications from the CRA and you have ticked this box, you will **not** receive a copy of your notice through Canada Post.

Part G - Pre-authorized debit agreement (optional)

Pre-authorized debit (PAD) is an online payment option. Through this option, you agree to authorize the CRA to withdraw a pre-determined amount from your bank account to pay tax on a specific date.

To cancel or modify your PAD

If you would like to cancel or make changes to your PAD agreement, go to canada.ca/my-cra-account and select CRA Login/Register. Any changes made will require 5 business days to take effect. You can also submit your request to the CRA by fax at 204-983-0924, or mail it to the following address:

Pads Unit Revenue Processing Section Winnipeg Tax Centre 66 Stapon Road Winnipeg MB R3C 3M2

Please note that changes submitted to the CRA by fax or mail may take up to 30 days to take effect. If you do not inform the CRA of such changes on time, you may be subject to a fee if the financial institution is unable to process a debit according to your agreement.

Recourse rights

You have the right to receive a reimbursement for any payment that is not authorized within the terms of this PAD agreement. For more information on your rights to cancel your PAD agreement or on your recourse rights, contact your financial institution or visit payments.ca

Account authorization

You guarantee that you have full authority for completing a pre-authorized debit from your bank account.

T1-2018

Federal Tax

Schedule 1

This schedule represents **Step 5** in completing your return. Complete this schedule and **attach** it to your return.

Claim only the credits that apply to you.

The Income Tax and Benefit Guide may have additional information for certain lines.

Step A – Federal non-refundable tax credits

Basic personal amount	claim \$11,809	300	11,809 00	1
Age amount (if you were born in 1953 or earlier) (Complete the Worksheet for Schedule 1.)	(maximum \$7,333		, , , , , , ,	2
Spouse or common-law partner amount (Complete Schedule 5.)		303+		3
Canada caregiver amount for spouse or common-law partner, or eligible dependant ag (Complete Schedule 5.)	e 18 or older	304+		4
Amount for an eligible dependant (Complete Schedule 5.)		305+		5
Canada caregiver amount for other infirm dependants age 18 or older (Complete Sche	dule 5.)	307+		6
Canada caregiver amount for infirm children under 18 years of age Enter the number of children for whom you are claiming this amount 352	x \$2,182 =	367+		7
CPP or QPP contributions: through employment from box 16 and box 17 of all T4 slips (Complete Schedule 8 or get and complete Form RC381, whichever applies.)		308+		_ • 8
on self-employment and other earnings (Enter the amount from line 222 of your return.)		310+		• 9
Employment insurance premiums:				
through employment from box 18 and box 55 of all T4 slips	(maximum \$858.22			•10
on self-employment and other eligible earnings (Complete Schedule 13.)		317+		•11
Volunteer firefighters' amount		362+		_ 12
Search and rescue volunteers' amount		395+		_ 13
Canada employment amount (Enter \$1,195 or the total of your employment income you lines 101 and 104 of your return, whichever is less .)	u reported on	363+		14
Home accessibility expenses (Complete the Worksheet for Schedule 1.)	(maximum \$10,000) <mark>398</mark> +		15
Home buyers' amount		369 +		16
Adoption expenses		313+		17
Pension income amount (Complete the Worksheet for Schedule 1.)	(maximum \$2,000) <mark>314</mark> +		18
Disability amount (for self) (Claim \$8,235 or if you were under 18 years of age, complete the Worksheet for Sched	dule 1.)	316+		19
Disability amount transferred from a dependant (Complete the Worksheet for Schedule	: 1.)	318 ₊		20
Interest paid on your student loans (See Guide P105.)		319+		21
Your tuition, education, and textbook amounts (Complete Schedule 11.)		323+		22
Tuition amount transferred from a child		324+		23
Amounts transferred from your spouse or common-law partner (Complete Schedule 2.))	326+		24
Medical expenses for self , spouse or common-law partner , and your dependent children born in 2001 or later		25		
Enter \$2,302 or 3% of line 236 of your return, whichever is less.		26		
Line 25 minus line 26 (if negative, enter "0")	000 2	27		
Allowable amount of medical expenses for other dependants (Complete the Worksheet for Schedule 1.) 331+	- 2	28		
Add lines 27 and 28.	000	>332+	000	29
Add lines 1 to 24, and line 29.	<u> </u>	335 ₌	11,809 00	30
Federal non-refundable tax credit rate		×	15%	31
Multiply line 30 by line 31.		338=	1,771 35	32
Donations and gifts (Complete Schedule 9.)		349+		33
Add lines 32 and 33. Enter this amount on line 46 on the next page. Total federal non-re	fundable tax credits		1,771 35	34

Step B – Federal tax on taxable income	Protected B when completed
Enter your taxable income from line 260 of your return.	35
Complete the appropriate column depending on the amount on line 35. Enter the amount Line 35 is some than \$46,605 but not more than not more than \$93,208 but not more than \$93,208 \$144,489 \$205,842	Line 35 is more than \$205,842
from line 35. Line 36 minus line 37 (cannot be negative) Multiply line 38 by line 39. Add lines 40 and 41. Constant be negative Co	36 - 205,842,00 37 = 38 x 33% 39 = 40 + 47,670,00 41 = 42
Step C – Net federal tax Enter the amount from line 42.	43
Federal tax on split income (Get and complete Form T1206.) 424 + Add lines 43 and 44. 404 = 000	•44 ▶000 45
Minimum tax carryover (Get and complete Form T691.) 427 +	46 • 47 • 48
Add lines 46, 47, and 48. = 1,771 35 Line 45 minus line 49 (if negative, enter "0") Basic federal tax 4	$\begin{array}{cccccccccccccccccccccccccccccccccccc$
Federal foreign tax credit (Get and complete Form T2209.)	105 51
Line 50 minus line 51 (if negative, enter "0")	106 <u>= 000</u> 52
Total federal political contributions (attach receipts) 409 53	
Federal political contribution tax credit (Complete the Worksheet for Schedule 1.) (maximum \$650) 410	•54
Labour-sponsored funds tax credit (See lines 413 and 414 in the guide.) Net cost of shares of a provincially	•55
Add lines 54, 55, and 56. 416 = 0 00	<u>− 000</u> 57
	117 <u>= 000</u> 58
Working income tax benefit advance payments received (box 10 of the RC210 slip)	•59
	118+ 60
Add lines 58, 59, and 60. Enter this amount on line 420 of your return. Net federal tax 4	420 = 0 00 61

Complete Form 428 to calculate provincial or territorial tax.

Ontario

Ontario Tax

Form ON428 2018

Protected B when completed

This is **Step 6** in completing your return. Complete this form and **attach a copy** to your return. Claim only the credits that apply to you.

Part A – Ontario non-refundable tax credits					
	For internal use only			,	
Basic personal amount	claim \$10,354			10,354 00	1
Age amount (if born in 1953 or earlier) (use Worksheet ON428)	(maximum \$5,055)	5808	+		. 2
Spouse or common-law partner amount Base amount	9,671 00				
Minus: their net income from page 1 of your return	_				
Result: (if negative, enter "0")	= 000 (maximum \$8,792) ▶	5812	+	0 00	3
Amount for an eligible dependant					
Base amount	9,671 00				
Minus: their net income from line 236 of their return					
Result: (if negative, enter "0")	= 0 00 (maximum \$8,792) ▶	5816		0 00	4
Ontario caregiver amount (use Worksheet ON428)		5819	+		5
CPP 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
Adoption expenses	(maximum \$12,632)	5833			10
Pension income amount	(maximum \$1,432)	5836	+		11
Disability amount (for self) (Claim \$8,365, or if you were under 18 years of age, use Wor	ksheet ON428.)	5844	+		12
Disability amount transferred from a dependant (use Workshee	t ON428)	5848	+		13
Interest paid on your student loans (amount from line 319 of you	ur federal Schedule 1)	5852	+		14
Your unused tuition and education amounts (attach Schedule C	DN(S11))	5856	+		15
Amounts transferred from your spouse or common-law partner	(attach Schedule ON(S2))	5864	+		16
Medical expenses:					
(Read line 5868 in your income tax package.)	5868	17			
Enter \$2,343 or 3% of line 236 of your return, whichever is le		18			
Line 17 minus line 18 (if negative, enter "0")	=	19			
Allowable amount of medical expenses for other dependants (use Worksheet ON428)	5872 +	20			
Add lines 19 and 20.	5876 = 0 00	-	+	000	21
Add lines 1 to 16, and line 21.		5880	=	10,354 00	22
Ontario non-refundable tax credit rate			×	5.05%	23
Multiply line 22 by line 23.		5884	=	522 88	24
Donations and gifts:					-
Amount from line 16 of your federal Schedule 9	× 5.05% =	25			
Amount from line 17 of your federal Schedule 9	× 11.16% = +	26			
Add lines 25 and 26.	5896 = 000	- .	+	000	27
Add lines 24 and 27.	000	-	•	303	
Enter this amount on line 40.	Ontario non-refundable tax credits	6150	=	52288	28
				<u> </u>	

Continue on the next page.

Part B – Ontario tax o	on tax	able inco	me												
Enter your taxable income from	om line 2	260 of your re	turn.								_				29
Use the amount from line 29 to decide which column to complete.		ine 29 is ,960 or less	\$4	29 is more 2,960 but r e than \$85 ,	ot	\$8	29 is more 35,923 but n e than \$150	ot	\$1	e 29 is more 50,000 but te than \$220	not		ine 29 is mo han \$220,00		
Amount from line 29		000													30
Line 30 minus line 31		0.00		42,960	00		85,923	.00		150,000	00		220,000	00	31
(cannot be negative)	=	0 00 5.05%	=	9.15	0/	=	11.16	0/	=	12.16	20/	=	12.16	0/	32
Multiply line 32 by line 33.	=	000	<u>×</u>	9.10	70	<u>×</u>	11.10	70	<u>×</u>	12.10	76	<u>×</u>	13.16	70	34
Add lines 34 and 35.	+	0.00	+	2,169	00	+	6,101	00	+	13,252	00	+	21,764	00	35
Ontario tax on				•			,			,			•		20
taxable income	_ =	0 00	_=_						=_			.=_			36
Part C – Ontario tax															
Enter your Ontario tax on taxa															37
Enter your Ontario tax on split Add lines 37 and 38.	t income	from Form 1	1206.								6151	<u>+</u> =			• 38 39
Enter your Ontario non-refund	dable tax	credits from	line 28								_	=	522	88	
Line 39 minus line 40 (if nega			0 20	•							-	=		00	4
Ontario minimum tax carryo	· · · · · · · · · · · · · · · · · · ·	,									-			,	
Amount from line 41										0 00	42				
Enter your Ontario dividend ta			2 of W	orksheet (ON42	28.				0 00	43				
Line 42 minus line 43 (if nega	tive, ente	er "0").						=			_ 44				
Amount from line 427 of your	federal S	Schedule 1				× 33.	.67% =				45				
Amount from line 44 or 45, wh	nichever	is less .									6154	1 –			• 46
Line 41 minus line 46 (if nega	itive, ente	er "0")									_	=_			47
Ontario surtax															
Amount from line 47											48				
Amount from line 38								_			_ 49				
Line 48 minus line 49 (if nega	itive, ente	er "0")						=		0 00	_ 50				
Complete lines 51 to 53 only i Otherwise, enter "0" on line 53					\$4,63	88.									
`		us \$4,638) ×									51				
·	00 min	us \$5,936) ×	36% (if negativ	e, en	ter "0") =	+			52				
Add lines 51 and 52.								=		0 00	_ ▶	+	0	00	53
Add lines 47 and 53.											-	=_			54
Ontario dividend tax credit:			0 ()4/		3						6152			امما	/
	194	(II 04 =			INI/I'	' X					13.12	4 —	n	00	• 5
Enter your Ontario dividend to			2 01 00	orksneet	JIN42	-0.					UIU				50
Line 54 minus line 55 (if nega	tive, ente	er "0")		orksneet	JIN42	.0.					-	=			56
Line 54 minus line 55 (if nega Ontario additional tax for m	tive, ente	er "0") tax purpose	s:				ntario addi	tions	l tav		-				56
Line 54 minus line 55 (if nega	itive, ente i inimum er than "C	er "0") tax purpose o" on line 95 c	s: of Form	n T691, er			ntario addi	tiona	l tax		-				57

Continue on the next page.

Enter the amount from line 58 on the previous page.

000

59

Part D – Ontario tax reduction

Enter "0" on line 66 if **any** of the following applies to you:

- You were not a resident of Canada at the beginning of the year;
- You were not a resident of Ontario on December 31, 2018;
- There is an amount on line 57;
- The amount on line 59 is "0":
- Your return is filed for you by a trustee in bankruptcy;
- You are not claiming an Ontario tax reduction.

Otherwise, complete lines 60 to 66 to calculate your Ontario tax reduction.

Basic reduction 239.00 60 If you had a spouse or common-law partner on December 31, 2018, only the individual with the higher net income can claim the amounts on lines 61 and 62. Reduction for dependent children born in 2000 or later Number of dependent children 6269 884 00 2 × \$442 = 61 Reduction for dependants with a mental or physical impairment Number of dependants 6097 62 × \$442 = Add lines 60, 61, and 62. 1,123 00 Amount from line 63 1,123 00 2,246 00 Amount from line 59 000 65 Line 64 minus line 65 (if negative, enter "0") Ontario tax reduction 2,246 00 2,246 00 66 Line 59 minus line 66 (if negative, enter "0") 000 67

Part E - Ontario foreign tax credit

Enter the Ontario foreign tax credit from Form T2036.

Line 67 minus line 68 (if negative, enter "0")

68

Enter the Ontario foreign tax credit from Form T2036.

— 68

Enter the Ontario foreign tax credit from Form T2036.

Part F – Community food program donation tax credit for farmers

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

6098

× 25% = - 70

The 69 minus line 70 (if negative, enter "0")

6098

Fig. 1098

Part G - Ontario health premium

Use the chart on the next page to calculate the amount of your Ontario health premium.

Add lines 71 and 72.

Enter the result on line 428 of your return.

Ontario tax

Ontario health premium.

+ 0 00 72

= 0 00 73

Continue on the next page.

Ontario Health Premium

Enter the amount from line 29.

Go to the line on the chart below that corresponds to your taxable income from line 260 of your return.

If there is an Ontario health premium amount on that line, enter that amount on line 72.

If not, enter your taxable income in the first box on the line that corresponds to your taxable income and complete the calculation.

Enter the result on line 72.

Taxable income					Ontario	health premium
not more than \$20,000	>		•		•	\$0
more than \$20,000 , but not more than \$25,000		\$20,000 =	×	6% =		
more than \$25,000 , but not more than \$36,000	>		•		>	\$300
more than \$36,000 , but not more than \$38,500		- \$36,000 =	×	6% =	+ \$3	300 =
more than \$38,500, but not more than \$48,000	•		>		>	\$450
more than \$48,000 , but not more than \$48,600		- \$48,000 =	×	25% =	+ \$4	450 =
more than \$48,600 , but not more than \$72,000	•		•		>	\$600
more than \$72,000 , but not more than \$72,600		- \$72,000 = <u></u>	×	25% =	+ \$6	600 =
more than \$72,600 , but not more than \$200,000	•		•		>	\$750
more than \$200,000 , but not more than \$200,600		\$200,000 =	×	25% =	+ \$7	750 =
more than \$200,600	>		>		>	\$900

See the privacy notice on your return.

name: SHRIKANT DEVRE SIN: 548004340



Ontario Credits

Form ON479 2018

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Complete the calculations that apply to you and attach a copy of this form to your return.

For more information about these credits, see the relacomplete Form ON-BEN to apply for the Ontario trillium.						•	•	kage.	
Ontario seniors' public transit tax cre Amount paid in the year for eligible seniors' use	edit								
of Ontario public transit services	(maximum \$3,000)	6305		×	15% =				_ 1
Ontario political contribution tax cred	lit								
Ontario political contributions made in 2018			6310			2			
Credit calculated for line 3 on Worksheet ON479				(maximur	n \$1,354)		+		3
Ontario focused flow-through share t	av credit								
Enter your total expenses from line 4 of Form T1221.		6266		×	5% =		+		4
Add lines 1, 3 and 4.									_ `
If you are not claiming Ontario tax credits for self-emple to the control of th									_
enter the amount from line 5 on line 479 of your return	n.						=	0 00	_ 5
Ontario tax credits for self-employed	individuals								
Number of eligible apprentices your business or partr									
under the Ontario apprenticeship training tax credit pr	rogram	6324							
Number of eligible work placements your business or		000=							
claiming under the Ontario co-operative education tax	· · ·	6325							
Are you claiming one or more of these tax credits as a of a partnership?	a member	6326 1	Yes	2	No				
or a partifership:		0520	162	2 📙	INO				
If yes , enter the nine digits of your business number.		6327							
Ontario apprenticeship training tax credit									
Credit calculated for line 6 on Worksheet ON479					ı	6322	_		• 6
Credit calculated for line 0 off Worksheet O1479						0322	•		_•6
Ontario co-operative education tax credit									
Credit calculated for line 7 on Worksheet ON479						6320	+		_ • 7
Add lines 5, 6, and 7.									
Enter the result on line 479 of your return.				Ontario	credits		=	0 00	<u>/</u> 8

See the privacy notice on your return.



Application for the 2019 Ontario Trillium Benefit and Ontario Senior Homeowners' Property Tax Grant

Form ON-BEN 2018

Protected B when completed

- To find out if you are eligible for the Ontario trillium benefit and the Ontario senior homeowners' property tax grant, see the "Information for residents of Ontario" section of your 2018 Income tax package.
- Complete the application areas that apply to you and attach this form to your return.
- To estimate the amount of Ontario trillium benefit and Ontario senior homeowners' property tax grant you may be entitled to, use the
 calculator at canada.ca/child-family-benefits-calculator.
- The payments for these benefits will be issued separately from your tax refund.
- If you were married or living in a common-law relationship on December 31, 2018, the same spouse or common-law partner has to apply for the Ontario energy and property tax credit, the Northern Ontario energy credit, and the Ontario senior homeowners' property tax grant for both of you. If only one spouse or common-law partner is 64 years of age or older on December 31, 2018, that spouse or common-law partner has to apply for these credits and the grant for both of you.
- For a description of **principal residence** for the purposes of the Ontario energy and property tax credit and the Northern Ontario energy credit, or the Ontario senior homeowners' property tax grant, see the "Information for residents of Ontario" section of your tax package.

Ontario trillium benefit (OTB)

Ontario sales tax credit (OSTC)

You do not need to apply for the OSTC when you file your tax return. The Canada Revenue Agency will determine your eligibility and tell you if you are entitled to receive the credit. In cases of families, the OSTC is paid to the person whose return is assessed first.

Application for the Ontario energy and property tax credit (OEPTC)

You may qualify for the OEPTC if, on December 31, 2018, you resided in Ontario, and any of the following applies:

- rent or property tax for your principal residence was paid by or for you for 2018
- you lived in a student residence
- you lived in a long-term care home and an amount for accommodation was paid by or for you in 2018
- you lived on a reserve and home energy costs were paid by or for you for your principal residence on the reserve for 2018

If you meet any of these conditions and are applying for the 2019 OEPTC, tick this box.

6118

Complete Parts A and B on the back of this form.

Application for the Northern Ontario energy credit (NOEC)

You may qualify for the NOEC if, on December 31, 2018, you resided in Northern Ontario (see the definition in the "Information for residents of Ontario" section of your tax package), and **any** of the following applies:

- rent or property tax for your principal residence in Northern Ontario was paid by or for you for 2018
- you lived in a long-term care home in Northern Ontario and an amount for accommodation was paid by or for you in 2018
- you lived on a reserve in Northern Ontario and home energy costs were paid by or for you for your principal residence on the reserve for 2018

If you meet any of these conditions and are applying for the 2019 NOEC, tick this box.

6119

Complete Parts A and B on the back of this form.

Choice for delayed single OTB payment

By ticking box 6109, I am choosing to **wait until June 2020** to get my 2019 OTB entitlement. This means I will get my OTB in **one payment** at the end of the benefit year (June 2020) instead of receiving it monthly from July 2019 to June 2020.

6109

Continue on the next page.

- Application for the Ontario senior homeowners' property tax grant (OSHPTG)											
You may qualify for the OSHPTG if, on December 31, 2018, both of the following conditions apply:											
 you were 64 years of age or older you owned and occupied a principal residence in Ontario for which you, or someone on your behalf, paid property tax for 2018 											
If you meet these conditions and are applying for the 2019 OSHPTG, tick this box.											
Enter the total amount of property tax paid beside box 6112 in Part A and complete Part B below.											
Part A – Amount paid for a principal residence for 2018 ————————————————————————————————————											
If, on December 31, 2018, you and your spouse or common-law partner occupied separate principal residences for medical reasons and you are choosing to apply individually for the OEPTC, the NOEC, or the OSHPTG, tick box 6108 and enter your spouse's or common-law partner's address in Part C below.											
Enter the total amount of rent paid for your principal residence (including a private long-term care home) in Ontario for 2018. (Do not enter rent paid for a principal residence that was not subject to property tax. If you lived in a subsidized housing unit, you should check with your landlord to find out if property tax was paid for the unit before entering an amount.) 6110											
Enter the total amount of property tax paid for your principal residence in Ontario for 2018. (If your municipality let you defer all or some of your 2018 property tax, you should enter only the amount of property tax actually paid to the municipality for the year.)											
Did you reside in a designated student residence in Ontario in 2018? If yes , tick this box. 6114											
Enter the total amount of home energy costs paid for your principal residence on a reserve in Ontario for 2018.											
Enter the total amount paid for your accommodation in a public long-term care home or non-profit long-term care home in Ontario for 2018.											
Complete Part B if you are applying for the OEPTC, the NOEC, or the OSHPTG.											
Part B – Declaration											
In the column "Amount paid for 2018", enter the amount(s) paid for rent, property tax, home energy costs on a reserve, and/or accommodation in a public long-term care home or a non-profit long-term care home.											
I declare the following information about my principal residence(s) in Ontario during 2018:											
(If you need more space, attac	h a separate :	sheet of paper.)									
Address	Postal code	Number of months resident in 2018	Amount paid for 2018	Check this box if this is a "long-term care home"	Name of landlord, municipality, or supplier to whom payment was made, as applicable						
 Part C – Involuntary : 	separatio	n ———									
If, on December 31, 2018, you and your spouse or common-law partner occupied separate principal residences in Ontario for medical reasons and you are choosing to apply individually for the OEPTC, the NOEC, or the OSHPTG, enter your spouse's or common-law partner's address below.											
Address of your spouse or common-law partner:											