Tax return for 2016 prepared for **Yingxu Rong** by *UFile.ca*

Executive summary

for 2016 taxation year



Taxpayer

Name	Yingxu Rong	Hongyu Ji
Social insurance number	738-423-219	738-423-185
Date of birth	06-03-1969	18-05-1969
Province of residence	British Columbia	British Columbia
Street	89-935 Ewen Ave	89-935 Ewen Ave
City	New Westminster	New Westminster
Province	British Columbia	British Columbia
Postal code	V3M 0A1	V3M 0A1
Home phone number	6042533858	6042533858
Work phone number		7788878868

Federal return

		Taxpayer	Spouse	Total for the couple
Total income	150	41,852	(3,443)	38,410
Net income	236	41,852		41,852
Taxable income	260	41,852		41,852
Marginal tax rate		23%	0%	
Average tax rate (total income taxes paid ÷ total	al income)	6.9%	0.0%	
Total tax payable	435	2,900		2,900
Balance due (refund)	484 or 485	(2,464)		(2,464)
Canada child benefit				
GST/HST credit			289	289
Alternative minimum tax				
Total AMT credit to carry over				
Total RRSP deduction limit - 2017		56,079	0	56,079
Unused RRSP contributions				
Capital gain exemption available		500,000	500,000	1,000,000
Cumulative net investment loss (CNIL)				
Total instalments payable in 2017				

Tax return Summary - Combined for 2016 taxation year



		Taxpay	/er		Spouse	4
Name	Yingxu Ron		701	Hongyu Ji	opouse	,
Social insurance number	738-423-219	_		738-423-185		
Date of birth	06-03-1969			18-05-1969		
Province of residence	British Colum	nbia		British Columb	ia	
Street	89-935 Ewer			89-935 Ewen A		
City	New Westmi			New Westmins	ter	
Province	British Colum	nbia		British Columb	ia	
Postal code	V3M 0A1			V3M 0A1		
Home phone number	6042533858			6042533858		
Work phone number				7788878868		
	Federal re	turn				
Total income			Taxpayer	Spouse		Total
Employment income		101	40,904 40	•	=	40,904 40
RRSP income		129	948 00	+ 754 0	0 =	1,702 00
Net business income		135		+ (4,196	<u>0) = </u>	(4,196 90)
Add lines 101, 104 to 143, and 147.						
-	r total income.	150	41,852 40	+ (3,442)	0) =	38,409 50
Net income						
Line 150 minus line 233 (if negative, enter "0") This is your net income before	ore adjustments	234	41,852 40	.	_	41,852 40
Line 234 minus line 235 (if negative, enter "0")	ore adjustinents.	204	41,002 40	r t	٦Ē	41,002 40
	ur net income.	236	41,852 40	+ 00	0	41,852 40
Taxable income						
Line 236 minus line 257 (if negative, enter "0")						
Step 1 - Federal non-refundable tax cree	axable income.	260	41,852 40	+ 00	0 ⊨	41,852 40
	uito	200	11,474 00	+ 11,474	0 –	22,948 00
Basic personal amount Spouse or common-law partner amount		300	11,474 00			11,474 00
CPP or QPP contributions: through employment		308	1,851 50		_ =	1,851 50
Employment Insurance premiums		312	738 48		_ =	738 48
Canada employment amount		363	1,161 00		_ =	1,161 00
Public transit amount		364	884 27	+		884 27
Medical expenses for self, spouse or common-law partner	er, and your child					55.12.
, , , , , , , , , , , , , , , , , , ,	, ,	330		+ 1963	<u>66 = </u>	196 36
Subtotal (if ne	egative, enter "0")	(A)		+ 1963		196 36
·	ines (A) and 331.	332		+ 1963	6 =	196 36
Add	lines 300 to 332.	335	27,583 25	+ 11,670	<u>6 = </u>	39,253 61
Multiply the amount on	line 335 by 15%.	338	4,137 49	+ 1,750 5	<u>5 = </u>	5,888 04
Donations and gifts		349	261 80	+	ᅳ	261 80
Total federal non-refun					_	
	nes 338 and 349.	350	4,399 29	+ 1,750 5	<u>5</u>] ⊨	6,149 84
Step 3 - Net federal tax				1		
Tax on taxable income		(C)	6,277 86	+	_ =	6,277 86
	ines (C) and 424.	404	6,277 86	+	_ =	6,277 86
Enter the amount from line 350.		350	4,399 29	+ 1,750 5		6,149 84
	lines 350 to 427.		4,399 29	+ 1,750 5	<u>5 </u>	6,149 84
Basic federal tax (if ne		429	1,878 57	+	_ =	1,878 57
Line 400 minus line 440 (f	Federal tax	406	1,878 57	+	_ =	1,878 57
Line 406 minus line 416 (if ne	egative, enter "0")	417	1,878 57	+	_ =	1,878 57
Refund or Balance owing			I	1		1
	17, 415 and 418.	420	1,878 57		0 =	1,878 57
Provincial or territorial tax		428	1,020 95	+ 0 0	0 =	1,020 95

Tax return Summary - Combined for 2016 taxation year

		Taxpayer	Spouse		l otal
This is your total payable.	435	2,899 52	+ 0 00		2,899 52
Total income tax deducted	437	5,363 90	+	=	5,363 90
These are your total credits.	482	5,363 90	+	=	5,363 90
Line 435 minus line 482		(2,464 38)	+	<u>=</u>	(2,464 38)
Refund	484	2,464 38	+ 0 00		2,464 38
Balance owing	485	0 00	+ 0 00		0 00
Additional information					
Marginal tax rate		23%	0%		
Average tax rate (total income taxes paid ÷ total income)		6.9%	0.0%		
GST/HST credit			+ 288 83	=	288 83
Total RRSP deduction limit - 2017		56,078 92	+ 0 34	=	56,079 26
Capital gain exemption available		500,000 00	+ 500,000 00		1,000,000 00

Tax return Summary for 2016 taxation year



Name			Tayı	าลงค	r
Social insurance number 738-422-219 73	Name	Yingxu Ro		Juyo	
Date of birth Ob-03-198 Province of residence Strisch Columbia Strisch Columbia Strisch Columbia Strisch Columbia Strisch Columbia Province Province Strisch Columbia Province	Social insurance number				
Street	Date of birth				
Province	Province of residence				
Province	Street	89-935 Ewe	en Ave)	
Province Protect Pr	City				
Pastal code May May May May May May May May May May May May May	-	British Colu	mbia		
Total income		V3M 0A1			
Total income	Home phone number	604253385	8		
Total income	·				
Employment income 101 40,904 40 40,805 40,805 4	Fed	eral return			
Employment income	Total income				Taxpaver
RRSP ncome 159	Employment income		101		
Net income	•		129 -	+	
Line 150 minus line 233 (if negative, enter "0") This is your net income before adjustments. 234	Add lines 101, 104 to 143, and 147.	This is your total income.	150 =	₌□	41,852 40
Line 234 minus line 235 (if negative, enter "0") Taxable income Line 236 minus line 257 (if negative, enter "0") This is your taxable income. Step 1 - Federal non-refundable tax credits Basic personal amount Spouse or common-law partner amount Add lines 300 to 330 Spouse or common-law partner amount Multiply the amount on line 335 by 15% Spouse or common-law partner amount Multiply the amount on line 335 by 15% Spouse or common-law partner amount Multiply the amount on line 335 by 15% Spouse or common-law partner amount Multiply the amount on line 335 by 15% Spouse or common-law partner amount Multiply the amount on line 335 by 15% Spouse or common-law partner amount Multiply the amount on line 335 by 15% Spouse or common-law partner amount Multiply the amount on line 335 by 15% Spouse or common-law partner amount Multiply the amount on line 335 by 15% Spouse or common-law partner amount Multiply the amount on line 335 by 15% Spouse or common-law partner amount Multiply the amount on line 335 by 15% Spouse or common-law partner amount Multiply the amount on line 35by 15% Spouse or cammon add lines and 15% Spouse or cammon add lines and 15% Spou	Net income				
Taxable income Line 236 minus line 257 (if negative, enter "0") This is your taxable income. 260	Line 150 minus line 233 (if negative, enter "0")	This is your net income before adjustments.	234 =		41,852 40
Name	Line 234 minus line 235 (if negative, enter "0")	This is your net income.	236 =	₌∟	41,852 40
Step 1 - Federal non-refundable tax credits	Taxable income				
Step 1 - Federal non-refundable tax credits	Line 236 minus line 257 (if negative, enter "0")	This is your taxable income.	260 =	₌┌	41.852 40
Basic personal amount Spouse or common-law partner amount Spouse or common Spous	· · · · · · · · · · · · · · · · · · ·	·		_	,
Spouse or common-law partner amount 303 + 1,174 00 CPP or QPP contributions: through employment 308 + 1,851 50 1,851 50 378 48 1,851 50 388 4 1,851 50 388 4 1,851 50 388 4 1,851 50 363 + 1,161 00 363 + 1,161 00 363 + 1,161 00 364 + 884 27 27,838 28 27,583 25 25,783 25 25,783 25 27,583 25 27,583 25 363 + 2 1,161 00 461 00 363 + 2 1,161 00 461 00 461 00 461 00 461 00 461 00 462 + 2 00 462 + 2 00 462 + 2 00 462 + 2 00	•		300		11 474 00
CPP or QPP contributions: through employment 308 + 1,851 50 Employment Insurance premiums 362 + 1,161 00 Canada employment amount 363 + 1,161 00 Public transit amount 364 + 884 27 Add lines 300 to 332 35 = 27,563 265 27,653 265 Multiply the amount on line 335 by 15% 33 = 4,137 49 349 + 261 80 Donations and gifts 349 + 261 80 Total federal non-refundable tax credits: add lines 338 and 349 350 = 4,399 29 Step 3 - Net federal tax Tax on taxable income (C) 6,277 86 6,277 86 Enter the amount from line 350. 350 = 4,399 129 4,399 29 Basic federal tax (if negative, enter "0") 429 = 4,399 29 4,399 29 Basic federal tax (if negative, enter "0") 429 = 4,399 29 4,399 29 Refund or Balance owing Net federal tax: add lines 416 (if negative, enter "0") 429 = 1,878 57 Refund or Balance owing 428 + 1,020 95 Net federal tax: add lines 417, 415 and 418 420 = 4,899 129 Total income tax deducted 437	·			_	
Employment Insurance premiums 312 + 738 48 Canada employment amount 363 + 1,161 00 Public transit amount Add lines 300 to 332. 35 = 27,583 25 Multiply the amount on line 335 by 15%. 38 = 4,137 49 Donations and gifts 34 + 261 80 Total federal non-refundable tax credits: add lines 38 and 349. 350 = 4,399 29 Step 3 - Net federal tax Tax on taxable income (C) 6,277 86 404 6,277 86 Enter the amount from line 350. 350 a 4,399 129 404 6,277 86 Enter the amount from line 350. Basic federal tax (if negative, enter "0") 429 a 1,878 57 1,878 57 Refund or Balance owing Line 406 minus line 416 (if negative, enter "0") 429 a 1,878 57 1,878 57 Refund or Balance owing Net federal tax: add lines 417, 415 and 418. 420 a 1,878 57 Provincial or territorial tax add lines 417, 415 and 418. 420 a 1,878 57 Total income tax deducted 437 5,363 90 5,363 90 These are your total credits. 482 5,363 90 6,2464 38 Additional information					
Canada employment amount 363 + 364 + 384 ≥ 7 1,161 00 Public transit amount 364 + 384 ≥ 7 364 + 384 ≥ 7 Public transit amount Add lines 300 to 332. 35 = 2,7583 ≥ 5 27,583 ≥ 5 Donations and gifts 349 + 261 80 349 + 261 80 Total federal non-refundable tax credits: add lines 338 and 349. 35 = 4,399 ≥ 9 4,399 ≥ 9 Step 3 - Net federal tax Tax on taxable income (C) 6,277 86 4,349 29 Enter the amount from line 350. 350 4,399 29 4,399 29 Enter the amount from line 350. Add lines 350 to 427. 5 4,399 29 Basic federal tax (if negative, enter "0") 429 = 1,878 57 Enter the amount from line 350. Line 406 minus line 416 (if negative, enter "0") 429 = 1,878 57 Refund or Balance owing Net federal tax: add lines 417, 415 and 418. 420 = 1,878 57 Provincial or territorial tax add lines syour total payable. 435 = 2,899 52 Total income tax deducted 437	y				
Public transit amount 364 + 884 27 27 28 27 28 27 28 27 28 28					
Multiply the amount on line 335 by 15% 338 4,137 49 Donations and gifts					
Donations and gifts 349 + 261 80 80 70tal federal non-refundable tax credits: 340 140 350 350 300		Add lines 300 to 332.	335 =	=	27,583 25
Step 3 - Net federal tax		Multiply the amount on line 335 by 15%.	338 =		
Step 3 - Net federal tax	•			$\overline{}$	
Tax on taxable income (C) 6,277 86 Add lines (C) and 424, 404 Enter the amount from line 350. Add lines 350 4,399 29 Add lines 350 to 427. Basic federal tax (if negative, enter "0") 429 = 1,878 57 Ender the amount from line 350. Basic federal tax (if negative, enter "0") 417 = 1,878 57 Ender and the federal tax (if negative, enter "0") 417 = 1,878 57 Endund or Balance owing Net federal tax: add lines 417, 415 and 418. 420 = 1,878 57 Provincial or territorial tax This is your total payable. 428 + 1,020 95 Total income tax deducted These are your total credits. 482 - 5,363 90 Endund and the federal tax 484 - 5,363 90 Endund and the federal tax 484 - 5,363 90 Endund and the federal tax 484 - 5,363 90 Endund and the federal tax 484 - 5,363 90 Endund and the federal tax 484 - 5,363 90 Endund and the federal tax 484 - 5,363 90 Endund and the federal tax 484 - 5,363 90 Endund and the federal tax 484 - 5,363 90 Endund and the federal tax 484 - 5,363 90 Endund and the federal tax 484 - 5,363 90 Endund and the federal tax 484 - 5,363 90 Endund and the federal tax 484 - 5,363 90 Endund and the federal tax 485 - 5,363 90 Endund and the federal tax 485 - 5,363 90 Endund and the federal tax 485 - 5,363 90 Endund and the federal tax 485 - 5,363 90 Endund and the federal tax 485 - 5,363 90 Endund and the federal tax 485 - 5,363 90 Endund and the federal tax 485 - 5,363 90 Endund and the federal tax 485 - 5,363 90 Endund and the federal tax 485 - 5,363 90 Endund and the federal tax 485 - 5,363 90 Endund and the federal tax 485 - 5,363 90 Endund and the federal tax 485 - 5,363 90 Endund and the federal tax 485 - 5,363 90 Endund and the federal tax 485 - 5,363 90 Endund and the federal tax 485 - 5,363 90 Endund and the federal tax 485 - 5,363 90 Endund and the federal tax 485 - 5,363 90 Endund and the federal tax 485 - 5,363 90 Endund a	Total federal non-refundable tax credits:	add lines 338 and 349.	350 =	⁼∟	4,399 29
Add lines (C) and 424. 404 6,277 86	Step 3 - Net federal tax				
Enter the amount from line 350. 350 4,399 29 Add lines 350 to 427. 4399 29 Basic federal tax (if negative, enter "0") 429 = 1,878 57 Federal tax 406 = 1,878 57 Enter the amount from line 350. 650 to 427. 750 to 430	Tax on taxable income				
Add lines 350 to 427. 4,399 29 29 1,878 57 57 57 57 57 57 57		Add lines (C) and 424.	404		6,277 86
Basic federal tax (if negative, enter "0") 429 = 1,878 57 Federal tax 406 1,878 57 Line 406 minus line 416 (if negative, enter "0") 417 = 1,878 57 Refund or Balance owing	Enter the amount from line 350.	350 4,399 29	_		1
Federal tax 406 1,878 57			-	·	
Line 406 minus line 416 (if negative, enter "0") 417 = 1,878 57 Refund or Balance owing Net federal tax: add lines 417, 415 and 418. 420 = 1,878 57 Provincial or territorial tax 428 + 1,020 95 Total income tax deducted 437 5,363 90 These are your total credits. 482 - 5,363 90 Line 435 minus line 482 (2,464 38) Refund 484 2,464 38 Additional information Additional information Additional information 485 Average tax rate (total income taxes paid ÷ total income) 6.9%		, , ,			
Refund or Balance owing Net federal tax: add lines 417, 415 and 418. 420 = 1,878 57 Provincial or territorial tax 428 + 1,020 95 This is your total payable. 435 = 2,899 52 Total income tax deducted 437					
Net federal tax:		Line 406 minus line 416 (if negative, enter "0")	417 =	=	1,878 57
Provincial or territorial tax					1
This is your total payable. 435 = 2,899 52 Total income tax deducted 437 5,363 90 These are your total credits. 482 - 5,363 90 Line 435 minus line 482 = (2,464 38) Refund 484 2,464 38 Refund 485 0 00 Additional information Marginal tax rate 23% Average tax rate (total income taxes paid ÷ total income) 6.9%		add lines 417, 415 and 418.			
Total income tax deducted 437 5,363 90 These are your total credits. 482 - 5,363 90 Line 435 minus line 482 = (2,464 38) Refund 484 2,464 38 Balance owing 485 0 00 Additional information Marginal tax rate 23% Average tax rate (total income taxes paid ÷ total income)	Provincial or territorial tax		_	_	
These are your total credits.	T			⁼∟	2,899 52
Line 435 minus line 482 = (2,464 38)	Total income tax deducted				5 000 00
Refund 484 2,464 38 Balance owing 485 0 00 Additional information Marginal tax rate 23% Average tax rate (total income taxes paid ÷ total income) 6.9%		-			
Additional information Marginal tax rate Average tax rate (total income taxes paid ÷ total income) Balance owing 485 0 00 23% 6.9%				_	
Additional information Marginal tax rate Average tax rate (total income taxes paid ÷ total income) 23% 6.9%		Refund	484	느	
Marginal tax rate Average tax rate (total income taxes paid ÷ total income) 23% 6.9%	Additional information	Balance owing	485	L	0 00
Average tax rate (total income taxes paid ÷ total income) 6.9%					1
	· · · · ·			_	
Total KKSP deduction limit - 2017					
	Total RKSP deduction limit - 2017				56,078 92

Capital gain exemption available

■ T1 comparative summary - 2016

UFile

Name Yingxu Rong

SIN 738-423-219		Date of birth	06-03-1969				
		2016	2015			2016	2015
Employment income	101	40,904	39,005	CPP or QPP contributions - employment	308	1,852	1,758
Other employment income	104			CPP or QPP contributions - self-employment	310	738	715
Old age security pension CPP or QPP benefits	113 114			El premiums - employment El premiums - self-employment	312 317	730	715
Other pensions or superannuation	115			PPIP premiums paid	375		
Elected split-pension amount	116			PPIP premiums payable on employment inc.	376		
Universal child care benefit	117			PPIP premiums payable on self-employment	378		
UCCB amount designated to a dependant	185			Volunteer firefighters' amount	362		
Employment insurance and other benefits	119			Search and rescue volunteers amount	395		
Taxable amount of dividends	120			Canada employment amount	363	1,161	1,146
Taxable amount of dividends other than elig.	180			Public transit amount	364	884	456
Interest and other investment income	121			Children's arts amount	370		
Net partnership income	122			Home accessibility expenses	398		
Registered disability savings plan income	125			Home buyers' amount	369		
Net rental income	126			Adoption expenses	313		
Taxable capital gains	127			Pension income amount	314		
Taxable amount of support payments received RRSP income	128	948	948	Caregiver amount	315		
Other income	129 130	940	940	Disability amount (for self) Disability amount transferred from a dependant	316		
Net business income	135			Interest paid on your student loans	319		
Net professional income	137			Your tuition, education, and textbook amounts	323		
Net commission income	139			Tuition, education, and textbook amounts transf.			5,000
Net farming income	141			Amounts transferred from your spouse	326		0,000
Net fishing income	143			Medical expenses	330		
Workers' compensation benefits	144			Allowable medical expenses for other dep.	331		
Social assistance payments	145			Medical deduction	332		
Net federal supplements	146			Total	335	27,583	31,729
Total income	150	41,852	39,953	Total @ 15%	338	4,137	4,759
Pension adjustment	206	11,002		Donations and gifts	349	262	143
Registered pension plan deduction	207			Total federal non-refundable tax credits	350	4,399	4,902
RRSP deduction	208			Family tax cut	423		
Deduction for elected split-pension amount	210			Federal dividend tax credit	425		
Annual union, professional, or like dues	212			Minimum tax carryover	427		
Universal child care benefit repayment	213			Federal foreign tax credit	405	0	
Child care expenses	214			Federal tax	406	1,879	1,091
Disability supports deduction	215			Federal political contribution tax credit	410		
Allowable deduction of business investment loss				Investment tax credit	412		
Moving expenses	219			Labour-sponsored funds tax credit Labour-sponsored funds tax credit (5%)	414 419		
Allowable deduction of support payments made				Line 406 - 416	417	1,879	1,091
Carrying charges and interest expenses	221			WITB advance payments received	415	1,079	1,031
Deduction for CPP or QPP contributions	222			Net federal tax	420	1,879	1,091
Deduction for PPIP premiums	223			CPP contributions payable on self-employment		1,010	
Exploration and development expenses Other employment expenses	224 229			El premiums payable on self-employment	430		
Clergy residence deduction	231			Social benefits repayment	422		
Other deductions	232			Provincial or territorial tax	428	1,021	707
Social benefits repayment	235			Yukon First Nations tax	432		
Net income	236	41,852	39,953	Total payable	435	2,900	1,798
Canadian Forces personnel and police deduc.	244	41,002		Deducted at source	437	5,364	4,966
Employee home relocation loan deduction	248			Transfer 45%	438		
Security options deductions	249			Line 437 - 438	439		
Other payments deduction	250			Quebec abatement	440		
Limited partnership losses of other years	251			First Nations abat.	441		_
Non capital loss of other years	252			CPP overpayment	448		0
Net capital loss of other years	253			Employment insurance overpayment	450		
Capital gains deduction	254			Refundable medical expense supplement	452		
Northern residents deductions	255			Working income tax benefit Refund of investment tax credit	453		
Additional deductions	256			Part XII.2 trust tax credit	454 456		
Taxable income	260	41,852	39,953	Employee and partner GST/HST rebate	456		
Basic personal amount	300	11,474	11,327	Children's fitness tax credit	457		
Age amount	301			School supply	469		
Spousal or common-law partner amount	303	11,474	11,327	Tax paid by instalments	476		
Amount for an eligible dependant	305			Provincial or territorial credits	479		
Amount for children	367			Total credits	482	5,364	4,966
Amount for infirm dependants age 18 or older	306			Refund	484	2,464	3,168
				Balance owing	485		
L							

Assembly Instructions

Name: Yingxu Rong 738-423-219 SIN:





Assembling the federal tax return

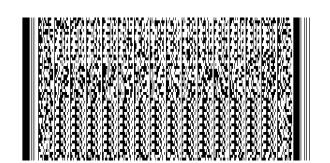
If you submit your tax return via NETFILE and it is accepted by the CRA, you do not have to send a printed copy to the CRA. However, the CRA reserves the right to request any supporting documentation such as T4 slips, charity and medical receipts, etc. You must therefore keep these documents and a copy of the tax return in a safe place for a period of 6 years in case you are asked to supply them to the CRA (ref. sub. 230(4)).

Canada Revenue Agence du revenu du Canada

T1 GENERAL – Income Tax and Benefit Return CONDENSED 2016

Step 1 – Identification and other information

		_	
Iden	tification	Informat	ion about you
Print your name First name and initial Mrs. Yingxu .ast name Rong Mailing address: Apt No – Street No	e and address below. Street name	Enter your social insurance number (SIN): Enter your date of birth: Your language of correspondence Votre langue de correspondance	
90 025 Ewon Avo			
89-935 Ewen Ave PO Box	RR	Is this return for If this return is for a deceased person, enter the date of death:	r a deceased person?
City New Westminster	Prov./Terr. Postal code BC V3M 0A1	person, enter the date of death.	I
Emai	l address	Marit Tick the box that appli Decemb	tal status les to your marital status on ber 31, 2016:
understand that by providing an ema	ail address, I am registering for online rms and conditions on page 15 of the	1 X Married 2 Livi	ng common-law 3 Widowed parated 6 Single
Enter an email address:			
Information ab	out your residence		out your spouse or (if you ticked box 1 or 2 above)
Enter your province or territory of esidence on December 31, 2016:	British Columbia	Enter his or her SIN:	738-423-185
f your province or territory of residen changed in 2016, enter the date of your move:	CE Year Month Day	Enter his or her first name:	Hongyu
s your home address the same as your mailing address?	Yes No X	Enter his or her net income for 20 to claim certain credits:	016
Enter the province or territory where you currently reside if it is not the same as your mailing address above	:	Enter the amount of universal chi benefit (UCCB) from line 117	ld care
f you were self-employed in 2016, enter the province or territory of self-employment:		of his or her return: Enter the amount of UCCB repay	
	ident of Canada for income tox purposes	from line 213 of his or her return:	
f you became or ceased to be a res n 2016 , enter the date of:	ident of Canada for income tax purposes		-
	Month Day or departure	Tick this box if he or she was self	f-employed in 2016: 1



Do not use	172			171		
this area	172			17.1		

Rong, Yingxu SIN: 738 423 219
Protected B when completed
2

Step 1 – Identification and other information (continued)

If you had dealings with a non-resident trust or corporation in 2016, see "Other foreign property" in the guide.

Residency information for tax administration agreements (For more information, see page 18 in the guide.)	
- ', · · · · · · · · · · · · · · · · · ·	o 🗌 2
f yes , are you a citizen of the Nisga'a Nation ?	o 🗌 2
Elections Canada (For more information, see page 19 in the guide.)	
A) Do you have Canadian citizenship?	o 🗌 2
Answer the following question only if you have Canadian citizenship.	
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?	o 🗌 2
Your authorization is valid until you file your next tax return. Your information will only be used for purposes permitted under the <i>Canada Elections Act</i> , which include sharing the information with provincial/territorial election agencies, members of Parliament, registered political parties, and candidates at election time.	
Diagon analyses the fellowing guestion.	
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 2016, was more than CAN\$100,000?	
See "Specified foreign property" in the guide for more information	
f ves , complete Form T1135 and attach it to your return.	

Rong, Yingxu SIN: 738 423 219 **Protected B** when completed

Attach this form inside your return along with any other forms, schedules, information slips, receipts, and documents that you need to include.

T1-2016 T1-KFS

Total	income
lotai	

Form 479 **6033**

75.00

6035

75.00

UFile

Employme	nt income							101	40 904,40
RRSP inco	ome							129	948,00
Net inc	ome					This is you	r total incon	ne. 150	41 852,40
Not into	onic					This is yo	ur net incon	ne. 236	41 852 40
Taxabl	e income								
					Ir	nis is your ta	xable incon	ne. 260	41 852,40
Federa	l schedule	es							
Schedule '	1								
300	11,474.00	303	11,474.00	308	1,851.50 ●	312	738.48 ●	335	27,583.25
338	4,137.49	349	261.80	350	4,399.29	363	1,161.00	364	884.27
Schedule 9	9								
340	945.00	343	63.00						
Provin	cial and te	rritorial	forms						
Form 428									
5609		5804	10,027.00	5812	8,586.00	5824	1,851.50 ●	5832	738.48 ●
5880	21,202.98	5884	1,072.87	5896	119.64	6150	1,192.51		

Step 6 – Refund or balance owing				3
Net federal tax: enter the amount from line 64 of Schedule 1			420	1,878 57
CPP contributions payable on self-employment and other earnings			421 +	,
Employment insurance premiums payable on self-employment and other eligible ear	nings		430 +	
Social benefits repayment (amount from line 235)	Ť		422 +	
Provincial or territorial tax			428 <u>+</u>	1,020 95
Add lines 420, 421, 430, 422, and 428.	This is your	total payable.	435 <u>=</u>	2,899 52
Total income tax deducted	437	5,363 90	•	
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)	453 <u>+</u>		•	
Refund of investment tax credit (attach Form T2038(IND))	454 <u>+</u>		•	
Part XII.2 trust tax credit (box 38 of all T3 slips)	456 <u>+</u>		•	
Employee and partner GST/HST rebate (attach Form GST370)	457 <u>+</u>		•	
Children's fitness tax credit Eligible fees 458 × 15%	= 459 +			
Children's fitness tax credit Eligible fees 458 x 15% Eligible educator school	_= 439 <u>+</u>		•	
	= 469 +		•	
Tax paid by instalments	476 +		•	
Provincial or territorial credits	479 +		•	
Add lines 437 to 479. These are your total	l credits. 482 =	5,363 90	<u>-</u>	5,363 90
Line 435 minus line 482 This is	your refund or	balance owing.		(2,464 38)
If the result is negative, you have a re	-		have a l	
Generally, we do not charge or refu		amount below or	n whiche	ver line applies.
Refund 484 2,464 38 •	E	Balance owing		
For more information on ho	ew to make your	Balance owing payment, see line	e 485 in t	the guide or go
For more information on ho to cra.gc.ca/pay	ew to make your	Balance owing	e 485 in t	the guide or go a April 30, 2017.
For more information on ho to cra.gc.ca/pay Direct deposit – Enrol or update (see line 484 in the guide)	bw to make your yments. Your pa	Balance owing payment, see line yment is due no la	e 485 in tater than	April 30, 2017.
For more information on ho to cra.gc.ca/pay	bw to make your yments. Your pa	Balance owing payment, see line yment is due no la	e 485 in tater than	April 30, 2017.
For more information on ho to cra.gc.ca/pay Direct deposit – Enrol or update (see line 484 in the guide)	ow to make your yments. Your pay your direct depo	payment, see line yment is due no la esit information ha	e 485 in tater than	a April 30, 2017.
For more information on ho to cra.gc.ca/pay 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 To enrol for direct deposit, to update your banking information, or to request that all	ow to make your yments. Your pay your direct depot of your CRA pay, 461, and 462 but the bank accounts.	payment, see line yment is due no li esit information ha yments you may le elow. Int number shown	e 485 in tater than as not choose received	a April 30, 2017. anged.
For more information on ho to cra.gc.ca/pay 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 To enrol for direct deposit, to update your banking information, or to request that all or owed be deposited into the same account as your T1 refund, complete lines 460, By providing my banking information I authorize the Receiver General to deposit in amounts payable to me by the CRA, until otherwise notified by me. I understand the previous direct deposit authorizations.	ow to make your yments. Your pay your direct depondance of your CRA pay, 461, and 462 but the bank accounts this authorization.	payment, see line yment is due no la payment is due no la payment is due no la payment information has yments you may le low. Int number shown tion will replace at the same	e 485 in tater than as not ch be receive below a	n April 30, 2017. nanged. ving
For more information on ho to cra.gc.ca/pay 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 To enrol for direct deposit, to update your banking information, or to request that all or owed be deposited into the same account as your T1 refund, complete lines 460, By providing my banking information I authorize the Receiver General to deposit in amounts payable to me by the CRA, until otherwise notified by me. I understand the previous direct deposit authorizations.	ow to make your yments. Your pay your direct depot of your CRA pay, 461, and 462 but the bank accounts.	payment, see line yment is due no la payment is due no la payment is due no la payment information has yments you may le low. Int number shown tion will replace at the same	e 485 in tater than as not choose receive	n April 30, 2017. nanged. ving
For more information on ho to cra.gc.ca/pay 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 To enrol for direct deposit, to update your banking information, or to request that all or owed be deposited into the same account as your T1 refund, complete lines 460, By providing my banking information I authorize the Receiver General to deposit in amounts payable to me by the CRA, until otherwise notified by me. I understand the previous direct deposit authorizations.	by to make your yments. Your pay your direct depondance of your CRA pay 461, and 462 between the bank account this authorization of the bank account for the	payment, see line yment is due no la yment is due no la yments you may le elow. ht number shown tion will replace a 462 (maxim was charged for p complete the f	be 485 in the as not change as not change below a fall of my	n April 30, 2017. ranged. ring ny gits) this return,
For more information on ho to cra.gc.ca/pay 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 To enrol for direct deposit, to update your banking information, or to request that all or owed be deposited into the same account as your T1 refund, complete lines 460, By providing my banking information I authorize the Receiver General to deposit in amounts payable to me by the CRA, until otherwise notified by me. I understand the previous direct deposit authorizations. Branch number 460 Institution number 461 (3 digits) I certify that the information given on this return and in any documents attached is correct and complete and fully discloses all my income.	ow to make your yments. Your pay your direct depot of your CRA pay, 461, and 462 but the bank account at this authorizat Account number	payment, see line yment is due no la yment is due no la yments you may le elow. ht number shown tion will replace a 462 (maxim was charged for p complete the f	be 485 in the as not change as not change below a fall of my	n April 30, 2017. ranged. ring ny gits) this return,
For more information on ho to cra.gc.ca/pay 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 To enrol for direct deposit, to update your banking information, or to request that all or owed be deposited into the same account as your T1 refund, complete lines 460, By providing my banking information I authorize the Receiver General to deposit in amounts payable to me by the CRA, until otherwise notified by me. I understand the previous direct deposit authorizations. Branch number 460 Institution number 461 (3 digits) I certify that the information given on this return and in any documents	your direct depondant this authorization Account number 490 If a fee Name of preparetics.	payment, see line yment is due no li esit information ha yments you may le elow. ht number shown tion will replace a (maxim was charged for p complete the f here:	e 485 in tater than as not choose receive below a all of my num 12 divergences	n April 30, 2017. ranged. ring ny gits) this return,
For more information on ho to cra.gc.ca/pay 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 To enrol for direct deposit, to update your banking information, or to request that all or owed be deposited into the same account as your T1 refund, complete lines 460, By providing my banking information I authorize the Receiver General to deposit in amounts payable to me by the CRA, until otherwise notified by me. I understand the previous direct deposit authorizations. Branch number 460	your direct depondant this authorization Account number 490 If a fee Name of preparetics.	payment, see line yment is due no la yment is due no la yments you may le elow. ht number shown tion will replace a 462 (maxim was charged for p complete the f	be 485 in the as not change as not change below a fall of my	n April 30, 2017. ranged. ring ny gits) this return,
For more information on ho to cra.gc.ca/pay 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 To enrol for direct deposit, to update your banking information, or to request that all or owed be deposited into the same account as your T1 refund, complete lines 460, By providing my banking information I authorize the Receiver General to deposit in amounts payable to me by the CRA, until otherwise notified by me. I understand the previous direct deposit authorizations. Branch number 460	wyw to make your yments. Your pay your direct deponds of your CRA pay 461, and 462 between the bank account at this authorization. Account number 490 If a fee Name of prepay Telephone: EFILE number lated programs. It redebts owed to the ure to provide this is sonal information.	payment, see line yment is due no la yment is due no la yment is due no la yments you may la yments you may la low. Int number shown tion will replace a year of the larer: (if applicable): Inay also be used for Crown. It may be so information may researed request correct	be 485 in the as not change as	n April 30, 2017. nanged. ving ny gits) this return, : pose related verified with rest payable,
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 To enrol for direct deposit, to update your banking information, or to request that all or owed be deposited into the same account as your T1 refund, complete lines 460, By providing my banking information I authorize the Receiver General to deposit in amounts payable to me by the CRA, until otherwise notified by me. I understand the previous direct deposit authorizations. Branch number 460 Institution number 461 (3 digits) 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 (604) 253-3858 Date 09-04-17 Personal information is collected under the Income Tax Act to administer tax, benefits, and rel to the administration or enforcement of the Act such as audit, compliance and the payment of other federal, provincial/territorial government institutions to the extent authorized by law. Faili penalties or other actions. Under the Privacy Act, individuals have the right to access their per or omissions. Refer to Info Source cra.gc.ca/gncy/tp/nfsrc/nfsrc-eng.html, personal information	wyw to make your yments. Your pay your direct deponds of your CRA pay 461, and 462 between the bank account at this authorization. Account number 490 If a fee Name of prepay Telephone: EFILE number lated programs. It redebts owed to the ure to provide this is sonal information.	payment, see line yment is due no la yment is due no la yment is due no la yments you may le low. Int number shown tion will replace a maximum was charged for promplete the farer: (if applicable): Inay also be used for Crown. It may be so information may resund request correct 105.	be 485 in the as not change as	n April 30, 2017. nanged. ving ny gits) this return, : pose related verified with rest payable,
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 To enrol for direct deposit, to update your banking information, or to request that all or owed be deposited into the same account as your T1 refund, complete lines 460, By providing my banking information I authorize the Receiver General to deposit in amounts payable to me by the CRA, until otherwise notified by me. I understand the previous direct deposit authorizations. Branch number 460	wyw to make your yments. Your pay your direct deponds of your CRA pay 461, and 462 between the bank account at this authorization. Account number 490 If a fee Name of prepay Telephone: EFILE number lated programs. It redebts owed to the ure to provide this is sonal information.	payment, see line yment is due no la yment is due no la yment is due no la yments you may la yments you may la low. Int number shown tion will replace a year of the larer: (if applicable): Inay also be used for Crown. It may be so information may researed request correct	be 485 in the as not change as	n April 30, 2017. nanged. ving ny gits) this return, : pose related verified with rest payable,

5000-RC

UFile

[CRA] 09 Apr 2017

Rong, Yingxu SIN: 738 423 219 $\textbf{Protected B} \ \ \text{when completed}$

Canada Revenue Agence du revenu du Canada

T1 GENERAL 2016

RC-16-119

Income Tax and Benefit Return

Step 1 – Identification a	and other in	nformation					ВС	8
ldentif	ication			nformatior	ı about y	ou .		
Print your name a First name and initial	ınd address belov	w.	Enter your social insura number (SIN):	ance		738-423-2	<u>219</u>	
Mrs. Yingxu Last name			Enter your date of birth	:		i	onth Day -03-06	
Rong Mailing address: Apt No – Street No Str	reet name		Your language of corres	•		English	Françai	is
89-935 Ewen Ave			-					
PO Box	RR	/Tarry Dantal and	Is this return is for a de	eturn for a	decease		? Month Day	У
City New Westminster		./Terr. Postal code C V3M 0A1	person, enter the date	of death:				
Email a	address		Tick the box	Marital that applies to December	status o your mar 31, 2016:	ital status on	1	
I understand that by providing an email mail. I have read and I accept the tern			1 X Married		common-lav			
guide.			4 Divorced	5 Separa	ted	6 Sin	ngle	
Enter an email address:				4: 1				
Information abou	ut your reside	nce	Informa common-law	ation about partner (if yo			ove)	
Enter your province or territory of			Enter his or her SIN:			738-423-1	85	
residence on December 31, 2016 :	British Columb	oia	Enter his or her first na	me:	Hongyı	ı		
Enter the province or territory where you currently reside if it is not the same as your mailing address above:			Enter his or her net inc to claim certain credits				0 0	00
If you were self-employed in 2016, enter the province or territory of self-employment:			Enter the amount of un benefit (UCCB) from lir of his or her return:		are			
If you became or ceased to be a resid in 2016 , enter the date of:	ent of Canada for	income tax purposes	Enter the amount of U0 from line 213 of his or I		nt			
Month Day		Month Day	Tick this box if he or sh	e was self-em	ployed in 2	016:	1	ΙX
entry or	departure		Do not use this area	a				
Residency information for tax Did you reside on Nisga'a Lands on De If yes, are you a citizen of the Nisga'a I	ecember 31, 2016' Nation? (For more informa	ation, see page 19 in t	he guide.)			Yes 🗌 1	No 🗌	2
A) Do you have Canadian citizenship? Answer the following question only if yourself. B) As a Canadian citizen, do you author address, date of birth, and citizenship of the control of	ou have Canadiar orize the Canada F nip to Elections Car your next tax return e information with p	n citizenship . Revenue Agency to gi nada to update the Ni n. Your information w	ve your name, ational Register of Electors? ill only be used for purposes	s permitted un	der the <i>Cai</i>	Yes 🗌 1	No 🗌	
political parties, and candidates at elect	tion time.							

171

Do not use

this area

172

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 2016, was more than CAN\$100,000? See "Specified foreign property" in the guide for more information
If yes , complete Form T1135 and attach it to your return.
If you had dealings with a non-resident trust or corporation in 2016, see "Other foreign property" in the guide.

Step 2 - Total income

As a resident of Canada, you have to report your income from all sources both inside and outside Canada. When you come to a line on the return that applies to you, go to the line number in the guide for more information.

Employment income (box 14 of all	T4 slips)		101		40,904 40
Commissions included on line 101	(hox 42 of all T4 slins)	102	1		
Wage loss replacement contribution		102			
(see line 101 in the guide)		103			
Other employment income		100	104	+	
Old age security pension (box 18					
CPP or QPP benefits (box 20 of the	ne T4A(P) slip)		114		
Disability benefits included on line					
(box 16 of the T4A(P) slip)		152			
Other pensions and superannuation				+	
Elected split-pension amount (atta	ach Form T1032)		116	+	
Universal child care benefit (UCCI					
UCCB amount designated to a de	pendant	185			
Employment insurance and other	benefits (box 14 of the T4E	slip)	119	+	
Taxable amount of dividends (elig) from taxable			
Canadian corporations (attach So			120	+	
Taxable amount of dividends othe	r than eligible dividends,		1		
included on line 120, from taxable					1
Interest and other investment inco					
Net partnership income: limited or					
Registered disability savings plan					
Rental income	Gross 160		Net 126	+	
Taxable capital gains (attach Sch	edule 3)		127	+	
Support payments received	Total 156	Taxab	le amount 128	+	
RRSP income (from all T4RSP sli					
Other income Specify					
Self-employment income					
Business income	Gross 162		Net 135	+	
Business income Professional income	Gross 164		Net 137	+	
Commission income			<u>Net</u> 139	+	
Farming income	Gross 168		Net 141	+	
Fishing income	Gross 170		Net 143	+	
	40 (41 75007 11)		1		
Workers' compensation benefits (I	oox 10 of the 15007 slip)	144			
Social assistance payments		145 <u>+</u>			
Net federal supplements (box 21 c	of the T4A(OAS) slip)	146 <u>+</u>			1
Add lines 144, 145, and 146 (see	line 250 in the guide).	<u>=</u>	▶147	<u>+</u>	
Add lines 101, 104 to 143, and 14	7.	This is your total	income. 150	<u> </u>	41,852 40

Protected B when completed 3

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

Step 3 – Net income

Enter your total income from line 150.			150	41,8	352 40
Pension adjustment					
(box 52 of all T4 slips and box 034 of all T4A slips)	206	I			
Registered pension plan deduction (box 20 of all T4 slips and box 032 of	of all T4A slips)	207			
RRSP/pooled registered pension plan (PRPP) deduction	. , , , , , , , , , , , , , , , , , , ,		-		
(see Schedule 7 and attach receipts)		208 +			
PRPP employer contributions			-		
	205				
Deduction for elected split-pension amount (attach Form T1032)		210 +	-		
Annual union, professional, or like dues (box 44 of all T4 slips, and rece	eipts)	212 +	-		
Universal child care benefit repayment (box 12 of all RC62 slips)		213 +			
Child care expenses (attach Form T778)			-		
Disability supports deduction		215 +	-		
Disability supports deduction		210 1	-		
Business investment loss Gross 228	Allowable deduction	217 +			
Moving expenses		219 +	-		
			-		
Support payments made Total 230	Allowable deduction	220 +	_		
Carrying charges and interest expenses (attach Schedule 4)		221 +	_		
Deduction for CPP or QPP contributions on self-employment and other	earnings				
(attach Schedule 8 or Form RC381, whichever applies)		222 +	. •		
Exploration and development expenses (attach Form T1229)		224 +	_		
Other employment expenses		229 +	_		
		231 +	_		
Other deductions Specify:		232 +	-		1
Add lines 207, 208, 210 to 224, 229, 231, and 232.		233 =	. •	<u>- </u>	
Line 150 minus line 233 (if negative, enter "0")			234	= 41,8	352 40
Social benefits repayment (if you reported income on line 113, 119, or 1					
Use the federal worksheet to calculate your repayment.			235	<u> </u>	\rightarrow
Line 234 minus line 235 (if negative, enter "0")	 .				
If you have a spouse or common-law partner, see line 236 in the guide.	This	is your net income.	236	= 41,8	352 40
Step 4 – 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		050			
(if you reported income on line 147, see line 250 in the guide)		250 +	-		
Limited partnership losses of other years		251 +	-		
Non-capital losses of other years		252 +	-		
Net capital losses of other years		253 +	-		
Capital gains deduction		254 +	-		
Northern residents deductions (attach Form T2222) Additional deductions Specify:		255 +	-		
Additional deductions Specify: Add lines 244 to 256.		256 <u>+</u> 257 =		-	
		<u> </u>	ا م		.50 /2
Line 236 minus line 257 (if negative, enter "0")	I his is yo	our taxable income.	260	<u>= 41,8</u>	352 40

Step 5 – Federal tax and provincial or territorial tax

Use Schedule 1 to calculate your federal tax and Form 428 to calculate your provincial or territorial tax.

Step 6 – Refund or balance owing	FIC	otected b when completed a
Net federal tax: enter the amount from line 64 of Schedule 1 (attach Schedule 1, even if	the result is "O")	420 1,878 57
CPP contributions payable on self-employment and other earnings	and reduction of	1,070 07
(attach Schedule 8 or Form RC381, whichever applies)		421 +
Employment insurance premiums payable on self-employment and other eligible earning	gs (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 + 1,020 95
Add lines 420, 421, 430, 422, and 428.	his is your total payable.	435 <u>= 2,899 52</u>
Total income tax deducted	437 5,363 90	•
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 <u>+</u>	•
Oblidancia fitanza (au anadit Elizible face 450	450 .	
Children's fitness tax credit Eligible fees 458 x 15% =	459 +	•
Eligible educator school supply tax credit Supplies expenses 468 × 15% =	469 +	
Tax paid by instalments	476 +	•
Provincial or territorial credits (attach Form 479 if it applies)	479 +	•
Add lines 437 to 479. These are your total cre		▶ - 5,363 90
•		
•	r refund or balance owing.	= (2,464 38)
If the result is negative, you have a refund .	•	•
Γ	Enter the amount below on	whichever line applies.
Generally, we do not charge or refund	a difference of \$2 or less	•
Refund 484 2,464 38 •	Balance owing	485
	Dalarioo ownig	
For more information on how to	make your payment, see line	e 485 in the guide or go
to cra.gc.ca/payments. Yo	ur payment is due no later tha	an April 30, 2017.
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 yo	ur direct deposit information h	nas not changed.
	·	· ·
To enrol for direct deposit, to update your banking information, or to request that all of be deposited into the same account as your T1 refund, complete lines 460, 461, and 4	your CRA payments you may 62 below.	be receiving or owed
By providing my banking information I authorize the Receiver General to deposit in the amounts payable to me by the CRA, until otherwise notified by me. I understand that previous direct deposit authorizations.		
Branch number 460 Institution number 461 Acc	count number 462(maxim	num 12 digits)
)O	
I certify that the information given on this return and in any documents attached is correct and complete and fully discloses all my income.	If a fee was charged for p complete the f	
Sign here Name Name Name Name Name Name Name Nam	ame of preparer:	
It is a serious offence to make a false return.	elephone:	
Telephone (604) 253-3858 Date 09-04-17 El	FILE number (if applicable):	489
Personal information is collected under the <i>Income Tax Act</i> to administer tax, benefits, and related to the administration or enforcement of the Act such as audit, compliance and the payment of debt other federal, provincial/territorial government institutions to the extent authorized by law. Failure to penalties or other actions. Under the <i>Privacy Act</i> , individuals have the right to access their personal or omissions. Refer to Info Source cra.gc.ca/gncy/tp/nfsrc/nfsrc-eng.html , personal information	s owed to the Crown. It may be so provide this information may res al information and request correct	shared or verified with sult in interest payable,

T1-2016

Federal Tax

Schedule 1

This is **Step 5** in completing your return. Complete this schedule and **attach** a copy to your return. For more information see the related line in the guide.

Step 1 – Federal non-refundable tax credits

otop i i odorar non roranadolo tax oroano						
Basic personal amount	claim \$11,474	300		11,474	00	1
Age amount (if you were born in 1951 or earlier)						
·	<u>(imum \$7,125)</u>					2
Spouse or common-law partner amount (attach Schedule 5)		303	+	11,474	00	3
Amount for an eligible dependant (attach Schedule 5)		305	+			4
Family caregiver amount for infirm children under 18 years of age						
Number of children for whom you are claiming						
the family caregiver amount 352	× \$2,121 =	367	+			5
Amount for infirm dependants age 18 or older (attach Schedule 5)		306	+			6
CPP or QPP contributions:						
through employment from box 16 and box 17 of all T4 slips						
(attach Schedule 8 or Form RC381, whichever applies)		308	+	1,851	50	•7
on self-employment and other earnings						
(attach Schedule 8 or Form RC381, whichever applies)		310	+			•8
Employment insurance premiums:						
	mum \$955.04)			738	48_	
on self-employment and other eligible earnings (attach Schedule 13)			+			• 10
Volunteer firefighters' amount			+			11
Search and rescue volunteers' amount		395	+			12
Canada employment amount						
	<u>(imum \$1,161)</u>				-	
Public transit amount			+		27	14
Children's arts amount						15
Home accessibility expenses (attach Schedule 12)			+			16
Home buyers' amount						17
Adoption expenses						18
	<u>(imum \$2,000)</u>	314	+			19
Caregiver amount (attach Schedule 5)		315	+			20
Disability amount (for self)						
(claim \$8,001, or if you were under 18 years of age, use the federal worksheet)		316	<u>+</u>			21
	i					
Disability amount transferred from a dependant (use the federal worksheet)		318	-		_	22
Interest paid on your student loans		319				23
Your tuition, education, and textbook amounts (attach Schedule 11)		323				24
Tuition, education, and textbook amounts transferred from a child		324				25
Amounts transferred from your spouse or common-law partner (attach Schedule 2)		326	+			26
Medical expenses for self, spouse or common-law partner, and your						
dependent children born in 1999 or later	27					
Fator (10, 227 or 20/ of line 220 of value nature, which are in less	20					
Enter \$2,237 or 3% of line 236 of your return, whichever is less.	28					
Line 27 minus line 28 (if negative, enter "0") =	29					
Allowable amount of medical expenses for other dependants (do the calculation at line 331 in the guide)	30					
		222			l	21
Add lines 29 and 30. =	▶			27 502	25	31
Add lines 1 to 26, and line 31. Federal non-refundable tax credit rate		335		27,583		
			<u>×</u>		40	
Multiply line 32 by line 33.		338		4,137		
Donations and gifts (attach Schedule 9)		349		261	00	33
Add lines 34 and 35. Enter this amount on line 48 on the next page. Total federal non-refundal	hle tay credite	250	L	4,399	20	36
Lines uno amount on time 40 on the next page.	DIE LAX CIEUILS	33 0		4 ,399	<u> </u> 29	30

Continue on the next page.

Step 2 - Federal tax on taxable income

Step 2 – rederal tax on taxable	income				
Enter your taxable income from line 260	of your return.				41,852 40 37
Complete the appropriate column depending on the amount on line 37.	Line 37 is \$45,282 or less	Line 37 is more than \$45,282 but not more than \$90,563	Line 37 is more than \$90,563 but not more than \$140,388	Line 37 is more than \$140,388 bu not more than than \$200,000	Line 37 is more than \$200,000
Enter the amount from line 37.	41,852 40				38
Line 38 minus line 39	0 00		- 90,563 00		0 - 200,000 00 39
(cannot be negative)	= 41,852 40		=	_ =	_ = 40
	× 15%		<u>× 26%</u>	× 29%	<u>× 33%</u> 41
Multiply line 40 by line 41.	= 6,277 86 $+$ 0 00		= + 16,075 00	= + 29,029 00	${0} = {42}$
	+ 000	+ 0,792 00	+ 16,075 00	29,029 00	40,317 00 43
Add lines 42 and 43.	= 6,277 86	=	=	<u> </u>	」 ⊨
Step 3 – Net federal tax					
Enter the amount from line 44.				<u>6,277 86</u> 45	5
Federal tax on split income (from line 5 o	f Form T1206)		424 +	• 4	
Add lines 45 and 46.			404 =	6,277 86 ▶	6,277 86 47
Enter your total federal non-refundable ta	ay credits			ı	
from line 36 on the previous page.	ix credits		350	4,399 29 48	3
Federal dividend tax credit			425 +	•4	
Minimum tax carryover (attach Form T69	91)		427 +	•5	50
Add lines 48, 49, and 50.			<u>=</u>	4,399 29 ▶	<u>- 4,399 29</u> 51
Line 47 minus line 51 (if negative, enter "	0")		Bas	sic federal tax 42	29 <u>= 1,878 57</u> 52
Federal foreign tax credit (attach Form T	•				05 - 53
Line 52 minus line 53 (if negative, enter "	<u>0")</u>			Federal tax 40	06 <u>= 1,878 57</u> 54
Total federal political contributions (attach receipts)		409	55		
Federal political contribution tax credit					
(use the federal worksheet)		(maxim	um \$650) 410	•5	56
Investment tax credit (attach Form T203			412 +	• 5	57
Labour-sponsored funds tax credit (see li	ines 413, 414, 411 an	d 419 in the guide)			
Net cost of shares of a federally registered fund	411	Allowa	able credit 419 +	•5	58
Net cost of shares of a provincially	7770	1 40	1.1 1% FFF 1		-0
registered fund	413	Allowa	able credit 414 +	•5	1
Add lines 56 to 59. Line 54 minus line 60 (if negative, enter "	O"\		416 =		60
If you have an amount on line 46 above,				41	17 <u>= 1,878 57</u> 61
Working income tax benefit advance pay				· ·	
(box 10 of the RC210 slip)				41	•62
Special taxes (see line 418 in the guide)				41	18 + 63
Add lines 61, 62, and 63.					
Enter this amount on line 420 of your retu	urn.		N	Net federal tax 42	20 = 1,878 57 64

Rong, Yingxu SIN: 738 423 219 Protected B when completed Schedule 5

T1-2016

Amounts for Spouse or Common-Law Partner and Dependants

See the guide to find out if you can claim an amount on line 303, 305, 306, or 315 of Schedule 1. For each dependant claimed, provide the details requested below. **Attach a copy of this schedule to your return.**

Did your marital status chang	ge to other than married or	common-law in 20	16? Month Da	٧		
If yes , tick this box	and enter the	date of the change	1	Ĺ		
Base amount						11,474 00
If you are entitled to the fami	ly caregiver amount, ente	r \$2,121 (see pag	e 45 in the guide).	510	9 +	
Add lines 1 and 2.					=	11,474 00
Spouse's or common-law par		e 1 of your return				0 00
Line 3 minus line 4 (if negative Enter this amount on line 303						11,474 00
	•				<u> </u>	11,414 00
Line 305 – Amount for	•					
Did your marital status chang			Month Da	y		
If yes , tick this box		date of the change	•			
Provide the requested info	mation and complete the	following calcula	ation for this depe	ndant.		
First and last name:		Year of birth	Relationship to you	Is this dependant physically of	or	
Address:				mentally infirm?		
				Yes No		1
Base amount						11,474 00
If you are entitled to the family of	aregiver amount, enter \$2,12	1 (see page 45 in the	e guide and read the r	note below). 51	10 +	
Add lines 1 and 2.					=	
Dependant's net income (line	•			510	<u> </u>	
Line 3 minus line 4 (if negative	•				L	
Enter this amount on line 305 Note: If you are entitled to	the family caregiver amou	ent for this depends	ent and he or she is	an infirm child	E	
	e, you must claim the fami					
Line 306 – Amount for	an infirm dependant a	ged 18 or older	(attach a separat	e sheet of paper if you	ı need r	more space)
- Line 306 – Amount for	an infirm dependant a	ged 18 or older	(attach a separat	e sheet of paper if you	ı need r	more space)
Line 306 – Amount for Provide the requested information First and last name:	an infirm dependant a	ged 18 or older	(attach a separat	e sheet of paper if you	ı need r	more space)
- Line 306 – Amount for	an infirm dependant a	ged 18 or older	(attach a separat	e sheet of paper if you	ı need r	more space)
- Line 306 – Amount for Provide the requested information First and last name: Address:	an infirm dependant a	ged 18 or older	(attach a separat	e sheet of paper if you	ı need r	
Line 306 – Amount for Provide the requested information First and last name:	an infirm dependant a	ged 18 or older following calculations Year of birth	(attach a separat	e sheet of paper if you	need r	more space)
- Line 306 – Amount for Provide the requested information First and last name: Address: Base amount	an infirm dependant a rmation and complete the	ged 18 or older following calculation Year of birth urn)	(attach a separat	e sheet of paper if you	need r	
Provide the requested information First and last name: Address: Base amount Infirm dependant's net income	an infirm dependant a rmation and complete the record of his or her retornant line 1 minus line 2 (if neg	ged 18 or older e following calcula Year of birth urn) native, enter "0")	(attach a separat ation for each dep Relationship to you	e sheet of paper if you endant.	need r	
Provide the requested information First and last name: Address: Base amount Infirm dependant's net income Allowable amount for this dependent on line 306 of your Sch	an infirm dependant a rmation and complete the recommendate the recommenda	ged 18 or older e following calculation Year of birth urn) native, enter "0") ou are claiming for	(attach a separat ation for each dep Relationship to you r all dependants.	e sheet of paper if you endant. (maximum \$6,788)	need r	
- Line 306 - Amount for Provide the requested inform First and last name: Address: Base amount Infirm dependant's net income Allowable amount for this dependenter on line 306 of your Scheller and the same and th	an infirm dependant a rmation and complete the e (line 236 of his or her retudant: line 1 minus line 2 (if negledule 1 the total amount y mount (attach a separate	ged 18 or older e following calculation Year of birth urn) native, enter "0") ou are claiming for the sheet of paper	(attach a separat ation for each dep Relationship to you r all dependants. r if you need more	e sheet of paper if you endant. (maximum \$6,788)	need r	
Provide the requested information First and last name: Address: Base amount Infirm dependant's net income Allowable amount for this dependent on line 306 of your Scheller on line 315 – Caregiver a Provide the requested information.	an infirm dependant a rmation and complete the e (line 236 of his or her retudant: line 1 minus line 2 (if negledule 1 the total amount y mount (attach a separate	ged 18 or older e following calculation Year of birth urn) lative, enter "0") ou are claiming for the sheet of paper e following calculations	(attach a separat ation for each dep Relationship to you r all dependants. r if you need more ation for each dep	e sheet of paper if you endant. (maximum \$6,788) e space) endant.	-	
- Line 306 - Amount for Provide the requested information First and last name: Address: Base amount Infirm dependant's net incomed Allowable amount for this dependenter on line 306 of your Scheller on Line 315 - Caregiver and Provide the requested information in the second secon	an infirm dependant a rmation and complete the e (line 236 of his or her retudant: line 1 minus line 2 (if negledule 1 the total amount y mount (attach a separate	ged 18 or older e following calculation Year of birth urn) native, enter "0") ou are claiming for the sheet of paper	(attach a separat ation for each dep Relationship to you r all dependants. r if you need more	e sheet of paper if you endant. (maximum \$6,788) e space) endant. Is this dependant physically of	-	
Provide the requested information First and last name: Address: Base amount Infirm dependant's net income Allowable amount for this dependent on line 306 of your Scheller on line 315 – Caregiver a Provide the requested information.	an infirm dependant a rmation and complete the e (line 236 of his or her retudant: line 1 minus line 2 (if negledule 1 the total amount y mount (attach a separate	ged 18 or older e following calculation Year of birth urn) lative, enter "0") ou are claiming for the sheet of paper e following calculations	(attach a separat ation for each dep Relationship to you r all dependants. r if you need more ation for each dep	e sheet of paper if you endant. (maximum \$6,788) e space) endant. Is this dependant physically of mentally infirm?	-	
- Line 306 - Amount for Provide the requested inform First and last name: Address: Base amount Infirm dependant's net income Allowable amount for this dependent on line 306 of your Scheller on line 306 of your Scheller and last name: Address:	an infirm dependant a rmation and complete the e (line 236 of his or her retudant: line 1 minus line 2 (if negledule 1 the total amount y mount (attach a separate	ged 18 or older e following calculation Year of birth urn) lative, enter "0") ou are claiming for the sheet of paper e following calculations	(attach a separat ation for each dep Relationship to you r all dependants. r if you need more ation for each dep	e sheet of paper if you endant. (maximum \$6,788) e space) endant. Is this dependant physically of	-	13,595 00
- Line 306 - Amount for Provide the requested inform First and last name: Address: Base amount Infirm dependant's net income Allowable amount for this dependent on line 306 of your Scheller on line 306 of your Scheller and last name: Address: Base amount	an infirm dependant a rmation and complete the e (line 236 of his or her retudant: line 1 minus line 2 (if negredule 1 the total amount y mount (attach a separatemation and complete the	ged 18 or older e following calculation Year of birth urn) pative, enter "0") ou are claiming for te sheet of paper e following calculation Year of birth	ation for each dep Relationship to you r all dependants. r if you need more ation for each dep Relationship to you	e sheet of paper if you endant. (maximum \$6,788) e space) endant. Is this dependant physically of mentally infirm? Yes No	-	
Provide the requested information First and last name: Address: Base amount Infirm dependant's net income Allowable amount for this dependent on line 306 of your Scheller on line 315 – Caregiver at a Provide the requested information in the second of the seco	an infirm dependant a rmation and complete the e (line 236 of his or her retudant: line 1 minus line 2 (if negredule 1 the total amount y mount (attach a separatemation and complete the	ged 18 or older e following calculation Year of birth urn) pative, enter "0") ou are claiming for te sheet of paper e following calculation Year of birth	ation for each dep Relationship to you r all dependants. r if you need more ation for each dep Relationship to you	e sheet of paper if you endant. (maximum \$6,788) e space) endant. Is this dependant physically of mentally infirm? Yes No	-	13,595 00
Provide the requested information First and last name: Address: Base amount Infirm dependant's net income Allowable amount for this dependent on line 306 of your Scheller on line 306 of	an infirm dependant a rmation and complete the e (line 236 of his or her retudant: line 1 minus line 2 (if negredule 1 the total amount y mount (attach a separatemation and complete the	ged 18 or older e following calculation Year of birth urn) pative, enter "0") ou are claiming for te sheet of paper e following calculation Year of birth	ation for each dep Relationship to you r all dependants. r if you need more ation for each dep Relationship to you	e sheet of paper if you endant. (maximum \$6,788) e space) endant. Is this dependant physically of mentally infirm? Yes No	-	13,595 00
Provide the requested information First and last name: Address: Base amount Infirm dependant's net income Allowable amount for this dependent on line 306 of your Scheller on line 315 – Caregiver at a Provide the requested information in the second of the seco	an infirm dependant a rmation and complete the e (line 236 of his or her retredant: line 1 minus line 2 (if negredule 1 the total amount y mount (attach a separatemation and complete the ly caregiver amount, enter the latest and the complete the latest and the complete the latest and the la	ged 18 or older e following calculation Year of birth urn) pative, enter "0") ou are claiming for te sheet of paper e following calculation Year of birth	ation for each dep Relationship to you r all dependants. r if you need more ation for each dep Relationship to you	e sheet of paper if you endant. (maximum \$6,788) e space) endant. Is this dependant physically of mentally infirm? Yes No	-	13,595 00
Provide the requested information First and last name: Address: Base amount Infirm dependant's net income Allowable amount for this dependenter on line 306 of your Scheller on line 315 — Caregiver a Provide the requested information in the second last name: Address: Base amount If you are entitled to the famic complete box 5112 below). Add lines 1 and 2. Dependant's net income (lines Line 3 minus line 4 (if negatives).	an infirm dependant a rmation and complete the e (line 236 of his or her return) e (line 1 minus line 2 (if negrecolded a separate rmation and complete the e 236 of his or her return) e 236 of his or her return) re, enter "0"). If you are enter mount and complete the e 236 of his or her return)	ged 18 or older e following calculate Year of birth urn) native, enter "0") ou are claiming for te sheet of paper e following calculate Year of birth er \$2,121 (see page) itled to the family	ation for each dep Relationship to you r all dependants. r if you need more ation for each dep Relationship to you e 45 in the guide ar	e sheet of paper if you endant. (maximum \$6,788) e space) endant. Is this dependant physically of mentally infirm? Yes No	-	13,595 00
Provide the requested information First and last name: Address: Base amount Infirm dependant's net income Allowable amount for this dependenter on line 306 of your Scheller on line 315 – Caregiver a Provide the requested information First and last name: Address: Base amount If you are entitled to the famic complete box 5112 below). Add lines 1 and 2. Dependant's net income (line Line 3 minus line 4 (if negative maximum amount is \$6,788).	an infirm dependant a rmation and complete the e (line 236 of his or her return) dant: line 1 minus line 2 (if negredule 1 the total amount y mount (attach a separatemation and complete the e 236 of his or her return) de, enter "0"). If you are enter the	ged 18 or older following calculation Year of birth year of birth ourn) ou are claiming for the sheet of paper following calculation Year of birth ar \$2,121 (see page) itled to the family 4,667.	ation for each dep Relationship to you r all dependants. r if you need more ation for each dep Relationship to you e 45 in the guide ar	e sheet of paper if you endant. (maximum \$6,788) e space) endant. Is this dependant physically of mentally infirm? Yes No	-	13,595 00
Provide the requested information First and last name: Address: Base amount Infirm dependant's net income Allowable amount for this dependent on line 306 of your Scheller on line 306 of yo	an infirm dependant a rmation and complete the e (line 236 of his or her return) required and complete the dant: line 1 minus line 2 (if negrecold amount y mount (attach a separate rmation and complete the e 236 of his or her return) re, enter "0"). If you are entable in the second in the maximum is \$ t on line 305 of Schedule 1	ged 18 or older following calculation Year of birth very enter "0") ou are claiming for te sheet of paper following calculation Year of birth er \$2,121 (see page) itled to the family 4,667. , enter the amount	ation for each dep Relationship to you r all dependants. r if you need more ation for each dep Relationship to you e 45 in the guide ar caregiver amount t you claimed.	e sheet of paper if you endant. (maximum \$6,788) e space) endant. Is this dependant physically of mentally infirm? Yes No	-	13,595 00
Provide the requested information First and last name: Address: Base amount Infirm dependant's net income Allowable amount for this dependenter on line 306 of your Scheller on line 315 – Caregiver a Provide the requested information First and last name: Address: Base amount If you are entitled to the famic complete box 5112 below). Add lines 1 and 2. Dependant's net income (line Line 3 minus line 4 (if negative maximum amount is \$6,788)	an infirm dependant a rmation and complete the e (line 236 of his or her retreated ant: line 1 minus line 2 (if negretule 1 the total amount y mount (attach a separatemation and complete the e 236 of his or her return) we, enter "0"). If you are entable 1 in the maximum is \$ ton line 305 of Schedule 1 pendant: line 5 minus line 6	ged 18 or older e following calculation Year of birth urn) ou are claiming for the sheet of paper e following calculation Year of birth Year of birth er \$2,121 (see page) itled to the family 4,667. , enter the amount of (if negative, enter	ation for each dep Relationship to you r all dependants. r if you need more ation for each dep Relationship to you e 45 in the guide ar caregiver amount t you claimed. r "0")	e sheet of paper if you endant. (maximum \$6,788) e space) endant. Is this dependant physically of mentally infirm? Yes No	-	13,595 00

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Schedule 6

Working Income Tax Benefit

For more information, see line 453 in the guide. Complete this schedule and attach a copy to your return to claim the working income tax benefit (WITB) if you meet all of the following conditions in 2016:

- you were a resident of Canada throughout the year;
- you earned income from employment or business; and
- at the end of the year, you were 19 years of age or older or you resided with your spouse or common-law partner or your child.

The WITB is calculated based on the working income (calculated in Part A below) and your adjusted family net income (calculated in Part B below). You can claim the basic WITB (Step 2) if the working income (amount on line 8 below) is more than \$4,750. If you are eligible for the WITB disability supplement (Step 3), your working income (amount on line 7 below) must be more than \$2,295. Also, if your adjusted family net income is less than the amount specified in the chart on the next page, you need to complete this form to find out if you are entitled to the WITB. If your adjusted family net income is more than the amount specified in the chart on the next page, you are not entitled to the WITB.

You cannot claim the WITB if in 2016:

- you were enrolled as a full-time student at a designated educational institution for more than 13 weeks in the year, unless you had an eligible dependant at the end of the year; or
- you were confined to a prison or similar institution for a period of at least 90 days during the year.

Notes: If you were married or living in a common-law relationship but did not have an eligible spouse or an eligible dependant, complete this schedule using the instructions as if you had neither an eligible spouse nor an eligible dependant.

If you are completing a final return for a deceased person who met the above conditions, you can claim the WITB for that person if the date of death was after June 30, 2016.

Step 1 - Calculating your working income and adjusted family net income

Do you have an eligible dependant?	381	Yes 1	No X	2				
Do you have an eligible spouse?	382	Yes X 1	No	2				
Part A – Working income					Column 1			Column 2
Complete columns 1 and 2 if you had an eligible spouse on December 31, 2016. Otherwise, complete column 1 only.					You			Your eligible spouse
Employment income and other employment income reported and line 104 of the return	on line 1	01			40,904 40	3	_	3
Taxable part of scholarship income reported on line 130			38	<u> +</u>		4	384 +	4
Total self-employment income reported on lines 135, 137, 139 of the return (excluding losses and income from a communal				<u>+</u>		5	<u>+</u>	5
Tax-exempt part of working income earned on a reserve or ar received as an emergency volunteer	n allowar	nce	38	5 +		6	386 +	6
Add lines 3 to 6. Enter the amount even if the result is "0".					40,904 40	7	387 =	7
Add the amounts from line 7 in columns 1 and 2. Enter this amount on line 16 on the next page.			Working	g inco	me	40,904	4 <u>40</u> 8	
Part B – Adjusted family net income								
Net income amount from line 236 of the return					41,852 40	9		9
Tax-exempt part of all income earned or received on a reserve deductions related to that income, or an allowance received a				_			_	
volunteer			38	8 <u>+</u>		10	389 +	10
Total of universal child care benefit (UCCB) repayment (line 213 of the return) and registered disability savings plan (lincome repayment (included on line 232 of the return)	RDSP)			+		11	+	11
Add lines 9, 10, and 11.				=	41,852 40		=	12
Total of UCCB (line 117 of the return) and RDSP income (line 125 of the return)						13	<u>-</u>	13
Line 12 minus line 13 (if negative, enter "0")				=	41,852 40	14	390 =	14
Add the amounts from line 14 in columns 1 and 2. Enter this amount on line 23 and line 35 on the next page.		Adjusted f	amily ne	t inco	ome	41,852	2 40 15	5
Are you claiming the basic WITB?	391	Yes X 1	No] 2	If yes, comple	te Step	2 on the	next page.
If you qualify for the disability amount, do you want to claim the WITB disability supplement amount? Does your eligible spouse qualify for the disability	392	Yes 1	No X	2	If yes , comple	te Step	3 on the	next page.
amount for himself or herself?	394	Yes 1	No X	2	If yes , he or sl and 3 on a se			•

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Step 2 - Calculating your basic WITB

If you had an eligible spouse, only **one of you** can claim the basic WITB. However, the individual who received the WITB advance payments for 2016 is the individual who **must** claim the basic WITB for the year. If you had an eligible dependant, **only one individual** can claim the basic WITB for that same eligible dependant.

Working income amount from line 8 on the previous page	<u>40,904 40</u> 16
Base amount	<u>- 4,750 00</u> 17
Line 16 minus line 17 (if negative, enter "0")	<u>= 36,154 40</u> 18
Rate	<u>× 20.4%</u> 19
Multiply line 18 by line 19.	<u>= 7,375 50</u> 20
If you had neither an eligible spouse nor an eligible dependant, enter \$1,242. If you had an eligible spouse or an eligible dependant, enter \$1,972.	1,972 00 21
Amount from line 20 or line 21, whichever is less	1,972 00 ►1,972 00 22
Adjusted family net income amount from line 15 on the previous page	<u>41,852 40</u> 23
Base amount: If you had neither an eligible spouse nor an eligible dependant, enter \$12,786. If you had an eligible spouse or an eligible dependant, enter \$17,234.	<u>- 17,243 00</u> 24
Line 23 minus line 24 (if negative, enter "0")	= 24,609 40 25
Rate	<u>× 16.5%</u> 26
Multiply line 25 by line 26.	<u>= 4,060 55 </u> ► <u>- 4,060 55 27</u>
Line 22 minus line 27 (if negative, enter "0") Enter the amount from line 28 on line 453 of your return unless you complete Step 3.	= 0 00 28

Step 3 - Calculating your WITB disability supplement

Enter the amount from line 7 in column 1 on the previous page.			_ 29	
Base amount		2,295 00	_ 30	
Line 29 minus line 30 (if negative, enter "0")	_ =		_ 31	
Rate	×	21%	_ 32	
Multiply line 31 by line 32.	_ =		_ 33	
Amount from line 33 or \$573, whichever is less			_ ▶	34
Adjusted family net income amount from line 15 on the previous page			_ 35	
Base amount: If you had neither an eligible spouse nor an eligible dependant, enter \$20,308. If you had an eligible spouse or an eligible dependant, enter \$29,170.	<u>-</u>		36	
Line 35 minus line 36 (if negative, enter "0")	_ =		_ 37	
Rate: If you had an eligible spouse and he or she also qualifies for the disability amount, enter 8.5%. Otherwise, enter 17%.	×		_ 38	
Multiply line 37 by line 38.	_ =		<u> </u>	39
Line 34 minus line 39 (if negative, enter "0")			<u> </u>	40
If you completed Step 2, enter the amount from line 28. Otherwise, enter "0".			<u>+</u>	41
Add lines 40 and 41.				
Enter this amount on line 453 of your return.			. 崖	42

Adjusted family net income levels	You had neither an eligible spouse nor an eligible dependant	You had an eligible spouse or an eligible dependant
Basic WITB Adjusted family net income (line 15 in Step 1)	less than \$20,314	less than \$29,186
WITB disability supplement (you qualify for the disability amount) Adjusted family net income (line 15 in Step 1)	less than \$23,679	less than \$32,541
WITB disability supplement (you had an eligible spouse and both of you qualify for the disability amount) Adjusted family net income (line 15 in Step 1)	-	less than \$35,912

Rong, Yingxu SIN: 738 423 219

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Schedule 8

T1-2016

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Canada Pension Plan Contributions and Overpayment for 2016

Complete this schedule to calculate your required Canada Pension Plan (CPP) contributions or overpayment for 2016 if you were a resident of a province or territory other than Quebec on December 31, 2016, and have no earned income from the province of Quebec.

Do not use this schedule if any of your T4 slips have Quebec Pension Plan (QPP) contributions. Instead complete Form RC381, *Inter-provincial calculation for CPP and QPP contributions and overpayments for 2016.*

Part 1 – If you were 60 to 70 years of age, you received a CPP or QPP retirement pension, and you had employment and/or self-employment income, you were considered a CPP working beneficiary and had to make CPP contributions. However, if you were at least 65 years of age but under 70, you can elect to stop paying CPP contributions. Read Part 1 of this schedule.

Part 2 – Complete this part to determine the number of months for the CPP calculation.

Part 3 – Complete this part to calculate your CPP contributions and any overpayment of CPP made through employment. If you are reporting self-employment or elective income **and** employment income, you must complete **Part 5**.

Part 4 or Part 5 – Complete one of these parts to calculate your CPP contributions if:

- you reported self-employment income on lines 135 to 143 of your return;
- you reported business or professional income from a partnership on line 122 of your return; or
- you made an election on Form CPT20 to pay additional CPP contributions on other earnings.

For more information, see line 222 in the guide.

Complete Part 4 if you are reporting only self-employment or elective income.

Complete Part 5 if you are reporting self-employment or elective income and employment income. You must first complete Part 3.

Attach a copy of this schedule to your return.

Part 1 – Election to stop contributing to the Canada Pension Plan or revocation of a prior election

If in 2016 you were 60 to 70 years of age, you received a CPP or QPP retirement pension, and you had employment and/or self-employment income, you were considered a CPP working beneficiary and you were required to make CPP contributions. However, if you were at least 65 years of age but under 70, you can elect to stop paying CPP contributions.

If you have **employment income** for 2016 and elected in 2016 to stop paying CPP contributions or revoked in 2016 an election made in a prior year, you should have already completed Form CPT30, *Election to Stop Contributing to the Canada Pension Plan, or Revocation of a Prior Election*, and sent it to us and your employer(s).

If you had **only self-employment** income for 2016 and elect in 2016 to stop paying CPP contributions on your self-employment earnings, enter the month in 2016 for which you choose to start this election in **box 372** below. The date cannot be earlier than the month you turn 65 and you are receiving a CPP or QPP retirement pension. For example, if you turn 65 in June, you can choose any month from June to December. If you choose the month of June, enter 06 in box 372 because June is the sixth month of the year. If in 2016 you are revoking an election made in a prior year on contributions on self-employment earnings, enter the month in 2016 for which you choose to revoke this election in box 374 below. Your election remains valid until you revoke it or you turn 70. If you start receiving employment income (other than employment income earned in Quebec) in a future year, you will have to complete Form CPT30 in that year for your election to remain valid.

If you had **both** employment income and self-employment income in 2016 and wanted to elect to stop paying CPP contributions in 2016, or to revoke in 2016 an election made in a prior year, you should have completed Form CPT30 in 2016. An election filed using Form CPT30 applies to all income from pensionable earnings, including self-employment earnings, as of the first day of the month after the date you gave this form to your employer. If you completed and submitted Form CPT30 when you became employed in 2016 but your intent was to elect in 2016 to stop paying CPP contributions or revoke an election made in a prior year on your self-employment income before you became employed, enter the month you want to stop contributing in **box 372** below, or if you want to revoke in 2016 an election made in a prior year, enter the month you want to resume contributing in **box 374** below. If you did not complete and submit Form CPT30 for 2016 when you became employed, you cannot elect to stop paying CPP contributions or revoke an election made in a prior year on your self-employment earnings for 2016 on this schedule. To be valid, an election or revocation that begins in 2016 must be filed on or before June 15, 2018.

I elect to **stop** contributing to the Canada Pension Plan on my self-employment earnings on the first day of the month that I entered in box 372.

I want to **revoke** an election made in a prior year to stop contributing to the Canada Pension Plan on my self-employment earnings and resume contributing on the first day of the month that I entered in box 374.

Month

[372]

Month

374

Part 2 – Determine the number of months for the CPP calculation

Enter 12 in box A unless one or more of the situations below apply.

- If you turned 18 years of age in 2016, enter the number of months in the year after the month you turned 18.
- If for all of 2016 you were receiving a CPP or QPP disability pension, enter "0". If you started or stopped receiving a CPP or QPP disability pension in 2016, enter the number of months during which you were not receiving a disability pension.
- If you were 65 to 70 years of age in 2016, you were receiving a CPP or QPP retirement pension, and you elected to stop paying CPP contributions in 2016, enter the number of months in the year up to and including the month you made the election. If you had self-employment income in 2016 and have an entry in box 372, enter the number of months in the year prior to the month you entered in box 372.
- If you were 65 to 70 years of age in 2016, you were receiving a CPP or QPP retirement pension, you elected to stop paying CPP contributions in a prior year, and you have not revoked that election, enter "0".
- If you were 65 to 70 years of age in 2016, you were receiving a CPP or QPP retirement pension, you elected to stop paying CPP contributions in a prior year, and you revoked that election in 2016, enter the number of months in the year after the month you revoked the election. If you had self-employment income in 2016 and have an entry in box 374, enter the number of months in the year after and including the month you entered in box 374.
- If you turned 70 years of age in 2016 and you did not elect to stop paying CPP contributions, enter the number of months in the year up to and including the month you turned 70 years of age.
- If for all of 2016 you were 70 years of age or older, enter "0".
- If the individual died in 2016, enter the number of months in the year up to and including the month the individual died.

Enter the number of months during which the CPP applies in 2016.

12 A

ı	Part 3 – Calculating your CPP contributions and overpayment on employed	oyment income -					
	Enter your yearly maximum CPP pensionable earnings (see the monthly proration table below to find the amount that corresponds to the number of months entered in box A of Part 2).	(maximum \$54,900)		54,900	00	1
	Total CPP pensionable earnings Enter the total of box 26 of all your T4 slips (maximum \$54,900 per slip). If box 26 is blank, use box 14.		5549	l	40,904	40	2
	Enter the amount from line 1 or the amount from line 2, whichever is less.	(maximum \$54,900)		40,904	40_	3
	Enter your maximum basic CPP exemption (see the monthly proration table below to find the amount that corresponds to the number of months entered in box A of Part 2).	(maximum \$3,500)	*	<u>-</u>	3,500	00	4
	Earnings subject to CPP contributions: Line 3 minus line 4 (if negative, enter "0")	(maximum \$51,400)	=	37,404	<u>40</u>	5
	Actual CPP contributions: Enter the total CPP contributions deducted from box 16 of all your T4 slips. Required contributions on CPP pensionable earnings: Multiply the amount from line 5 by 4.95%. Line 6 minus line 7 (if negative, enter "0")	(maximum \$2,544.30 CPP overpaymen	-	_ - E	1,851 1,851		7

If you are **self-employed** and/or you are **electing to pay additional** CPP contributions on other earnings, enter the amount from line 6 on **line 308** of your Schedule 1 and, if applicable, on **line 5824** of Form 428. Then continue with Part 5.

Otherwise, enter the amount from line 6 or line 7, whichever is **less**, on **line 308** of your Schedule 1 and, if applicable, on **line 5824** of Form 428. If the amount from line 8 is **positive**, enter it on **line 448** of your return. If the amount from line 8 is **negative**, you may be able to make additional CPP contributions; see "Making additional CPP contributions" on page 48 of the *General Income Tax and Benefit Guide*.

		Monthly prorat
	Part 3	
Applicable number of months	Line 1 Maximum CPP pensionable earnings	Line 4 Maximum basic CPP exemption *
1	\$4,575	\$291.67
2	\$9,150	\$583.33
3	\$13,725	\$875.00
4	\$18,300	\$1,166.67
5	\$22,875	\$1,458.33
6	\$27,450	\$1,750.00

	Part 3 continue	d
Applicable number of months	Line 1 Maximum CPP pensionable earnings	Line 4 Maximum basic CPP exemption *
7	\$32,025	\$2,041.67
8	\$36,600	\$2,333.33
9	\$41,175	\$2,625.00
10	\$45,750	\$2,916.67
11	\$50,325	\$3,208.33
12	\$54,900	\$3,500.00

^{*} If you started receiving CPP retirement benefits in 2016, your basic exemption may be prorated by the CRA.

Part 4 – CPP contributions on self-employment and other earnings ONLY (no employmen	t inc	ome) ———	
		I	
Pensionable net self-employment earnings*			1
(amounts from line 122 and lines 135 to 143 of your return) Employment earnings not shown on a T4 slip on which you elect to pay additional CPP contributions			1
(attach Form CPT20)	373	+ 2	2
Add lines 1 and 2 (if negative enter "0"). CPP pensionable earnings (maximum \$54,900)*			3
Basic exemption (maximum \$3,500)*		- 4	4
Line 3 minus line 4 (maximum \$51,400)		=	5
CPP rate		× 9.9%	6
CPP contributions payable on self-employment and other earnings: Multiply line 5 by line 6. Enter this amount on line 421 of your return.			7
Deduction and tax credit for CPP contributions on self-employment and other earnings:			-
Multiply the amount from line 7 by 50%.			8
Enter the amount from line 8 on line 222 of your return and on line 310 of Schedule 1.			
* Self-employment earnings, CPP pensionable earnings, and the basic exemption should be prorated according to the number entered in box A of Part 2 (do not prorate the self-employment earnings if the individual died in 2016).	of me	onths	
Part 5 – CPP contributions on self-employment and other earnings when you have emplo	vmo	nt income	
Tart 5 Of F contributions on sen-employment and other carnings when you have emplo	yiiic		
Descionable not self-availation at a series as			
Pensionable net self-employment earnings* (amounts from line 122 and lines 135 to 143 of your return)		,	1
Employment earnings not shown on a T4 slip on which you elect to pay additional CPP contributions (attach Form CPT20)	373	+ 2	2
Employment earnings shown on a T4 slip on which you elect to pay additional CPP contributions,	0.0	·	_
line 12 of Form CPT20 (attach Form CPT20)	399	+ 3	3
Add lines 1, 2, and 3.		= 4	4
			_
Enter the amount from line 6 of Part 3. Actual CPP contributions			5
If the amount on line 8 of Part 3 is positive, complete lines 6 to 8. Otherwise, enter "0" on line 8 and continue on line 9.			
Enter the amount from line 5 above.	6		
Enter the amount from line 7 of Part 3.	7		
Line 6 minus line 7 (if negative, enter "0")	>	8	8
Line 5 minus line 8 (if negative, enter "0")		= 9	9
Multiply the agreement from the Co. by 00,000			10
Multiply the amount from line 9 by 20.202.			10
Enter the amount from line 1 of Part 3. CPP pensionable earnings (maximum \$54,900)		'	11
Enter the amount from line 4 of Part 3. Basic exemption (maximum \$3,500)		-	12
Line 11 minus line 12 (if negative, enter "0") (maximum \$51,400)		=	13
Enter the amount from line 10.			14
Line 13 minus line 14 (if negative, enter "0")		=	15
Enter the amount from line 4 or line 45, which was in less			16
Enter the amount from line 4 or line 15, whichever is less . If the amount on line 2 of Part 3 is less than the amount on line 4 of Part 3, complete lines 17 to 19.			10
Otherwise, enter "0" on line 19 and continue on line 20.			
	17		
	18		
Line 17 minus line 18 (if negative, enter "0")	•	- 1	19
Earnings subject to contributions: line 16 minus line 19 (if negative, enter "0")		= 2	20
Multiply the amount from line 20 by 9.9%.			21
Multiply the amount from line 8 of Part 3 (if positive only) by 2.		2	22
CPP contributions payable on self-employment and other earnings:			
Line 21 minus line 22 (if negative, enter "0"). Enter this amount on line 421 of your return. **		= 2	23
Deduction and tax credit for CPP contributions on self-employment and other earnings: Multiply the amount from line 23 by 50%.			24
Enter the amount from line 24 on line 222 of your return and on line 310 of Schedule 1.		4	∠4
·			
* Self-employment earnings should be prorated according to the number of months entered in box A of Part 2 (do not prorate self-employment earnings if the individual died in 2016).	the		
** If the result on line 23 is negative, you may have an overpayment. If so, we will calculate it for you.			
ii alo rocan on ililo 20 lo nogalivo, you may have an overpayment ii so, we will calculate it for you.			

See the privacy notice on your return.

T1-2016

UFile

Donations and Gifts

Schedule 9

For more information, see line 349 in the guide and see Pamphlet P113, Gifts and Income Tax.

Attach a copy of this schedule to your return. Remember, you may have charitable donations shown on your T4 and T4A slips.

Donations made to registered charities, registered Canadian amate and registered Canadian low-cost housing corporations for the age		tic a	ssociations	,				_	945	<u>00</u> 1
Donations made to government bodies (government of Canada, a in Canada, or a registered municipal or public body performing a fu	inction of	f gov					329	+		2
Donations made to registered universities outside Canada that are	prescribe	ed					333	+		3
Departions made to the United Nations, its agencies, and cortain re	aistored	foro	ian aharitah	مام د	raan	izationa	0.0			
Donations made to the United Nations, its agencies, and certain readd lines 1 to 4.						table donations	334	ı +	045	4
Add liftes 1 to 4.	TOLAI EII	igibi	e amount	OI C	ilaili	lable dollations		=	945	00 5
Enter your net income from line 236 of your return.			41,852		•	× 75% =			31,389	
Note: If line 5 is less than line 7, enter the amount from line 5	on line 13	3 be	low and co	onti	nue	completing the	sch	edule	e from tha	t line.
Gifts of depreciable property (from Chart 2 in Pamphlet P113, Gifts and Income Tax)	337	1			8					
Gifts of capital property (from Chart 1 in Pamphlet P113, Gifts and Income Tax)	339				9					
Add lines 8 and 9.		=			10	× 25% =		+		11
Enter the total of lines 7 and 11 or the amount on line 236 of your return, whichever is less .				Т	otal	donations limit			31,389	30 12
Allowable charitable donations (enter the amount from line 5 or line	e 12. whic	chev	er is less)				340	1	945	00 13
Eligible amount of cultural and ecological gifts (see line 349 in the			<u> </u>				342		<u> </u>	14
Add lines 13 and 14.	3 /						<u> </u>	<u> </u>	945	00 15
Enter \$200 or the amount from line 15, whichever is less .							•			00 16
Line 15 minus line 16. If your taxable income is less than \$200,0 line 28. Otherwise, complete lines 18 to 27, before continuing on li		. "0"	at line 26 a	and (conti	nue on				00 17
Enter the amount from line 17.					18					
Enter the amount of donations included at line 15 that were made before 2016.	354	ļ -			19					
Line 18 minus line 19 (if negative, show it in brackets)		=			20					
Enter the amount from line 16 or line 19, whichever is less .		+			21					
Add lines 20 and 21.					22					
Enter your taxable income from line 260 of your return.					00					
Income threshold			200,000	00	23					
Line 23 minus line 24 (if negative enter "0")		_	200,000	00	25					
Ente 25 minute into 2 i (ii negative cirtor o)		=_			_ 23					
If you did not complete lines 18 to 25, enter "0". Otherwise, enter the amount from line 22 or line 25, whichever is less .			0	00	26	× 33% =		<u>+</u>		27
If you did not complete lines 18 to 27, enter the amount from										
line 17. Otherwise, enter the result of line 17 minus line 26.			745			× 29% =		+		<u>05</u> 29
Enter the amount from line 16.			200	00	30	× 15% =		+	30	00 31
First-time donor's super credit (FDSC)										
For the purpose of the FDSC, you will be considered a first-time do and been allowed a charitable donations tax credit for any year aft		ither	you nor yo	our s	spous	se or common-la	w pa	ırtner	has claim	ed
Only gifts of money made after March 20, 2013, to a maximum of S		re e	liaible for th	ne F	DSC	_				
Note: If you have a spouse or common-law partner, you can share cannot be more than \$1,000.			-				dona	tions	claimed	
Enter the amount of gifts of money* made after March 20, 2013. (Maximum \$1,	000) 25 55	Ī	နေ	00	22	v 25% –			15	75 ₃₃
Add lines 27, 29, 31, and 33.	<u>525</u>	l	03	IUU	32	× 25% =		\vdash	13	75 33

Donations and gifts

Enter this amount on line 349 of Schedule 1.

^{*} The amount claimed on line 343 must also be claimed on line 340 by you or your spouse or common-law partner. If the donations are shared, the combined amount on line 343 for you and your spouse or common-law partner cannot be more than the combined amount claimed on line 340 by both of you.



British Columbia Tax

BC428 T1 General - 2016

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

Step 1 – British Columbia non-refundable tax c		Γ		For internal use only	5609				
Basic personal amount		L		claim \$10,027			10,027	00	1
Age amount (if born in 1951 or earlier) (use the <i>Provincial Worksheet</i>)				(maximum \$4,497)			,		2
Spouse or common-law partner amount		[-
Base amount		9,445							
Minus: his or her net income from page 1 of your return	<u>-</u>	0 (ı	
Result: (if negative, enter "0")	=	9,445	00	(maximum \$8,586) ▶	5812	+	8,586	00	_ 3
Amount for an eligible dependant		9,445	00						
Base amount Minus: his or her net income from line 236 of his or her return	-	9,445	00_						
	-		_	(E046			l	1
Result: (if negative, enter "0")	=			(maximum \$8,586) ▶	3010	+			. 4
Amount for infirm dependants age 18 or older (use the <i>Provincial Worksheet</i>)					5820	_			5
CPP or QPP contributions:					3020				. •
(amount from line 308 of your federal Schedule 1)					5824	+	1,851	50	
(amount from line 310 of your federal Schedule 1)					5828				•
Employment insurance premiums:									
(amount from line 312 of your federal Schedule 1)					5832	+	738	48	•
(amount from line 317 of your federal Schedule 1)					5829	+			•
Adoption expenses (amount from line 313 of your federal Schedule 1)					5833				1
Children's fitness amount					5838				1
Children's fitness equipment amount (50% of amount from line 583	38)				5842				1
Children's arts amount	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(max	imun \$500 per child)					1
Back-to-school amount			(iiida	man pood por onna	5846				- · 1
Education coaching amount					5843				- · 1
Pension income amount				(maximum \$1,000)					- ' 1
Caregiver amount (use the <i>Provincial Worksheet</i>)				(maximum \$1,000)	5840				- ' 1
Disability amount (for self)					30-10				- '
(Claim \$7,521 , or if you were under 18 years of age, use the <i>Provin</i>	ncial Worl	ksheet.)			5844	+			1
Disability amount transferred from a dependant		,							•
(use the Provincial Worksheet)					5848	+			_ 1
Interest paid on your student loans (amount from line 319 of your federal	ral Schedul	e 1)			5852	+			2
Your tuition and education amounts [use and attach Schedule BC(S11	1)]	,			5856	+			_ 2
Tuition and education amounts transferred from a child					5860				- 2
Amounts transferred from your spouse or common-law partner [use	and attac	h Schedul	le BC(S2)]	5864				2
Medical expenses:			,						
Amount from line 330 of your federal Schedule 1			5868	3	24				
Enter \$2,085 or 3% of line 236 of your return, whichever is less.				-	25				
Line 24 minus line 25 (if negative, enter "0")				=	26				
Allowable amount of medical expenses for other dependants									
(use the Provincial Worksheet)			5872	2 +	27				
Add lines 26 and 27.			5876	<u> = </u>	. ▶	+			_ 2
Add lines 1 to 23, and line 28.					5880	=	21,202		_
British Columbia non-refundable tax credit rate						×	5.06	%	_ 3
Multiply line 29 by line 30.					5884	=	1,072	87	_ 3
Donations and gifts:	1			ı					
·	200 00	× 5.06%		10 12					
	745 00	× 14.79	<u>% =</u>	+ 109 52				ı	
Add lines 32 and 33.			<u>589</u> 6	= 119 64	. ▶	<u>+</u>	119		_
Add lines 31 and 34.						=	1,192	51	_ 3
Farmers' food donation tax credit:	_								
Enter the amount of qualifying gifts that have also been claimed or line 35.	n			× 25% =	5900	_		l	3
Add lines 35 and 36.				<u> </u>	2030	一		\vdash	า ว
	British Co	lumbia n	on-refu	ındable tax credits	6150	L	1,192	51	3
5010-C							the next p		_

Step 2 - British Columbia tax on taxable income

Complete the appropriate	_			_											7
column depending on the					Line 38 is more			38 is mor		Line 38 is m					
mount on line 38.		Line 38 is \$38,210 or les	ss		an \$38,210 but r ore than \$76,42			6,421 but han \$87,7		than \$87,741 b more than \$10			Line 38 is mor than \$106,543		
Enter the amount from line 38.					41,852	10									3
ine 39 minus line 40	_	0	00	-	38,210	00	-	76,421	00	- 87,74	41 00) -	106,543	00	4
cannot be negative)	=			=	3,642	1 0	=			=		=			_
Jultiply line 41		5.06	5%	×	7.79	— 6	×	10.5	%	× 12.2	29%	×	14.7	%	7
y line 42.	=			=	280	 16	=			=		=			_ ٰ
dd lines 43 and 44.		0	00	+	1,933 (<u> </u>	+	4,875	00	+ 6,06	64 00) +	8,375	00	1
ritish Columbia tax on taxable															1
ncome	_ =				2,213	<u> 16</u>	=			=					
Enter your British Columbia tax on taxe Enter your British Columbia tax on split add lines 46 and 47.											615	1 <u>+</u> =	2,213 2,213		•
nter your British Columbia non-refund	dable tax	credits fron	n lin	e 37	7.			_		1,192 51	49				
ritish Columbia dividend tax credit: Credit calculated for line 6152 on the	Provinci	ial Workshe	et					6152 <u>+</u>			•50				
ritish Columbia minimum tax carryove	er:														
Amount from line 427 of your federal	Schedul	e 1			×	33	3.7% =	6154 <u>+</u>			•51				
dd lines 49 to 51.								=		1,192 51	•	_	1,192	51	_
ine 48 minus line 52 (if negative, ente	r "0")											=_	1,020	95	_
ritish Columbia additional tax for mini	mum tax	purposes:													
Amount from line 117 of Form T691					×	33	3.7% =					<u>+</u>			_
dd lines 53 and 54.												=_	1,020	95	_ :
rovincial foreign tax credit from Form	T2036														
ine 55 minus line 56 (if negative, ente	r "0")											=_	1,020	95	_
3C tax reduction f your net income (line 236 of your retu Otherwise, enter "0" on line 64 and cor	,		1,64	7 , c	omplete the	foll	owing (calculat	ion.						
Basic reduction					cl	ain	n \$436	_			58				
nter your net income from line 236 of	your retu	ırn.		_				59							
ase amount	IIOII)			_	<u>- 1</u>	9,4		60							
ne 59 minus line 60 (if negative, ente	r "U")			_	=	_		61							
pplicable rate				_	×	3.	56%	62		1	00				
Jultiply line 61 by line 62.	IIOII)			_	=			<u> </u>			63			ı	
ine 58 minus line 63 (if negative, ente								=				_	1 000	0-	- (
ine 57 minus line 64 (if negative, ente	r "0")											=_	1,020	95	_ (
ogging tax credit from Form FIN 542S	or Form	FIN 542P										_		L	
															•

Continue on the next page.

1,020 95 67

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

Step 3 - British Columbia tax (continued)

Enter the amount from line 67 on the previous page.					1,020 95	_ 68
British Columbia political contribution tax credit						
Enter your British Columbia political contributions made in 2016.	60	140	69			
Credit calculated for line 70 on the Provincial Worksheet		(maximum \$50	0)			70
Line 68 minus line 70 (if negative, enter "0")			_	=	1,020 95	71
British Columbia employee investment tax credits Enter your employee share ownership plan tax credit from Certificate ESO	P 20. 60) 45	•72			
Enter your employee venture capital tax credit from Certificate EVCC 30.	60	47 +	_ •73		1	
Add lines 72 and 73. (ma	ximum \$2,000)	=	►			_ 74
Line 71 minus line 74 (if negative, enter "0")			_	=	1,020 95	75
British Columbia mining flow-through share tax credit						
Enter the tax credit amount calculated on Form T1231.			688	1		•76
Line 75 minus line 76 (if negative, enter "0")						
Enter the result on line 428 of your return.		British Columbia t	<u>ax</u>	=	1,020 95	77

See the privacy notice on your return.

09 Apr 2017

Rong, Yingxu SIN: 738 423 219 Protected B when completed



British Columbia Credits

BC479

T1 General - 2016

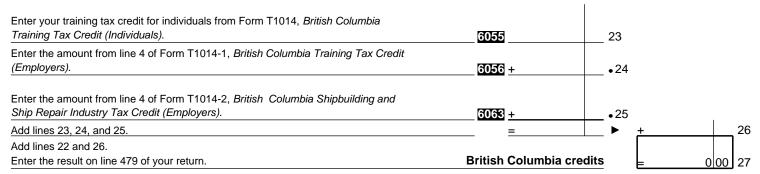
Complete the calculations that apply to you and attach a copy of this form to your return. For more information, see the related line in the forms book.

Sales tax credit (for low-income families and individuals)

Income for the sales tax credit		(Column 1 You		Your s	lumn 2 spouse o mon-law artner	r
Enter the net income amount from line 236 of the return.			41,852 40	. 1			_ 1
Total of the universal child care benefit (UCCB) repayment (line 213	3 of the return) and						
the registered disability savings plan (RDSP) income repayment (in	cluded on line 232)	<u>+</u>		2	+		_ 2
Add lines 1 and 2.		<u>=</u>	41,852 40	3	=		_ 3
Total of the UCCB income (line 117 of the return) and the RDSP income	come						
(line 125 of the return)		_ <u>- </u>		4			_ 4
Line 3 minus line 4 (if negative, enter "0")		<u>=</u>	41,852 40	5	=		_ 5
Add the amounts from line 5							
in column 1 and column 2 (if applicable).	Adjı	usted net fa	mily income	•		41,852 4	<u>)</u> 6
If you had a spouse or common-law partner on December 31, 2016	,						
enter \$18,000. Otherwise, enter \$15,000.				-		18,000 0	
Line 6 minus line 7 (if negative, enter "0")	Income	e for the sal	les tax credit		=	23,852 4	<u>2</u> 8
mount from line 8	23,8	352 40	× 2% =			477 0	 5_ 1
British Columbia home renovation tax cred persons with disabilities on December 31, 2016, you and your spouse or common-law partners principal residences for medical reasons, claim individually to	it for seniors and er occupied he home		× 2% = les tax credit		=		
ine 11 minus line 12 (if negative, enter "0") British Columbia home renovation tax cred persons with disabilities on December 31, 2016, you and your spouse or common-law partner eparate principal residences for medical reasons, claim individually the enovation tax credit for seniors and persons with disabilities and tick enter your home renovation expenses from line 5	it for seniors and er occupied he home box 6089.	Sal	les tax credit		=		<u>0</u> 1:
British Columbia home renovation tax cred persons with disabilities on December 31, 2016, you and your spouse or common-law partner parate principal residences for medical reasons, claim individually the provation tax credit for seniors and persons with disabilities and tick enter your home renovation expenses from line 5	it for seniors and er occupied he home	Sal			<u>-</u> =		<u>0</u> 1
British Columbia home renovation tax cred persons with disabilities on December 31, 2016, you and your spouse or common-law partner apparate principal residences for medical reasons, claim individually the provation tax credit for seniors and persons with disabilities and tick on the renovation expenses from line 5 from Schedule BC(S12).	it for seniors and er occupied he home box 6089.	Sal	les tax credit		<u>-</u> =		<u>0</u> 1
British Columbia home renovation tax cred persons with disabilities on December 31, 2016, you and your spouse or common-law partner eparate principal residences for medical reasons, claim individually the enovation tax credit for seniors and persons with disabilities and tick on the renovation expenses from line 5 from the following spous spouse or common-law partner expenses from the person of the following spous sp	it for seniors and er occupied he home box 6089.	Sal	les tax credit		+		<u>0</u> 1
British Columbia home renovation tax cred persons with disabilities on December 31, 2016, you and your spouse or common-law partner are principal residences for medical reasons, claim individually the enovation tax credit for seniors and persons with disabilities and tick and the enovation tax credit for seniors and persons with disabilities and tick and the enovation expenses from line 5 from Schedule BC(S12). British Columbia venture capital tax credit enter your venture capital tax credit from Certificate SBVC 10	it for seniors and er occupied he home box 6089.	Sal	les tax credit		<u>-</u> =		<u>0</u> 1
British Columbia home renovation tax cred persons with disabilities on December 31, 2016, you and your spouse or common-law partner apparate principal residences for medical reasons, claim individually the provation tax credit for seniors and persons with disabilities and tick and the provation tax credit for seniors and persons with disabilities and tick and the provation tax credit for seniors and persons with disabilities and tick and the provation expenses from line 5 from Schedule BC(S12). British Columbia venture capital tax credit and persons with disabilities and tick and persons with di	it for seniors and er occupied he home box 6089.	Sal	les tax credit	:	+		<u>0</u> 1
British Columbia home renovation tax cred persons with disabilities on December 31, 2016, you and your spouse or common-law partner apparate principal residences for medical reasons, claim individually the provation tax credit for seniors and persons with disabilities and tick and the provation tax credit for seniors and persons with disabilities and tick and the provation expenses from line 5 from Schedule BC(S12). British Columbia venture capital tax credit from Certificate SBVC 10 for shares acquired in 2016. Inter your venture capital tax credit from Certificate SBVC 10 for shares your venture capital tax credit from Certificate SBVC 10 for shares.	res	Sal	les tax credit	:	- = +		<u>0</u> 1
British Columbia home renovation tax cred persons with disabilities on December 31, 2016, you and your spouse or common-law partner eparate principal residences for medical reasons, claim individually the enovation tax credit for seniors and persons with disabilities and tick enter your home renovation expenses from line 5 from Schedule BC(S12). British Columbia venture capital tax credit enter your venture capital tax credit from Certificate SBVC 10 for shares acquired in 2016. Inter your venture capital tax credit from Certificate SBVC 10 for shares during the first 60 days of 2017 that you elect to claim in 2	er occupied he home box 6089.	6089 6049	les tax credit	•15	-		<u>0</u> 1
British Columbia home renovation tax credit persons with disabilities on December 31, 2016, you and your spouse or common-law partner persons with disabilities on December 31, 2016, you and your spouse or common-law partner persons with disabilities and tick persons with disabilities and tick on the renovation tax credit for seniors and persons with disabilities and tick on the renovation expenses from line 5 from Schedule BC(S12). British Columbia venture capital tax credit or shares acquired in 2016. Inter your venture capital tax credit from Certificate SBVC 10 for shares acquired in 2016. Inter your venture capital tax credit from Certificate Columbia venture capital tax credit from Certificate SBVC 10 for shares acquired in 2016. Inter your unused venture capital tax credit from previous years show	er occupied he home box 6089.	6089 6049	les tax credit	•15	+		<u>0</u> 1
British Columbia home renovation tax cred persons with disabilities on December 31, 2016, you and your spouse or common-law partner apparate principal residences for medical reasons, claim individually the enovation tax credit for seniors and persons with disabilities and tick and the enovation tax credit for seniors and persons with disabilities and tick and the enovation expenses from line 5 fryour Schedule BC(S12). British Columbia venture capital tax credit enter your venture capital tax credit from Certificate SBVC 10 for shares acquired in 2016. Inter your venture capital tax credit from Certificate SBVC 10 for shares during the first 60 days of 2017 that you elect to claim in 2 the your most recent notice of assessment or notice of reassessment.	res	6089 6049 6050 +	les tax credit	•15	+		1
British Columbia home renovation tax cred persons with disabilities on December 31, 2016, you and your spouse or common-law partner apparate principal residences for medical reasons, claim individually the provation tax credit for seniors and persons with disabilities and tick and the provation tax credit for seniors and persons with disabilities and tick and the provation tax credit for seniors and persons with disabilities and tick and the provation tax credit for seniors and persons with disabilities and tick and the provation tax credit for seniors and persons with disabilities and tick and the provation tax credit for seniors and persons with disabilities and tick and the provation of the	er occupied he home box 6089.	6089 6049 6050 +	les tax credit	•15	++		1
British Columbia home renovation tax cred persons with disabilities on December 31, 2016, you and your spouse or common-law partner apparate principal residences for medical reasons, claim individually the provation tax credit for seniors and persons with disabilities and tick and the provation tax credit for seniors and persons with disabilities and tick and the provation tax credit for seniors and persons with disabilities and tick and the provation tax credit for seniors and persons with disabilities and tick and the provation tax credit for seniors and persons with disabilities and tick and the provation tax credit from the provation of the	res (maximum \$60,000)	6089 6049 6050 +	les tax credit	•15	+		1
British Columbia home renovation tax credity on December 31, 2016, you and your spouse or common-law partner parate principal residences for medical reasons, claim individually the provation tax credit for seniors and persons with disabilities and tick on the renovation expenses from line 5 from Schedule BC(S12). British Columbia venture capital tax credity or shares acquired in 2016. Inter your venture capital tax credit from Certificate SBVC 10 for shares acquired in 2016. Inter your venture capital tax credit from Certificate SBVC 10 for shares acquired in 2016. Inter your venture capital tax credit from Certificate SBVC 10 for shares acquired in 2016. Inter your unused venture capital tax credit from previous years show our most recent notice of assessment or notice of reassessment. Inter your unused venture capital tax credit from previous years show our most recent notice of assessment or notice of reassessment. British Columbia mining exploration tax creditish.	res (maximum \$60,000)	6089 6049 6050 +	les tax credit	•15	+		1
British Columbia home renovation tax cred persons with disabilities on December 31, 2016, you and your spouse or common-law partner parate principal residences for medical reasons, claim individually the provation tax credit for seniors and persons with disabilities and tick of the provation tax credit for seniors and persons with disabilities and tick of the provation tax credit for seniors and persons with disabilities and tick of the provation tax credit for seniors and persons with disabilities and tick of the provation tax credit from line 5 (maximum Schedule BC(S12)). British Columbia venture capital tax credit from Certificate SBVC 10 for shares acquired in 2016. Inter your venture capital tax credit from Certificate SBVC 10 for shares acquired the first 60 days of 2017 that you elect to claim in 2 onter your unused venture capital tax credit from previous years show the provation of the provious of the p	res (maximum \$60,000) (maximum \$60,000)	6089	les tax credit	•15 •16 17 ▶	+		
British Columbia home renovation tax cred persons with disabilities on December 31, 2016, you and your spouse or common-law partnerparate principal residences for medical reasons, claim individually tenovation tax credit for seniors and persons with disabilities and tick	res (maximum \$60,000) (maximum \$60,000)	6089 6049 6050 +	les tax credit	•15 •16 17 ▶	+		1

Enter the amount from line 21 on the previous page.

British Columbia training tax credit



See the privacy notice on your return.

Rong, Yingxu SIN: 738 423 219

T1-2016

Schedule of charitable donations Federal

•	charities, registered Canadian amateur athletic associations, cost housing corporations for the aged.
Name of donor: Yingxu Rong	
Internation Buddeist	662 00
Liyan	170 00
YMCA	50 00
Donations as per T-slips	63 00
	Amount eligible for line 1 of the Schedule 9. 945 00 1

Total Canadian donations available for tax credit	
Total donations in current year, per list above - self	945 00
Total donations in current year, per list - spouse	+
Total Canadian donations available for tax credit	= 945 00

Total donations eligible for tax credit, claim & carryforward					
Total Donations limit per line 12 of schedule 9 Total Donations (including amounts carried forward)	31,389 30 945 00				
Donations claimed in the current year - self Donations claimed in the current year - spouse		945 00			
Schallene stanned in the carrott year opened	Total claim	= 945 00			
Donations carried forward to future years - self					
Donations carried forward to future years - spouse		+			
	Total carryforward	= 0 00			

Summary of donations carried forward

Donations made to registered charities, registered Canadian amateur athletic associations, and registered Canadian low-cost housing corporations for the aged.

Year of	Description	Amount	Amount used	Amount to carry
donation		for 2016	in 2016*	forward to 2017
2016	Current year's donations	945 00	945 00	0 00
	Total	945 00	945 00	0 00

^{*} May include unused amounts expiring at the end of this year. These amounts will then be available in case of a future adjustment to the income tax return.

Rong, Yingxu SIN: 738 423 219

Protected B when completed

T1 - 2016

Federal Worksheet

Use the following charts to make your calculations according to the line instructions in the *General Income Tax and Benefit Guide*. Keep this worksheet for your records. **Do not attach it to the return you send us.**

Keep this worksheet for your records. Do	not attach it to the return you send us.		
Line 129 - RRSP income			
Inclusion in income for RRSP home	buyer's plan repayment		948 00
		Total =	948 00
Line 364 - Public transit a	amount		
Name: Rong, Yingxu	Public transit - transit by local bus		884 27
Name: Ji, Xiaoyun	Public transit - transit by local bus		316 00
		Total	= 1,200 27
Amount claimed by your spouse (line	e 364 of his or her Schedule 1)		-
Amount claimed by your dependant ((line 364 of his or her Schedule 1)		- 316 00
Carry the result to line 364 of the T1	Income Tax Return.		
		Public transit amount	= 884 27
Line 437 – Income tax dec	ducted		
<u>T4</u>	YMCA OF GREATER VANCOUVER		5,363 90
Total income tax deducted			
Enter this amount on line 437 of your	return		= 5,363 90

Registered Retirement Savings Plan (RRSP) Schedule

Table B - Calculation of eligible RRSP/PRPP deduction in 2016		
2		
Eligible amount based on 2015 income		10.716.0
RRSP room based previous years' income	+	48,716 2
Pension adjustment reversal amount from your 2016 T10 slip	+	3
2016 PSPA (from last year's RPP administrator's statement)	-	4
Employer PRPP contributions (amount from line 205)	-	5
Unused RRSP Room	=	<u>48,716</u> 6
Maximum RRSP/PRPP deduction limit in 2016		48,716 7
Table C - Calculation of RRSP/PRPP deduction in 2016		
Contributions available for RRSP/PRPP deduction (table A, line 12)	=	
Maximum RRSP/PRPP deduction limit in 2016 (table B, line 7)	=	48,716
DDCD/DDDD de duction hafare transfers		
RRSP/PRPP deduction before transfers		1
Direct or indirect transfers RRSP/PRPP deduction (per line 208)	+	0 3
KRSP/PRPP deduction (per line 206)	=	<u> </u>
Table D - Calculation of 2016 earned income		
2016 calculation in reference to 2017 RRSP/PRPP eligibility		
Employment income (line 101 and part of line 104 not shown elsewhere in this calc)		40,904 1
Union, professional or like dues (line 212)	-	2
Employment expenses (line 229)	-	3
Subtotal (employment income)	=	40,904 4
Royalties for a work or invention (line 104)	+	5
Net research grants you received (line 104)	+	6
Employee profit sharing plan allocations- T4PS-Box 35 (line 104)	+	7
Supplementary unemployment benefit plan payments (line 104)	+	8
Net Income from a business (lines 135-143)	+	9
Disability payments received from the CPP or QPP (line 152)	+	10
Net rental income from real property (line 126)	+	11
Alimony or maintenance income received (line 128)	+	12
2016 contributions to an amateur athlete trust (AAT)	+	13
Subtotal - total eligible income		<u>40,904</u> 14
	15	
	16	
	17	
· · · · · · · · · · · · · · · · · · ·	18	40
Subtotal - amount to be deducted	-	19
Amount from line 20	^=	40,904 20
,		
RRSP/PRPP dollar limit for 2017 = 26,010 Enter the amount form line A or B, whichever is less	.	7,363 21
Total PA from 2016		<u>7,303</u> 21
Maximum RRSP/PRPP deduction in 2017 before PSPA	_	7,363 23
IVIGALIIIUIII NNSF/FNFF UEUUCIIOII III 2017 DEIOIE FSFA	=	1,503 23

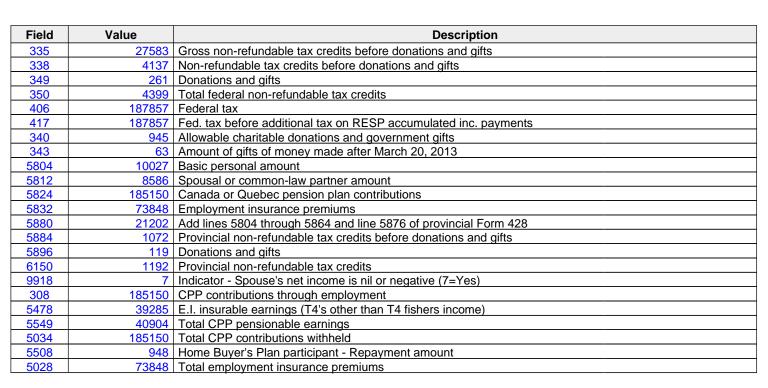
Registered Retirement Savings Plan Schedule (continued)

Table E - Calculation of eligible RRSP/PRPP deduction limit for 2017	
Unused Room for 2016 (table B, line 6)	48,716 1
RRSP/PRPP deduction (excluding transfers) (table C, line 1)	- 2
2017 net PSPA (from RPP administrator's statement)	- 3
Eligible RRSP/PRPP Room	= 48,716 4
Maximum RRSP/PRPP deduction in 2017 based on 2016 earned income (table D, line 23)	+ 7,363 5
Maximum RRSP/PRPP deduction limit for 2017	= 56,079 6
Table G - Calculation of RRSP/PRPP contribution limit 2017 Maximum RRSP/PRPP deduction limit for 2017 (table E, line 6) Undeducted premiums (table F, line 3)	<u>56,079</u> 1
RRSP/PRPP contribution limit for 2017	= <u>56,079</u> 3
Table H - Calculation of repayment of RRSP home buyers plan	
RRSP home buyers plan outstanding amount before the start period	= 948
Required amount to repay for 2016	= 948
Designated repayment	=
Amount to be included in RRSP income on line 129	= 948
RRSP home buyers plan outstanding amount, end of year	=



		Identifi	Callon		
Transmitter Efile Number			Transmitter Efile Password	<password></password>	
Preparer Efile Number			Preparer Efile Password	<password></password>	
Document Control Number			Discounter Registration Number		
Software Code	015G		Software Release Date	2017-03-15	
Express Notice of Assessment	Indicator [0=No, 1=Yes]	0			
·		Taxpaye	er's Data		
Taxpayer's Given Name				nange of Name Indicator [2=Yes]	
Taxpayer's Surname					
		Addres	s Data		
Care of Line					
Street	89-935 Ewen Ave				
City	New Westminster				
Province	BC	Telephone Area	Code 604		
Postal Code	V3M0A1	Telephone Local	Number 2533858		
Same Home/Mailing Address [1=Yes, 2=No] 2	Date of the Move	e		
	Basic Data		Residence	cy Data	
Tax Year		2016	Year End Province of Residence		
Social Insurance Number		738423219	Current Province of Residence		
Date of Birth		1969-03-06	Aboriginal Land Residency Indicator [1	=Yes 2=Nol	
Marital Status		1	Yukon First Nation Settlement Number		
	1-Vecl	1	First Nation Identification Indicator [1=Yes, 2=No]		
1 - 7 - 1			NT Tlicho Community Residency Code		
Date of Entry					
Prior Year Submission [0=No, 1=Yes] Multiple Jurisdictions Indicator [0=No, 1=Yes]			NT Deline Lands Residency Indicator [
Multiple Jurisdictions Indicator	[U=NO, I=YeS]	Elections C	Amended Tax Return Indicator [0=No,	i=resj	
Canadian Citizanahin Indicator	[1-Voc 2-No]	Elections C		or [01_Voc 02_No]	
Canadian Citizenship Indicator	[1=165, 2=N0]	Contac	Elections Canada Authorization Indicat	01 [01=165, 02=110]	
Correspondence Language Co	de [1-English 2-Erench]	1	Alternate Address Authorization Code		
Tax Preparer Authorization Cod			Expiry Date of the Tax Preparer Author	ization Codo	
Pre-Assessment Review Conta			Post-Assessment Review Contact Code		
Taxpayer's Email Address	ici Code		Post-Assessment Review Contact Cod	е	
Taxpayor o Email ridarooc		Decease	ed Data		
Deceased Indicator [1=Yes]			Date of Death		
Subsection 104(13.4) Election	Indicator [0=No, 1=Yes]				
		Spouse	's Data		
Spouse's Given Name (Limited	to 4 characters)	Hong	Spouse's Social Insurance Number 73842		
Spouse's Net Income 0			Spouse's Universal Child Care Benefit Amount		
Spouse's Universal Child Care	Repayment Amount	0			
		Bankrup	tcy Data		
Bankruptcy Indicator [1=Yes]			Post-Bankruptcy Net Income		
			Post-Bankruptcy Adjusted Net Income		
	Select	ted Financial Da	ta Statements (SFDs)		
Number of Selected Financial D	Data Records [Blank if 0]				

Field	Value	Description
266	2	Foreign property with a total cost > than \$100,000 (1=Yes, 2=No)
101	40904	Employment income per T4 slips
129	948	RRSP income
150	41852	Total income (or loss)
260	41852	Taxable income
428	102095	Provincial or territorial tax
435	289952	Total payable
437	536390	Total income tax deducted from information slips
484	246438	Refund
490	2	Prepared by (1=3rd party, 2=Client, or 3=Discounted)
300	11474	Basic personal amount
303	11474	Spouse or common-law partner amount
364	884	Public transit amount
312	73848	Employment insurance premiums
363	1161	Canada employment amount



Summary of carryforward amounts to 2017

Name: **Yingxu Rong** SIN: 738-423-219



Subject	Amount	Reference form
GST	7 mount	Treference form
		CST 270 line 16
GST rebate (excluding portion for eligible CCA)		GST-370 line 16
CNIL		T026 line 16
Expense		T936 line 16
Income RPP		T936 line 19
		DDD cabadula (Area E I 24)
RPP pre-1990 contributions (not a contributor) RPP pre-1990 contributions (contributor)		RPP schedule (Area E I.24) RPP schedule (Area E I.25)
RRSP		REP Scriedule (Alea E 1.25)
	7,363	DDCD ashadula (Tabla D)
Eligible amount	48,716	RRSP schedule (Table D)
Room from previous years	40,710	RRSP schedule (Table E)
PSPA from previous year		RRSP schedule (Table E)
Undeducted premiums Transitional amount		RRSP schedule (Table F)
Transitional amount		RRSP schedule (Table F)
Cost of labour-sponsored funds shares acquired (Jan/Feb 2017) - Federal		Supporting documents
HOME BUYER'S PLAN		DDCD ashadula (Tabla II)
Outstanding amount to repay Number of years left		RRSP schedule (Table H)
		RRSP schedule (Table H)
Amount to repay annually LLP		RRSP schedule (Table H)
		DDCD cabadula (Tabla K)
Outstanding amount to repay		RRSP schedule (Table K)
Number of years left		RRSP schedule (Table K)
Amount to repay annually		RRSP schedule (Table K)
DONATIONS Denotions (see details)		Charitable danations askedule
Donations (see details) TUITION		Charitable donations schedule
		Cahadula 11 lina 25
Tuition and educations amounts Tuition and educations amounts Drawingial		Schedule 11, line 25
Tuition and educations amounts - Provincial		Schedule 11 P, line 21
Interest paid on a student loan (see details) INVESTMENT TAX CREDIT		Supporting documents
		T2038 column 9
ALTERNATIVE MINIMUM TAX		12036 COIUIIII 9
		T691 line 129
Alternative minimum tax FOREIGN BUSINESS TAX CREDIT		1091 IIIIe 129
		Schodula of foreign income
Foreign business tax credit MOVING EXPENSES		Schedule of foreign income
		T1M
Moving expenses		1 1101
PROVINCIAL TAX CREDITS		BC479
Venture capital tax credit		
Equity tax credit		T1285
Logging tax credit		BC428
Community Enterprise Development tax credit		T1256
Small Business Investment tax credit		NB428, YT479

Details	2012	2013	2014	2015	2016
Donations (excluding US Donations)					
US Donations					
Interest paid on a student loan					

QUFile 09 Apr 2017

Employment income summary - 2016

Rong,	Yingxu	SIN: 738 423 219
Rong,	Yingxu	SIN: 738 423 219

Employer Name: YN	ICA OF GREATER VANCOUVER	VER T4	
Province of employment: Br	itish Columbia	STATEME	NT OF REMUNERATION PAID
Employment income - <i>line 101</i> 14 40,904 40	Employee's CPP contributions - line 308	Employee's QPP contributions - <i>line</i> 308	Employee's EI premiums - <i>line 312</i> 18 738 48
RPP contributions - line 207	Income tax deducted - line 437 22 5,363 90	El insurable earnings 24 39,285 32	CPP pensionable earnings 26 40,904 40
QPP pensionable earnings	Board and lodging (included in box 14) 30	Employee's home-relocation loan deduction - Ii	ine 248 Security options deduction 110(1)(d) - line 249
Other taxable allowances and benefit (included in box 14)	Security options deduction 110(1)(d.1) - line 249	Employment commissions - <i>line 102</i>	Canadian Forces personnel & police deduction - line 244
Union dues - line 212	Charitable donations - line 349 46 63 00	Pension adjustment - line 206 52	Provincial parental insurance plan 55
PPIP insurable earnings 56	Eligible retiring allowances <i>line 130</i> 66	Non-eligible retiring allowances line 130	Status Indian employee (included in box 14)
Pre-1990 past service contributions while a contributor	Pre-1990 past service contributions while not a contributor 75	Worker's compensation benefits repaid to the employer - <i>line</i> 229	Emergency services volunteer allowance
Public transit pass - line 364	Employee-paid premiums for private health services plans - line 330	Clergy's housing allowance (included in box 30))