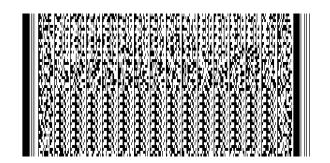


Canada Revenue Agence du revenu du Canada

T1 GENERAL -**Income Tax and Benefit Return CONDENSED 2016**

Step 1 - Identification and other information

·								7
	dentificatio	n			Information	about yοι	j	
Print your First name and initial Ms Xiaoyun Last name Ji Mailing address: Apt No – Stree	name and add			Enter your social insu number (SIN): Enter your date of birt Your language of corr Votre langue de corre	th: respondence:		40-289-376 Year Month 1997-04- English F	1
00 00F France Area								
89-935 Ewen Ave	RR			Is this r If this return is for a d person, enter the date		leceased		th Day
City New Westminster		Prov./Terr.	Postal code V3M 0A1					<u> </u>
understand that by providing a mail. I have read and I accept toguide.		s, I am registerin		Tick the bo	Marital so that applies to December 3° 2 Living co 5 Separate	your marital 1, 2016: ommon-law		
Enter an email address:								
		ır residence		Inform common-law	nation about y partner (if you			
Enter your province or territory or esidence on December 31, 20 °		ish Columbia		Enter his or her SIN:		I		
f your province or territory of rechanged in 2016, enter the date your move:		Year	Month Day	Enter his or her first na	ame:			
s your home address the same your mailing address?		Yes	□ No X	Enter his or her net in to claim certain credits				
Enter the province or territory whom currently reside if it is not the same as your mailing address a	he			Enter the amount of u		re		ı
f you were self-employed in 20 ^o enter the province or territory of self-employment:				of his or her return: Enter the amount of U		ŧ		
f you became or ceased to be n 2016 , enter the date of:	a resident of (Canada for incom	e tax purposes	from line 213 of his or Tick this box if he or s		ployed in 201		1
Month Day		B.4.c.	nth Day	I I lick this how it he or e	the was self-emn		ካ.	



Do not use	172					171				
this area	172					171				
	AB 4 17 1									

Step 1 – Identification and other information (continued)

Residency information for tax administration agreements (For more information, see page 18 in the guide.)	
	2 2
[A	
Elections Canada (For more information, see page 19 in the guide.)	
A) Do you have Canadian citizenship?	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? Yes 1 No Your authorization is valid until you file your next tax return. Your information will only be used for purposes permitted under the Canada Elections Act, which include sharing the information with provincial/territorial election agencies, members of Parliament, registered political parties, and candidates at election time.	_ 2
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.	

Ji, Xiaoyun SIN: 740 289 376 **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
i Otai	

Form 479 **6033**

75.00

UFile

i Otai III	COIIIE								
Employmen	nt income							101	10 107,70
Other incom	ne							130	500,00
Net inco	ome					This is y	your total incom	ie. 150	10 607,70
						This is	your net incom	e. 236	10 607 70
Taxable	income				т	Thin in view	v tovoblo incom	- asa [40.007.70
					ı	riis is you	r taxable incom	ie. 260	10 607,70
Federal	schedule	es							
Schedule 1									
300	11,474.00	308	327.08 ●		190.02 ●	335	13,468.10	338	2,020.22
350	2,020.22	363	1,161.00	364	316.00				
Schedule 6									
381	2	382	2	383	500.00	391	1	392	2
Schedule 8									
5034	406.49	5549	10,107.70						
Provinc	ial and te	rritorial	forms						
Form 428									
5609		5804	10,027.00	5824	327.08 ●	5832	190.02 •	5856	63.60
5880	10,607.70	5884	536.75	6150	536.75				

				Prote	ected B when	
Step 6 – Refund or balance owing						3
Net federal tax: enter the amount from line 64 of Schedule 1				420		
CPP contributions payable on self-employment and other earnings		421	+			
Employment insurance premiums payable on self-employment and other eligible earnings		430	+			
Social benefits repayment (amount from line 235)				422	+	
Provincial or territorial tax		428	<u>+</u>			
Add lines 420, 421, 430, 422, and 428. This	is you	ır total paya	ble.	435	=	
Total income tax deducted	_ 437			•		
Refundable Quebec abatement	_ 440	+		•		
CPP overpayment (enter your excess contributions)	_ 448	+ 79	41	•		
Employment insurance overpayment (enter your excess contributions)	•					
Refundable medical expense supplement (use the federal worksheet)	_ 452		<u> </u>	•		
Working income tax benefit (WITB)		+ 1,194	97	•		
Refund of investment tax credit (attach Form T2038(IND))	_	+		•		
Part XII.2 trust tax credit (box 38 of all T3 slips)	_	+		•		
Employee and partner GST/HST rebate (attach Form GST370)	_ 457	+	-	•		
Children's fitness tax credit Eligible fees 458 x 15% =	459	+		•		
Eligible educator school	_					
supply tax credit Supplies expenses 468 x 15% =	_ 469	+	ֈ	•		
Tax paid by instalments	476			•		
Provincial or territorial credits	_ 479		00			1
Add lines 437 to 479. These are your total credits	482	= 1,349	38_1	>	<u>- 1,3</u>	349 38
Line 435 minus line 482 This is your re	fund c	r balance ow	ing.		= (1,3	349 38)
Generally, we do not charge or refund a di Refund 4841,349 38 • For more information on how to ma		Balance ow	ving			e or go
to <u>cra.gc.ca/payments</u> .	Your p	ayment is due	no la	ater f	than April 3	0, 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 your dir		•			· ·	
To enrol for direct deposit, to update your banking information, or to request that all of your or owed be deposited into the same account as your T1 refund, complete lines 460, 461, ar			may b	e re	eceiving	
By providing my banking information I authorize the Receiver General to deposit in the bar amounts payable to me by the CRA, until otherwise notified by me. I understand that this a previous direct deposit authorizations.	k acco	ount number sl zation will repl	hown ace a	belo	ow any my	
Branch number 460 Institution number 461 Account		er 462			12 digits)	
Branch number 460 Institution number 461 Account (3 digits)	numbe	(I	maxim	um 1	- uigito)	
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 fe	e was charged complete	for p	repa	ring this retu	ırn,
I certify that the information given on this return and in any documents attached is correct and complete and fully discloses all my income. Name Name	If a fe	e was charged complete	for p	repa	ring this retu	ırn,
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. 490 Name Telepl	If a fe of pre none:	e was charged complete parer:	for p	repa	ring this retu	urn,
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 09-04-17 490 Name Name Telephone Tele	If a fe of pre none: numb	e was charged complete parer:	for pi the fo	repar ollow	ring this retu	
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. 490 Name Telepl	If a fe of pre none: numb grams. ed to the vide this	e was charged complete parer: er (if applicable the may also be under the crown. It may also be under the crown and request company the complete th	le): sed for picture in the formula	repar ollow 48 or any nared	string this returning: 89 y purpose relad or verified we interest pays	ated vith able,
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 related proto to the administration or enforcement of the Act such as audit, compliance and the payment of debts ow other federal, provincial/territorial government institutions to the extent authorized by law. Failure to propenalties or other actions. Under the Privacy Act, individuals have the right to access their personal information bank Cl	If a fe of pre none: numb grams. ed to the vide this	e was charged complete parer: er (if applicable the may also be une Crown. It may s information m and request columns J 005.	le): sed for y be sh ay res	repar ollow 48 or any nared	string this returning: 89 y purpose relad or verified we interest pays	ated vith able,
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 related proto the administration or enforcement of the Act such as audit, compliance and the payment of debts ow other federal, provincial/territorial government institutions to the extent authorized by law. Failure to propenalties or other actions. Under the Privacy Act, individuals have the right to access their personal informations.	If a fe of pre none: numb grams. ed to the vide this	e was charged complete parer: er (if applicable the may also be under the crown. It may also be under the crown and request company the complete th	le): sed for y be sh ay res	repar ollow 48 or any nared	string this returning: 89 y purpose relad or verified we interest pays	ated vith able,

5000-RC

(UFile [CRA] 09 Apr 2017

Ji, Xiaoyun SIN: 740 289 376

Employee Overpayment of 2016 Employment Insurance Premiums

Complete this form to calculate any overpayment of employment insurance (EI) premiums paid through **employment**.

To be refunded, the amount of the EI overpayment has to be more than \$1.

If you have **self-employment** and other eligible earnings and have entered into an agreement with the Canada Employment Insurance Commission through Service Canada to participate in the EI program for access to EI special benefits, complete Schedule 13, then complete this form.

Do not complete this form if you were a resident of Quebec on December 31, 2016, and you have to complete Schedule 10.

Calculating your employment insurance overpayment

Total EI insurable earnings (box 24 or, if blank, box 14 of your T4 slips) (read ^(a) below)			10,107 51 1
Total self-employment and other earnings eligible for the EI program for access to EI spe	cial benefits	<u>+</u>	2
Add lines 1 and 2.	(maximum \$50,800)	<u> </u>	10,107 51 3
Total premiums deducted: Residents of other than Quebec (box 18 and box 55 ^(b) of your T4 slips)			
Quebec residents (box 18 of your T4 slips)		ļ	
Total premiums payable: enter the amount from line 10 of Schedule 13	+ 5	5	
Add lines 4 and 5.	= 190 03	•	190 03 6
Line 3 minus \$2,000 (if negative, enter "0")			8,107 51 7
Line 6 minus line 7 (if negative, enter "0")		=	0 00 8
Total premiums deducted: Residents of other than Quebec (box 18 and box 55 ^(b) of your T4 slips)			
Quebec residents (from box 18 of your T4 slips)			190 03 9
Required premium: Residents of other than Quebec (multiply line 1 by 1.88%) Quebec residents (multiply line 1 by 1.52%)	(maximum \$955.04) (maximum \$772.16)	_	190 02 10
Line 9 minus line 10 (if negative, enter "0")		=	0 01 11
Enter the amount from line 8 or line 11, whichever is greater .	Employment insurance overpayment		0 01 12

Enter the amount from line 12 on **line 450** of your return only if it is more than \$1. However, if the amount on line 12 is greater than the amount on line 9, enter instead the amount from line 9 on line 450.

Enter the amount from line 7, 9, or 10, whichever is least, on **line 312** of Schedule 1 and, if it applies, on **line 5832** of Form 428. We may adjust your claim if there is an amount on line 2 and the amount on line 3 is less than \$2,038 (\$2,030 if you were a resident of Quebec).

- (a) If you have **no** self-employment earnings and your total El insurable earnings on your T4 slips are **less than** \$2,000, enter "0". However, if you have self-employment earnings and have entered into an agreement with the Canada Employment Insurance Commission through Service Canada to participate in the El program for access to El special benefits, enter the total El insurable earnings from your T4 slips.
- (b) If you received EI-exempt employment income as stated in box 28 of your T4 slip and there is an amount in box 55 of your T4 slip, do not claim the amount shown in box 55 of that slip on this line. In this case, contact Revenu Québec for a refund of your Provincial parental insurance plan (PPIP) premiums paid. However, if you are an employee who controls more than 40% of the voting shares of a corporation and you have entered into an agreement with the Canada Employment Insurance Commission through Service Canada in 2016 to participate in the EI program for access to EI special benefits, claim the amount shown in box 55 on this line.