



Nunavut Tax

Form NU428
2021

Protected B when completed

Part A – Nunavut tax on taxable income

Enter your **taxable income** from line 26000 of your return.

Use the amount from line 1 to complete the appropriate column below.

	Line 1 is \$46,740 or less	Line 1 is more than \$46,740 but not more than \$93,480	Line 1 is more than \$93,480 but not more than \$151,978	Line 1 is more than \$151,978	
Amount from line 1					1
	– 0 00	– 46,740 00	– 93,480 00	– 151,978 00	2
Line 2 minus line 3 (cannot be negative)	=	=	=	=	3
Line 4 multiplied by the percentage from line 5	x 4%	x 7%	x 9%	x 11.5%	4
	=	=	=	=	5
	+ 0 00	+ 1,869 60	+ 5,141 40	+ 10,406 22	6
Line 6 plus line 7					7
Nunavut tax on taxable income	=	=	=	=	8

Enter the amount from line 8 on line 53 and continue at line 9.

Part B – Nunavut non-refundable tax credits

	Internal use	56140		
Basic personal amount	Claim \$16,467	58040		9
Age amount (if you were born in 1956 or earlier) (use Worksheet NU428)	(maximum \$10,512)	58080	+	10
Spouse or common-law partner amount:				
Base amount		16,467 00		11
Your spouse's or common-law partner's net income from line 23600 of their return		–		12
Line 11 minus line 12 (if negative, enter "0")	58120	=		13
Amount for an eligible dependant:				
Base amount		16,467 00		14
Your eligible dependant's net income from line 23600 of their return		–		15
Line 14 minus line 15 (if negative, enter "0")	58160	=		16
Amount for infirm dependants age 18 or older (use Worksheet NU428)		58200	+	17
Amount for young children less than six years of age (complete the chart on the last page)	Number of children	63710	x \$1,200 =	58230
Add lines 9, 10, 13, and 16 to 18.				19
CPP or QPP contributions:				
Amount from line 30800 of your return	58240			20
Amount from line 31000 of your return	58280	+		21
Employment insurance premiums:				
Amount from line 31200 of your return	58300	+		22
Amount from line 31217 of your return	58305	+		23
Add lines 20 to 23.		=		24
Line 19 plus line 24				25

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[illegible]**Details of amount for young children** (if you need more space, attach an additional page)

Child's name	Relationship to you	Date of birth (Year Month Day)			Social insurance number (if available)

See the privacy notice on your return.