

Canada Revenue
AgencyAgence du revenu
du Canada**Income Tax and Benefit Return****T1 GENERAL –
CONDENSED 2015**

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

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Identification

Print your name and address below.

First name and initial

Last name

Mailing address: Apt No – Street No Street name

PO Box

RR

City

Prov./Terr.

Postal code

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

Enter an email address:

Information about your residenceEnter your province or territory of
residence on **December 31, 2015**:If your province or territory of
residence changed in 2015, enter the
date of your move:

Year Month Day

Is your home address the same as
your mailing address?Yes ☐ No ☐Enter the province or territory where
you **currently** reside if it is not the
same as your mailing address above:If you were self-employed in 2015,
enter the province or territory of
self-employment:If you **became** or **ceased** to be a **resident of Canada** for income tax purposes
in 2015, enter the date of:

entry Month Day or departure Month Day

Information about youEnter your social insurance
number (SIN):

Year Month Day

Enter your date of birth:

Your language of correspondence:

English

Français

Votre langue de correspondance :

☐☐**Is this return for a deceased person?**If this **return** is for a **deceased**
person, enter the date of death:

Year Month Day

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

- 1 ☐ Married 2 ☐ Living common-law 3 ☐ Widowed
4 ☐ Divorced 5 ☐ Separated 6 ☐ Single

**Information about your spouse or
common-law partner (if you ticked box 1 or 2 above)**

Enter his or her SIN:

Enter his or her first name:

Enter his or her net income for 2015
to claim certain credits:Enter the amount of universal child care
benefit (UCCB) from line 117
of his or her return:Enter the amount of UCCB repayment
from line 213 of his or her return:

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

1 ☐

Do not use this area

Do not use
this area

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Residency information for tax administration agreements

For more information, see Information Sheet T1-NT12(E), *Residency information for tax administration agreements*, included in this tax package.

Did you reside in a **Tłıchq community** or on **Tłıchq lands** on December 31, 2015? Yes ☐ 1 No ☐ 2

If **yes**, tick the applicable box below to identify where you resided.

1 ☐ Behchokq (Rae-Edzo) 2 ☐ Whatı (Lac La Martre) 3 ☐ Gametı (Rae Lakes) 4 ☐ Wekweetı (Snare Lake) 5 ☐ Tłıchq lands



Elections Canada (see the Elections Canada page in the tax guide for details or visit www.elections.ca)

A) Are you a Canadian citizen? Yes ☐ 1 No ☐ 2

Answer the following question **only if you are a Canadian citizen**.

B) As a Canadian citizen, do you authorize the Canada Revenue Agency to give your name, address, date of birth, and citizenship to Elections Canada to update the National Register of Electors? Yes ☐ 1 No ☐ 2

Your authorization is valid until you file your next return. Your information will only be used for purposes permitted under the *Canada Elections Act*, which include sharing the information with provincial/territorial election agencies, members of Parliament, and registered political parties, as well as candidates at election time.

Please answer the following question:

Did you own or hold specified foreign property where the total cost amount of all such property, at any time in 2015, was more than CAN\$100,000?

See "Specified foreign property" in the guide for more information. **266** Yes ☐ 1 No ☐ 2

If **yes**, complete Form T1135 and attach it to your return.

If you had dealings with a non-resident trust or corporation in 2015, see "Foreign income" in the guide.

Refund or balance owing

Protected B when completed **3**

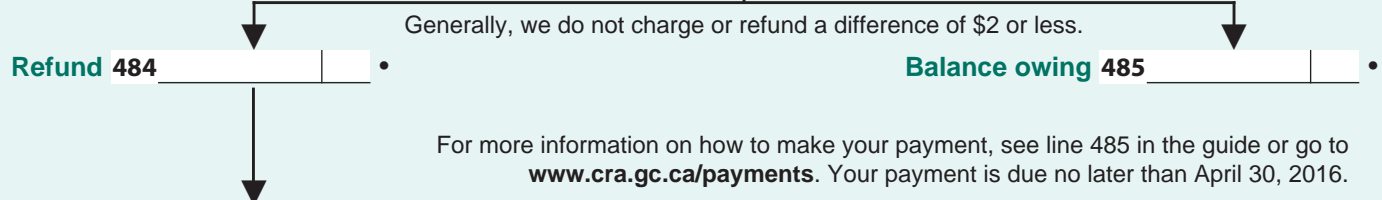
Net federal tax: enter the amount from line 64 of Schedule 1	420		
CPP contributions payable on self-employment and other earnings	421 +		
Employment insurance premiums payable on self-employment and other eligible earnings	430 +		
Social benefits repayment (amount from line 235)	422 +		
Provincial or territorial tax	428 +		
Add lines 420, 421, 430, 422, and 428.	This is your total payable . 435 =		

Total income tax deducted	437			•
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 +			•
Refund of investment tax credit (attach Form T2038(IND))	454 +			•
Part XII.2 trust tax credit (box 38 of all T3 slips)	456 +			•
Employee and partner GST/HST rebate (attach Form GST370)	457 +			•
Children's fitness tax credit	Eligible fees 458	× 15% =	459 +	•
Tax paid by instalments	476 +			•
Provincial or territorial credits	479 +			•
Add lines 437 to 479.	These are your total credits . 482 =			▶

Line 435 minus line 482 This is your **refund or balance owing**. =

If the result is negative, you have a **refund**. If the result is positive, you have a **balance owing**.

Enter the amount below on whichever line applies.



Direct deposit – Enrol or update (see line 484 in the guide)

You do not have to complete this area every year. Do not complete it this year if your direct deposit information has not changed.

To enrol for direct deposit, to update your banking information, or to request that all of your CRA payments you may be receiving or owed be deposited into the same account as your T1 refund, complete lines 460, 461, and 462 below.

By providing my banking information I **authorize** the Receiver General to deposit in the bank account number shown below **any amounts payable** to me by the CRA, until otherwise notified by me. I understand that this authorization will replace all of my previous direct deposit authorizations.

Branch number **460** (5 digits) Institution number **461** (3 digits) Account number **462** (maximum 12 digits)

I certify that the information given on this return and in any documents attached is correct and complete and fully discloses all my income.

Sign here _____
It is a serious offence to make a false return.

Telephone _____ Date _____

490 If a fee was charged for preparing this return, complete the following:

Name of preparer: _____
Telephone: _____
EFILE number (if applicable): **489** _____

Personal information is collected under the *Income Tax Act* to administer tax, benefits, and related programs. It may also be used for any purpose related to the administration or enforcement of the Act such as audit, compliance and the payment of debts owed to the Crown. It may be shared or verified with other federal, provincial/territorial government institutions to the extent authorized by law. Failure to provide this information may result in interest payable, penalties or other actions. Under the *Privacy Act*, individuals have the right to access their personal information and request correction if there are errors or omissions. Refer to Info Source www.cra.gc.ca/gncy/tp/nfsrc/nfsrc-eng.html, personal information bank CRA PPU 005.

Do not use this area **487** **488** • **486**