ON<sub>7</sub>

Français

Canada Revenue

Identification

First name and initial

**Barry L** 

Agence du revenu du Canada

### **T1 GENERAL 2013**

### **Income Tax and Benefit Return**

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

Print your name and address below.

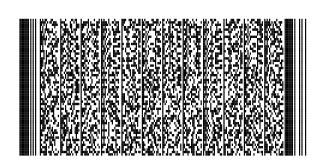
	Information	ab	ou	t yo	ou				
)	Enter your social insurance number (SIN):	3	2	1	6	0	9	2	9
			Y	ear		М	onth	1	Day
	Enter your date of birth:	1	9	4	6	1	0	0	<b>∣</b> 6
	Your language of correspondence: Votre langue de correspondance :			Er	nglis ✓	sh		Fr	ança
	Is this return for a d	ec	eas	sed	lрe	ers	onʻ	?	

Last name	
Friedman	
Mailing address: Apt. No Stre	eet No. Street name
480 Tweedsmuir Ave	
PO Box	RR
City	Prov./Terr. Postal code
Ottawa	O N   K 1 Z 5 N 9

Is this return for a de	ceased	person?	
If this return is for a deceased person, enter the date of death:	Year	Mont	h Day
Marital s Tick the box that applies to your marita		ecember 31,	2013:
1 Married 2 Living con 4 Divorced 5 Separated		3 Widd	owed Ile
Information about y	our spo	ouse or	ahove)

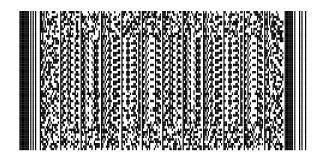
Information abo	out your residence
Enter your province or territory of residence on <b>December 31, 2013</b> :	Ontario
Enter the province or territory where y it is not the same as that shown above for your mailing address:	ou <b>currently</b> reside if
Sen-employment.	Ontario lent of Canada for income tax purposes
in 2013, enter the date of: Month Day entry	Month Day

4 Divorced 5	Separated 6 Single				
Informatio common-law pa	n about your s rtner (if you ticke	pous ed box	<b>e or</b> 1 or 2 ab	ove)	
Enter his or her SIN:	2   3   0				
Enter his or her first name	e: <b>Deborah</b>				
Enter his or her net incon certain credits:	ne for 2013 to claim		20,868	8 66	
Enter the amount of Univ on line 117 of his or her retu		nefit inc	luded		
Enter the amount of University included on line 213 of hi		nefit repa	ayment		
Check this box if he or sh	ne was self-employed	d in 201	3:	1 🗸	
Do not use this area					



Do not 172			171		
use this area			171		

Elections Canada (see the Elections Canada page in the tax guide for details or visit www.elections.ca)  A) Are you a Canadian citizen?	No 2
Answer the following question <b>only if you are a Canadian citizen.</b> 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 <i>Canada Elections Act</i> , which include sharing the information with provincial/territorial election agencies, members of Parliament, and registered political parties, as well as candidates at election time.	
Goods and services tax/harmonized sales tax (GST/HST) credit application	
See the guide for details.	
Are you applying for the GST/HST credit or the Ontario Sales Tax Credit? Yes ✓ 1	No2
Please answer the following question	
Please answer the following question  Did you own or hold foreign property at any time in 2013 with a total cost of more than CAN\$100,000? (read the "Foreign income" section in the guide for details) 266 Yes 1 No ✓2  If yes, attach a completed Form T1135.	





Attach your Schedule 1 (federal tax), and Form 428 (provincial or territorial tax) here. Also attach here any other schedules, information slips, forms, receipts, and documents that you need to include with your return.

Your guide contains valuable information to help you complete your return.

When you come to a line on the return that applies to you, look up the line number in the guide for more information.

As a Canadian resident, you have to report your income from all sources both inside and outside Canada.

Employment income (box 1	14 on all T4 slips)			101		
				-'*' —		l
	line 101 (box 42 on all T4 slips)	102				
Wage loss replacement cor	ntributions	400	1			
(see line 101 in the guide)		103		404 .		ı
Other employment income				_104 <u>+ _</u> 113 +	6,579	06
CPP or QPP benefits (box	(box 18 on the T4A(OAS) slip)					_
Disability benefits included				_114 <u>+</u>	8,669	10
(box 16 on the T4A(P) slip)		152				
Other pensions or superan		132		115 +		1
Elected split-pension amou				116+		
Universal Child Care Benef						
Oniversal Child Care Belle	iit (OCCB)			_117 <u>+</u>		
UCCB amount designated	to a dependant	105	1			
	d other benefits (box 14 on the T	185	I	119 +		ı
	ds (eligible and other than eligib		vahle	_119 <u>+</u> _		
	e the guide and attach Schedule	•	xable	120 +	15,000	nn
	ds other than eligible dividends,	7 7)		120	13,000	00
	taxable Canadian corporations	180	15,000 00			
	ent income (attach Schedule 4)	100	13,000   00	121 +		
interest and other investme	sit income (attach Schedule 4)			- 121 -		
Net partnership income: lin	nited or non-active partners only	•		122+		
Registered disability saving	gs plan income (from all T4A info	ormation sl	lips)	125 <u>+</u>		
		1				
Rental income	Gross 160 6,000	0 00	Ne	126 <u>+</u>	-1,851	50
Taxable capital gains (attac	ch Schedule 3)			_127 <u>+</u>		
0	J Tatal 450	1	Tavabla anason	400 .		
Support payments received			Taxable amoun			
RRSP income (from all T4F	. ,			129 +		
	ecify:			_130 <u>+</u>		
	see lines 135 to 143 in the guide	1	No	125 .		
Business income	Gross 162 Gross 164			135 +		
Drofossional income	(31088 104			137 <u>+                                    </u>		
Professional income				. 139 +		
Commission income	Gross 166					
Commission income Farming income	Gross 166 Gross 168		Ne	141 +		
Commission income	Gross 166		Ne			
Commission income Farming income Fishing income	Gross 168 Gross 170	) 144	Ne	141 +		
Commission income Farming income Fishing income  Workers' compensation be	Gross 166 Gross 168 Gross 170 enefits (box 10 on the T5007 slip		Ne	141 +		
Commission income Farming income Fishing income	Gross 166 Gross 168 Gross 170 enefits (box 10 on the T5007 slip	) 144 145 +	Ne	141 +		
Commission income Farming income Fishing income  Workers' compensation be Social assistance payment	Gross 166 Gross 168 Gross 170 Interfits (box 10 on the T5007 slip	145 +	Ne	141 +		
Commission income Farming income Fishing income  Workers' compensation be Social assistance payment	Gross 166 Gross 168 Gross 170 enefits (box 10 on the T5007 slip		Ne	141 +		<u> </u>
Commission income Farming income Fishing income  Workers' compensation be Social assistance payment  Net federal supplements (b	Gross 166 Gross 168 Gross 170 Interfits (box 10 on the T5007 slip	145 +	Ne Ne	141 +		

This is your total income.150=





Attach your Schedule 1 (federal tax), and Form 428 (provincial or territorial tax) here. Also attach here any other schedules, information slips, forms, receipts, and documents that you need to include with your return.

### **Net income**

Enter your <b>total income</b> from line 150		150	28,396 72
Pension adjustment			_
(box 52 on all T4 slips and box 34 on all T4A slips) 206			
	ı		
Registered pension plan deduction (box 20 on all T4 slips and box 32 on all T4A slips)		_	
RRSP deduction (see Schedule 7; attach receipts)	208 +	_	
PRPP employer contributions			
(amount from your PRPP contribution receipts) 205			
Deduction for elected split-pension amount ( attach Form T1032)	210_+		
Annual union, professional, or like dues (box 44 on all T4 slips and receipts)	212+		
		_	
Universal Child Care Benefit repayment (box 12 on all RC62 slips)	213 +	_	
Child care expenses (attach Form T778)	214+	_	
Disability supports deduction	215_+	_	
Business investment loss Gross 228 Allowable deduction	on 217+		
Moving expenses	219+		
		_	
Support payments made Total 230 Allowable deduction	on <b>220</b> +		
Carrying charges and interest expenses (attach Schedule 4)	221+		
Deduction for CPP or QPP contributions on self-employment and other earnings		_	
(attach Schedule 8)	222 +	_ •	
Exploration and development expenses (attach Form T1229)	224+		
Other employment expenses	229 +		
Clergy residence deduction	231_+		
Other deductions Specify:	232+		
Add lines 207 to 224, 229, 231, and 23.		_▶	
Line 150 minus line 233 (if negative, enter "0"). This is your <b>net incom</b>	e before adjustments	234=	28,396 72
Use the federal worksheet to calculate your repayment.			
Line 234 minus line 235 (if negative, enter "0")		235	•
If you have a spouse or common-law partner, see Line 236 in the guide.	nis is your <b>net income</b>	236=	28,396 72
Taxable income			

### i axable income

Canadian Forces personnel a	nd police deduction (box 43 on all T4 slips)	244		
Employee home relocation loa	an deduction (box 37 on all T4 slips)	248+		
Security options deductions		249+		
Other payments deduction (if you	u reported income on line 147, see line 250 in the guide)	250 <u>+</u>		
Limited partnership losses of	other years	251 +		
Non-capital losses of other ye	ears	252+		
Net capital losses of other year	ars	253+		
Capital gains deduction		254+		
Northern residents deductions	s (attach Form T2222)	255+		
Additional deductions	Specify:	256+		
	Add lines 244 to 2	256. 257=	▶ -	
	Line 236 minus line	257 (if negative,	enter "0")	
	This	is your taxable	income 260=	28,396 72

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

### Refund or Balance owing

Net federal tay, autor the amount from line CE of Cohedule 1		420	1	
Net federal tax: enter the amount from line 65 of Schedule 1 CPP contributions payable on self-employment and other earning	0	420 421+	$\longrightarrow$	
Employment Insurance premiums payable on self-employment and		430 +		
Social benefits repayment (enter the amount from line 235)	Carlot Chighere Carrinings	422+		
Provincial or territorial tax		428+	300	00
Add lines 420, 421, 430, 422, and 428.	This is your <b>total payab</b>		300	
Total income tax deducted (from all information slips)	437	_ <b>`</b>		
Refundable Quebec abatement  CPP overpayment (enter your excess contributions)	440 + 448 +	$-\dot{ullet}$		
Employment Insurance overpayment (enter your excess contribut		•		
Refundable medical expense supplement (use the federal workshee		•		
Working income tax benefit	453 +			
Refund of investment tax credit (attach Form T2038(IND))	454+	•		
Part XII.2 trust tax credit (box 38 on all T3 slips)	456+	•		
Employee and partner GST/HST rebate (attach Form GST370)	457 <u>+</u>	•		
Tax paid by instalments	476+	•		
Provincial or territorial credits	479 <u>+</u>	•		
_	Add lines 437 to 479			
These are	e your <b>total credits.</b> 482 =	•		
Line 435 minus line 482	This is your <b>refund</b> or <b>balance owin</b>	ng =	300	00
	*			
If the result is negative, yo	ou have a <b>refund.</b> If the result is positive, you Enter the amount below			
			_	
	not charge or refund a difference of \$2 or les		<b>*</b>	
Refund 484	Balance owing(see line 485 in the guid	le) 483	300	00
	Amount enclose	ed 486		•
Attach to nage 1 a chaque or	money order payable to the Receiver Gener		navme	nt
	.gc.ca/mypayment). Your payment is due n			
Direct deposit – Start or change (see line 484 in the guide				
You do not have to complete this area every year. Do not complete this area every year.	•	on has not chan	han	
			_	
Income tax refund, GST/HST credit and CCTB and any related pany other deemed overpayment of tax, and UCCB. To start direct and 462 below.				
By providing my banking information I authorize the Receiver Gene	eral to deposit in the bank account number sl	hown below <b>anv</b>		
amounts payable to me by the CRA, until otherwise notified by me				
direct deposit authorizations.				
Branch Institution number number Account number				
460 461 462				
(5 digits) (3 digits) (maximum 12 digits)				
N=				
Ontario Opportunities Fund	Amount from line 484 above			1
	Your donation to the Ontario Opportuniti	es		
You can help reduce Ontario's debt by completing this area to donate some or all of your 2013 refund to the Ontario	Fund	465		•2
Opportunities Fund. Please see the provincial pages for details.	Net refund (line 1 minus line 2)	466 =		• 3
Trestantial and the provincial pages for details.				
I certify that the information given on this return and in any docur	ments 490 If a fee was charged for	r nrenaring this	return	
attached is correct, complete, and fully discloses all my income.	complete th		. oturri,	
Sign here	Name of preparer:			
It is a serious offence to make a false return.	Telephone: ( ) -			
Telephone ( 613 ) 725 - 3198 Date	. ,	489		
Do not use				•
this area 487 488				T

Schedule 1

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

Basic personal amount			claim \$	11,038	300	11,038	00
Age amount (if you were born in 1948 or earlier) (use the federal wo	rksheet)		(maximum \$	6,854)	301 +	6,854	00
Spouse or common-law partner amount ( attach Schedule 5)	,			, ,	303 +	0,004	
Amount for an eligible dependant ( attach Schedule 5)					305 +		
Amount for children born in 1996 or later					300		
Number of children for whom you are not claiming				1			
the family caregiver amount 366 1	× \$2,234	=	2,234	00 5			
Number of children for whom you are claiming			_,				
the family caregiver amount 352	<b>×</b> \$4,274	<u> </u>	_	6			
Add lines 5 and 6.		=	2,234	00	367 +	2,234	00
Amount for infirm dependants age 18 or older ( attach Schedule 5)					<b>306</b> +		
CPP or QPP contributions:							
through employment from box 16 and box 17 of all T4 slips (attach Form RC381, if applicable)					308 <sub>+</sub>		
on self-employment and other earnings ( attach Schedule 8 or Fo	rm RC381, w	hichever	applies)		310 +		
Employment insurance premiums: through employment from box 18 and box 55 of all T4 slips			(maximum \$	891.12)	312 +		
on self-employment and other eligible earnings ( attach Schedule	e 13)				317 +		
Volunteer firefighters' amount					362 +		<u> </u>
Canada employment amount					,		
(If you reported employment income on line 101 or line 104, see line	363 in the gr	uide.) <b>(m</b>	aximum \$1,1	17)	363 +		
Public transit amount	<u>_</u>		-		364 +		
Children's fitness amount					365 +		
Children's arts amount					370 +		
Home buyers' amount					369 +		
Adoption expenses					313 +		
Pension income amount (use the federal worksheet)			(maximum	\$2,000)	314 +		
Caregiver amount ( attach Schedule 5)			•		315 +		
Disability amount (for self)							
(claim \$7,697 or, if you were under 18 years of age, use the federal	worksheet)				316 <sub>+</sub>		
Disability amount transferred from a dependant (use the federal wor	ksheet)				318 +		
Interest paid on your student loans					<b>319</b> +		
Your tuition, education, and textbook amounts ( attach Schedule 11	)				<del>323</del> +		
Tuition, education, and textbook amounts transferred from a child					<del>324</del> +		
Amounts transferred from your spouse or common-law partner ( atta	ch Schedule	: 2)			<del>326</del> +	-	
Medical expenses for self, spouse or common-law partner, and y	our	-			•		
dependent children born in 1996 or later		330		2	0		
Finter #2 4F2 an 20/ of line 220 of view mature, which are in least			0=4		_		
Enter \$2,152 or 3% of line 236 of your return, whichever is less.		_ =	851	90 2	9		
Line 28 minus line 29 (if negative, enter "0")		_ =		<u></u> — ³	U		
Allowable amount of medical expenses for other dependants (do the calculation at line 331 in the guide)		224 .		3	4		
Add lines 30 and 31.		331 +					ı
		_ =			332 +	00 100	00
Add lines 1 to 4, 7 to 27, and line 32.  Federal non-refundable tax credit rate					335 =	20,126	
Hederal non-refundable tax credit rate  Multiply line 33 by line 34.					220	15	
Donations and gifts ( attach Schedule 9)					338 =	3,018	30
					349 +		<del>                                     </del>
Add lines 35 and 36. Enter this amount on line 49 on the next page.	T_4_1 &1 1				0.50		
Liner this amount on line 49 on the flext page.	Total federal	non-reft	indable tax (	realts	<u> 350</u> =	3,018	90

Step 2 – Federal tax on taxable income

Complete the appropriate column	ur <b>taxable income</b> from line 260 of your return. e the appropriate column  Line 38 is			Lin	e 38 is mo	rΔ	Lie	ne 38 is mo	nre		28,396 ine 38 is m	_	_ 3
depending on the amount on line 38.								than <b>\$87,123</b> but			than \$135,054		
acpointing on the amount on the co.	Ψ+0,001 Of 1000				t more tha			not more than			+ 100,0	• •	
					\$87,123			\$135,054					
Enter the amount from line 38.		28,396	72										3
	_			_	43,561	00	_	87,123	00	_	135,054	00	4
Line 39 minus line 40 (cannot be negative)	=	28,396	72	=			=			=			_ 4
	×	15		×	22	%	×	26	%	×	29	9%	_ 4
Multiply line 41 by line 42.	=	4,259	51	=			=			=			_ 4
	<u>+</u>		<u></u>	<u>+</u>	6,534	00	<u>+</u>	16,118	00	<u>+</u>	28,580	00	_ 4
			l l										١.
Add lines 43 and 44.	. 💷	4,259		=			=			<u> </u>	<u> </u>		_ 4
	Go	to Step 3	i.	G	o to Step 3		(	So to Step 3	<b>3.</b>		Go to Step	3.	
0. 0 11.6													
Step 3 – Net federal tax										40			
Enter the amount from line 45. Federal tax on split income (from line 5 of Fo	rm T120	16)				1	494 .	4,259	51	46 •47			
Add lines 46 and 47.	1111 1 120						<b>424</b> + 404 =	4.050		•41	4.050		4
Add lifles 40 and 47.							+04 =	4,259	51		4,259	51	_ <b>4</b>
Enter your total federal non-refundable tax cr	rodite								ı				
from line 37 on the previous page.	euits						350	0.040		49			
Federal dividend tax credit							4 <b>25</b> +	3,018	-	•50			
Overseas employment tax credit(attach Fo	rm T626	3)					426 <b>+</b>	2,000	00	51			
Minimum tax carryover ( attach Form T691)	1020	· )					427 +			•52			
Add lines 49 to 52.							=	5,018	00	. 02	5,018	مما	5
7144 11166 16 16 62.								3,010	90	_	3,010	90	-
Line 48 minus line 53 (if negative, enter "0")							Bas	sic federal	tax	429 <b>=</b>			5
													-
Federal foreign tax credit ( attach Form T220	09)									405 <b>—</b>			5
													-
Line 54 minus line 55 (if negative, enter "0")								Federal	tax	406 =			_ 5
													_
Total federal political contributions				_									
( attach receipts)			409				57						
Federal political contribution tax credit				<b>/</b>									
(use the federal worksheet)	ID.			(ma	ximum \$6	-	410			• 58			
Investment tax credit ( attach Form T2038(IN	((טא						412 +			• 59			
Labour-sponsored funds tax credit	-		1			1	-						
Net cost 41	3			Al	llowable cr					•60		1	
Add lines 58, 59, and 60.							416 <u>=</u>						_ 6
Line 56 minus line 61 (if negative, enter "0") If you have an amount on line 47 above, see	Form T	1206.								417 =			6
Working income tax benefit advance paymer	nts recei	ved											_
(box 10 of the RC210 slip)										415 <sub>+</sub>			•6
													-
										418 +			6
Special taxes (see line 418 in the guide)										7 IO <b>7</b>			
Special taxes (see line 418 in the guide) Add lines 62, 63, and 64.								let federal					7

Name: Barry L Friedman SIN: 232 160 929

T1-2013

### **Statement of Investment Income**

Protected B when completed Schedule 4

State the names of the payers below and attach any information slips you received.

Attach a separate sheet of paper if you need more space. Attach a copy of this schedule to your return.

Taxable amount of dividends other than eligible dividends (specify): From T slips				15,000	00
Ç			+		
			+		
Add line	es 1 to 3 and enter this amount on line 180 of your return	n. 180	) =	15,000	00
Taxable amount of eligible dividends (specify):	From information slips		+		
_			+		
			+		
	Total dividends (enter on line 120 of your return	<u>n)</u> 120	)=	15,000	00
Specify: From informations slips	e 121 in the guide)		+		
- Interest and other investment income (see line Specify: From informations slips	e 121 in the guide)				
·	e 121 in the guide)		+++++		
·	e 121 in the guide)	<u> </u>	+++++		
·	e 121 in the guide)		+++++++++++++++++++++++++++++++++++++++		
Specify: From informations slips  Income from foreign sources	e 121 in the guide)  other investment income (enter on line 121 of your return	   1)121	+ + + +		
Specify: From informations slips  Income from foreign sources	other investment income (enter on line 121 of your return	  <u></u> <u></u> 121	+ + + +		
Income from foreign sources   Total interest and colored	other investment income (enter on line 121 of your return	<u></u> <u></u> <u>n)</u> 121	+ + + +		

5000-S4



### **Ontario Tax**

**ON428** 

T1 General - 2013

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

### Step 1 – Ontario non-refundable tax credits

			For internal use of	only <b>5605</b>			
Basic personal amount			claim \$9,	574 <u>5804</u>		9,574	00
Age amount (if harn in 1049 or earlier). (use provincial worksh	acot)		(maximum \$4.6	74) 5000	l .	4 674	00
Age amount (if born in 1948 or earlier) (use provincial worksh	ieet)		(maximum \$4,6	74) 5606	+	4,674	00
Spouse or common-law partner amount	8,942	00					
Base amount  Minus: his or her net incomefrom page 1 of your return							
	_ 20,868			5040	l		
Result: (if negative, enter "0")	=	(1	maximum \$8,129)	5812			<u> </u>
Amount for an eligible dependant	0.040	00					
Base amount  Minus: his or her net income from line 236 of his or her return	8,942	00					
					l		
Result: (if negative, enter "0")	=	(1	maximum \$8,129)	5816	+		├─
A many wat for infirms along and pate and 40 an alder. (you province	al warkahaat)			5000	1 _		
Amount for infirm dependants age 18 or older (use provincial CPP and QPP contributions:	ii worksneet)			5820	+		$\vdash$
(amount from line 308 of your federal Schedule 1)				5004	١.		
				5824			<del></del>
(amount from line 310 of your federal Schedule 1)				5828	+		$\vdash$
Employment insurance premiums:				E000	١.		
(amount from line 312 of your federal Schedule 1)				5832			<del>                                     </del>
(amount from line 317 of your federal Schedule 1)				5829			<del>                                     </del>
Adoption expenses				5833			├─
Pension income amount			(maximum \$1,3				├
Caregiver amount (use provincial worksheet)				5840	+		<u> </u>
Disability amount (for self) (Claim \$7,735 or, if you were under 18 years of age, use the provin	oial workshoot )				l		
(claim \$1,1.00 cl, ii you nolo anaoi 10 youlo cl age, acc alo pionii				5844			-
					I		
Disability amount transferred from a dependant (use province				5848			<u> </u>
Interest paid on your student loans (amount from line 319 of y		e 1)		5852			<u> </u>
Your tuition and education amounts [attach Schedule ON(S1	1)]			5856			<u> </u>
Tuition and education amounts transferred from a child				FOCO	+		1
Amounts transferred from your spouse or common-law partr	nor F <b>attach</b> Schod			5860			ļ
	HEL Lattach Sched	ule ON(S2)]		5864	+		
Medical expenses:	Her Lattach Sched				+		
(Read line 5868 in the forms book.)	Hel [ attach Sched	ule ON(S2)]	<b>1</b>		+		
(Read line 5868 in the forms book.)  Enter \$2,167 or 3% of line 236 of your return,	Her [attach other		1	5864	+		
(Read line 5868 in the forms book.)  Enter \$2,167 or 3% of line 236 of your return, whichever is less.	Her (attach ochec		_ 851	5864 19	+		
(Read line 5868 in the forms book.)  Enter \$2,167 or 3% of line 236 of your return,	ner (attach ochec			5864 19	+		
(Read line 5868 in the forms book.)  Enter \$2,167 or 3% of line 236 of your return, whichever is less.  Line 19 minus line 20 (if negative, enter "0")			- 851	5864 19 90 20	+		
(Read line 5868 in the forms book.)  Enter \$2,167 or 3% of line 236 of your return, whichever is less.  Line 19 minus line 20 (if negative, enter "0")  Allowable amount of medical expenses for other dependants		5868	<u>-</u> 851	5864 19 90 20	+		
(Read line 5868 in the forms book.)  Enter \$2,167 or 3% of line 236 of your return, whichever is less.  Line 19 minus line 20 (if negative, enter "0")  Allowable amount of medical expenses for other dependant (use provincial worksheet)		5868	- 851 = +	5864 19 90 20 21	+		
(Read line 5868 in the forms book.)  Enter \$2,167 or 3% of line 236 of your return, whichever is less.  Line 19 minus line 20 (if negative, enter "0")  Allowable amount of medical expenses for other dependant (use provincial worksheet)  Add lines 21 and 22.		5868	- 851 = +	5864 19 90 20 21 22	+	14.248	00
(Read line 5868 in the forms book.)  Enter \$2,167 or 3% of line 236 of your return, whichever is less.  Line 19 minus line 20 (if negative, enter "0")  Allowable amount of medical expenses for other dependant (use provincial worksheet)  Add lines 21 and 22.  Add lines 1 to 18, and line 23.		5868	- 851 = +	5864 19 90 20 21	+	14,248	•
(Read line 5868 in the forms book.)  Enter \$2,167 or 3% of line 236 of your return, whichever is less.  Line 19 minus line 20 (if negative, enter "0")  Allowable amount of medical expenses for other dependant (use provincial worksheet)  Add lines 21 and 22.  Add lines 1 to 18, and line 23.  Ontario non-refundable tax credit rate		5868	- 851 = +	5864 19 90 20 21 22 5880	+ = X	5.0	5%
(Read line 5868 in the forms book.)  Enter \$2,167 or 3% of line 236 of your return, whichever is less.  Line 19 minus line 20 (if negative, enter "0")  Allowable amount of medical expenses for other dependants (use provincial worksheet)  Add lines 21 and 22.  Add lines 1 to 18, and line 23.  Ontario non-refundable tax credit rate  Multiply line 24 by line 25.		5868	- 851 = +	5864 19 90 20 21 22	+ = X		5%
(Read line 5868 in the forms book.)  Enter \$2,167 or 3% of line 236 of your return, whichever is less.  Line 19 minus line 20 (if negative, enter "0")  Allowable amount of medical expenses for other dependants (use provincial worksheet)  Add lines 21 and 22.  Add lines 1 to 18, and line 23.  Ontario non-refundable tax credit rate  Multiply line 24 by line 25.	S	5868 5872 5876	- 851 = +	5864 19 90 20 21 22 5880	+ = X	5.0	5%
(Read line 5868 in the forms book.)  Enter \$2,167 or 3% of line 236 of your return, whichever is less.  Line 19 minus line 20 (if negative, enter "0")  Allowable amount of medical expenses for other dependant (use provincial worksheet)  Add lines 21 and 22.  Add lines 1 to 18, and line 23.  Ontario non-refundable tax credit rate  Multiply line 24 by line 25.  Donations and gifts:  Amount from line 345 of your federal Schedule 9	s x 5.05	5868 5872 5876	- 851 = + =	5864 19 90 20 21 22 5880 5884	+ = X	5.0	5%
(Read line 5868 in the forms book.)  Enter \$2,167 or 3% of line 236 of your return, whichever is less.  Line 19 minus line 20 (if negative, enter "0")  Allowable amount of medical expenses for other dependant (use provincial worksheet)  Add lines 21 and 22.  Add lines 1 to 18, and line 23.  Ontario non-refundable tax credit rate  Multiply line 24 by line 25.  Donations and gifts:  Amount from line 345 of your federal Schedule 9  Amount from line 347 of your federal Schedule 9	S	5868 5872 5876 5% =	- 851 = + =	5864 19 90 20 21 22 5880	+ = X =	5.0	5%
(Read line 5868 in the forms book.)  Enter \$2,167 or 3% of line 236 of your return, whichever is less.  Line 19 minus line 20 (if negative, enter "0")  Allowable amount of medical expenses for other dependants (use provincial worksheet)  Add lines 21 and 22.  Add lines 1 to 18, and line 23.  Ontario non-refundable tax credit rate  Multiply line 24 by line 25.  Donations and gifts:  Amount from line 345 of your federal Schedule 9  Add lines 27 and 28.	s x 5.05	5868 5872 5876	- 851 = + =	5864 19 90 20 21 22 5880 5884	+ = X	5.0	5%
(Read line 5868 in the forms book.)  Enter \$2,167 or 3% of line 236 of your return, whichever is less.  Line 19 minus line 20 (if negative, enter "0")  Allowable amount of medical expenses for other dependant (use provincial worksheet)  Add lines 21 and 22.  Add lines 1 to 18, and line 23.  Ontario non-refundable tax credit rate  Multiply line 24 by line 25.  Donations and gifts:  Amount from line 345 of your federal Schedule 9	x 5.05 x 11.16	5868 5872 5876 5876 5% = 5896	- 851 = + =	5864 19 90 20 21 22 5880 5884 27 28	+ = x =	5.0	52

1,394 52

39 51

39 51

Step 2 - Ontario tax on taxable income
Enter your <b>taxable income</b> from line 260 of your return.

If this amount is more than \$20,000, you <b>must</b> complete <b>Step 6 – Ontario health premium.</b>									28,396	72	31			
Complete the appropriate on the amount on line 31.	column depending	Line 31 is <b>\$39.723</b> or less		<b>\$39,723</b> but not			Line 31 is more than \$79,448 but not more than \$509,000			Line 31 is more				
Enter the amount from line	31.		28,396	72										32
			0	00	=	39,723	00	=	79,448	00	_	509,000	00	33
Line 32 minus line 33 (can	not be negative)	_ =	28,396	72	=			=			=			34
		×	5.05	%	×	9.15°	%	×	11.16	%	×	13.16	<u>;%</u>	35
Multiply line 34 by line 35.		=	1,434	03	=			=			=			36
		+	0	00	+	2,006	00	+	5,641	00	+	53,579	00	37
Add lines 36 and 37.	Ontario tax on taxable income	=	1,434	03	=			=			=			38
		G	o to Step 3.		Go	to Step 3.			Go to Step 3.			Go to Step 3		•
Step 3 – Ontario ta	ax													
Enter your Ontario tax on	taxable income from lin	ne 38										1,434	03	39
Enter your Ontario tax on	split income from Form	1 T1206	;							615°	1 +	•		• 40
Add lines 39 and 40										_	Ξ	1,434	03	41
Enter your Ontario non-re		m line (	30						719 52	_ 42	!			
Ontario dividend tax credi	• • •	114/2010				045	-0							
Credit calculated for line		IVVOIKS	STIEEL			615	2 +		675 00	•43	i			
Ontario overseas employe Amount from line 426 o					× 38	.5% = 615	3 +			• 44	Ļ			
Ontario minimum tax carry	yover:													

Complete lines 50 to 52 only if the amount at line 49 is more than \$4,289.

Otherwise, enter "0" on line 52 and continue completing the form.

Amount from line 427 of the federal Schedule 1

Ontario additional tax for minimum tax purposes:

Line 41 minus line 46 (if negative, enter "0")

Amount from line 95 of Form T691

### Ontario surtax

Add lines 47 and 48

Add lines 42 through 45

(Line 49	39   51	minus \$4,289) × 20% (if negative, enter "0")			50	)		
(Line 49	39 51	minus \$5,489) × 36% (if negative, enter "0")	=	+	5			
Add lines 50 and 51				=		+		52
Add lines 49 and 52						Ξ	39 51	53

× 33.67% =

If you are **not** claiming an Ontario tax reduction and the credits in Steps 5 and 6, enter the amount from line 53 on line 64 and **complete Step 7.** Otherwise, continue below.

### Step 4 - Ontario tax reduction

Basic reduction	221	00	54	
If you had a spouse or common-law partner on December 31, 2013, <b>only</b> the individual with the <b>higher net income</b> can claim the amounts on lines 55 and 56. Reduction for dependent children born in 1995 or later				
Number of dependent children 6269 1 × \$409 =	+ 409	00	55	
Reduction for dependants with a mental or physical infirmity				
Number of dependants 6097 × \$409 =	+		56	
Add lines 54, 55, and 56	= 630	00	57	
Enter the amount from line 57 630 00 × 2 =	1,260	00	58	
Enter the amount from line 53	39	51	59	
Line 58 minus line 59 (if negative, enter "0")  Ontario tax reduction claimed  Line 53 minus line 60 (if negative, enter "0")	= 1,220	49	. <b>&gt;</b> <u>-</u>	

Enter the amount from line 61 on the previous page 62

Step 5 – Ontario foreign tax credit

# Step 5 – Ontario foreign tax credit Enter the Ontario foreign tax credit from Form T2036 Line 62 minus line 63 — 63 — 64 Go to Step 6

### Step 6 – Ontario Health Premium

Go to Step 6

If your taxable income (from line 31) is not more than \$20,000, enter "0" on this line.

Otherwise, enter the amount calculated in the chart below

Add lines 64 and 65.

Enter the result on line 428 of your return.

Ontario tax

Ontario tax

+ 300 | 00 | 65 | |
= 300 | 00 | 66

**Ontario Health Premium** 

Enter your taxable income from line 31	28,396   721
<ul> <li>Use the amount on line 1 to find the row that applies to you.</li> <li>If there is an Ontario Health Premium amount in your row, enter that amount on line 65 above.</li> <li>Otherwise, you have to complete the calculation in your row.</li> <li>Enter your taxable income in the first box, complete the calculation, and enter the result on line 65 above.</li> </ul>	
Taxable Income	Ontario Health Premium
not more than \$20,000	▶ \$0
more than <b>\$20,000</b> , but not more than <b>\$25,000</b> - \$20,000	x 6%=
more than \$25,000 , but not more than \$36,000	<b>\$300</b>
more than \$36,000 , but not more than \$38,500 \$36,000 = x 6% =	+ \$300 =
more than \$38,500 , but not more than \$48,000	<b>\$450</b>
more than <b>\$48,000</b> , but not more than <b>\$48,600</b> - \$48,000 = x 25% =	+ \$450 =
more than \$48,600, but not more than \$72,000	<b>\$600</b>
more than <b>\$72,000</b> , but not more than <b>\$72,600</b> \$72,000 = x 25% =	+ \$600 =
more than \$72,600, but not more than \$200,000	<b>&gt;</b> \$750
more than <b>\$200,000</b> , but not more than <b>\$200,600</b> \$200,000 = x 25% =	+ \$750 =
more than \$200,600	\$900



## Application for the 2014 Ontario Trillium Benefit and Ontario Senior Homeowners' Property Tax Grant

ON-BEN T1 General – 2013

Read the information about each of the payments in the Ontario forms book (pages 10 to 13) to see if you are eligible.

Complete the application areas that apply to you and attach this form to your return.

To estimate the amount of Ontario trillium benefit and Ontario senior homeowners' property tax grant to which you may be entitled, use the calculator at www.cra.gc.ca/benefits-calculator.

If you were married or living in a common-law relationship on December 31, 2013, the same spouse or common-law partner has to apply for the Ontario energy and property tax credit, the Northern Ontario energy credit, and the Ontario senior homeowners' property tax grant for both of you. **If only one spouse or common-law partner is 64 years of age or older** on December 31, 2013, that spouse or common-law partner has to apply for these credits and grant for both of you.

The payments for these claims will be issued separately from your tax refund, starting in July 2014.

Ontario trillium benefit (OTB)
By ticking <b>box 6109</b> , I elect to receive my 2014 OTB entitlement in <b>one payment in June 2015</b> , instead of receiving it monthly from July 2014 to June 2015.
┌ Ontario sales tax credit (OSTC)
You must apply for the OSTC on page 1 of your income tax and benefit return.
Application for the Ontario energy and property tax credit (OEPTC)
You may qualify for the OEPTC if, on December 31, 2013, you resided in Ontario, and:
<ul> <li>rent or property tax for your principal residence was paid by or for you for 2013;</li> <li>you lived in a student residence;</li> <li>you lived in a long-term care home; or</li> <li>you lived on a reserve and home energy costs were paid by or for you for your principal residence on the reserve for 2013.</li> </ul>
Are you applying for the 2014 OEPTC? If <b>yes</b> , tick this box.
Complete Parts A and B on the back of this form.
Application for the Northern Ontario energy credit (NOEC)
You may qualify for the NOEC if, on December 31, 2013, you resided in Northern Ontario (see the definition in forms book), and:
<ul> <li>rent or property tax for your principal residence in Northern Ontario was paid by or for you for 2013;</li> <li>you lived in a long-term care home in Northern Ontario; or</li> <li>you lived on a reserve in Northern Ontario and home energy costs were paid by or for your</li> </ul>
principal residence on the reserve for 2013.

### Application for the Ontario senior homeowners' property tax grant (OSHPTG)

You may qualify for the OSHPTG if, on December 31, 2013:

Are you applying for the 2014 NOEC? If yes, tick this box.

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

- you were 64 years of age or older; and
- you owned and occupied a principal residence in Ontario, for which you or someone on your behalf paid property tax for 2013.

Are you applying for the 2014 OSHPTG? If  $\boldsymbol{yes}$  , tick this box.

<u>6113</u> **√** 

6119

Enter the total amount of property tax paid beside box 6112 in Part A and complete Part B on the back of this form.

Part A – Amount paid for a principal residence for 2013		
If, on December 31, 2013, you and your spouse or common-law partner occupied separate principal residences for medical reasons, and you are <b>choosing</b> to apply individually for the OEPTC, the NOEC, the OSHPTG or the Ontario healthy homes renovation tax credit, tick <b>box 6089</b> and enter his or her address in Part C below.	6089	
Enter the total amount of rent paid for your principal residence (including a <b>private</b> long-term care home) in Ontario for 2013.	6110	
Enter the total amount of property tax paid for your principal residence in Ontario for 2013.	6112	6,235 03
Did you reside in a designated student residence in Ontario in 2013? If <b>yes</b> , tick this box.	6114	
Enter the total amount of home energy costs paid for your principal residence on a reserve in Ontario for 2013.	6121	
Enter the total amount paid for your accommodation in a <b>public</b> long-term care home in Ontario for 2013.	6123	

Complete Part B if you are applying for the Ontario energy and property tax credit, the Northern Ontario energy credit, or the Ontario senior homeowners' property tax grant.

─ Part B − Declaration ————								
- Fait B - Declaration								
In the column entitled "Amount paid for 2013' and/or accommodation in a public long-term		amount(s) paid for rent	, property tax, ho	me energy costs on a reserve				
I declare the following information about my principal residence(s) in Ontario during 2013:								
(If you need more space, attach a separate sheet of paper.)								
Address	Postal Code	Number of months resident in 2013	Amount paid for 2013	Name of landlord, municipality or supplier to whom payment was made, as applicable				

Complete Part C if, on December 31, 2013, you and your spouse or common-law partner **occupied separate principal residences in Ontario for medical reasonsand youarechoosing** to apply individually for the Ontario energy and property tax credit, the Northern Ontario energy credit, the Ontario senior homeowners' property tax grant or the Ontario healthy homes renovation tax credit.

Part C - Involuntary separation	
Enter the address of your spouse or common-law partner.	
	· ·

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



### **Ontario Credits**

ON479

T1 General - 2013

Complete Form ON-BEN to apply for the Ontario trillium benefit and the Ontario senior homeowners' property tax grant. Ontario children's activity tax credit Enter the total amount of eligible expenses for all your eligible children.\* (maximum of \$535 for each child) Enter an additional \$535 for each child who is eligible for the disability amount and for whom you claimed at least \$100 at line 1. Add lines 1 and 2. × 10% = \* The child must have been born in 1997 or later, or if the child is eligible for the disability amount, in 1995 or later. Ontario healthy homes renovation tax credit Enter your total home renovation expenses from line 5 of Schedule ON(S12). × 15% 6311 Ontario political contribution tax credit Ontario political contributions made in 2013 6310 (maximum \$1,240) Credit calculated for line 6 on the Provincial Worksheet Ontario focused flow-through share tax credit Enter your total expenses from line 4 of Form T1221. 6266 5% = Add lines 3, 4, 6, and 7. If you are not claiming Ontario tax credits for self-employed individuals, enter the amount from line 8 on line 479 of your return. Ontario tax credits for self-employed individuals Number of eligible apprentices your business or partnership hired under the Ontario apprenticeship training tax credit program 6324 Number of eligible work placements your business or partnership is claiming under the Ontario co-operative education tax credit program Are you claiming one or more of these tax credits as a member of a partnership? If yes, enter the nine digits of your business number. Ontario apprenticeship training tax credit See page 9 in the forms book. Ontario co-operative education tax credit See page 10 in the forms book. 6320 Add lines 8, 9, and 10, Enter the result on line 479 of your return. **Ontario credits** 

Protected B when completed

### STATEMENT OF REAL ESTATE RENTALS

Canada Revenue Agence du revenu Agency du Canada

STATEMENT OF REAL ESTATE RENTAL

For more information on how to	o complete th	nis stat	tement,	see g	juiae 14	036, <i>F</i>		11100111	e.															
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Advertising Insurance Interest Office expenses Legal, accounting, and other Management and administrat Maintenance and repairs Salaries, wages, and benefits Property taxes Travel Utilities Other expenses Motor vehicle expenses (not in the company of the company	including en including capital spenses minustrates (line 9369 aborne co-owner st allowance (	mployed it is personal to the control of the contro	st allow sonal po minus li	ortion) ine b)	) apter 3)		vners –	8699 8710 8810 8866 887 8966 9188 9200 9222 9278 928	share	2,10 3,39 15 2,02 18 7,85	00 (00)	50 00 00 00 00 50	9949		Pers	onal	Sut	ototal	9945 9945 9948	7		-1,85 -1,85 -1,85 -1,85	1 50 1 50 1 50 1 50	c
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Advertising Insurance Interest Office expenses Legal, accounting, and other Management and administrat Maintenance and repairs Salaries, wages, and benefits Property taxes Travel Utilities Other expenses Motor vehicle expenses (not in the income (loss) before adjuction of the income (loss) representation of the income (loss) and income (loss) of the incom	including er including capi includin	mployed interest in a name of the control of the co	st allow sonal pr minus li tails, se 3) Co-or the bac or a co-	ance) ortion; ine b) ee Cha	apter 3)	share	vners –	8699 8710 8810 8860 887 8966 9186 9200 9220 9270 928	share	2,10 3,39 15 2,02 18 7,85	00 (00)	50 00 00 00 00 50	9949		Pers	onal	Sut	ototal	9948 9948 9948	5 7 8	,	-1,85 -1,85 -1,85 -1,85 -1,85	1 50 1 50 1 50 1 50 1 50	c
Advertising Insurance Interest Office expenses Legal, accounting, and other Management and administrat Maintenance and repairs Salaries, wages, and benefits Property taxes Travel Utilities Other expenses Motor vehicle expenses (not in Deductible expenses (total expenses) Net income (loss) before adjuction of the company	including ending capital control contr	mployed interest in a name of the control of the co	st allow sonal pr minus li tails, se 3) Co-or the bac or a co-	ance) ortion; ine b) ee Cha	apter 3)	share	vners –	8699 8710 8810 8860 887 8966 9186 9200 9220 9270 928	share	2,10 3,39 15 2,02 18 7,85	00 (00)	50 00 00 00 00 50	9949		Pers	onal	Sut	ototal	9945 9945 9948	5 7 8 6	,	-1,85 -1,85 -1,85 -1,85 -1,85	1 50 1 50 1 50 1 50 1 50	c

Area A	4 – Caicula	ition	or capital co	ost ai	iowance ciain	n										. WHETH COIL	ihiere
1 Class number	2 Undepreciated capital cost (UCC) at the start of the year		3 Cost of additions in the year (see areas B and C below)		4 Proceeds of dispositions in the year (see areas D and E below)		5 * UCC after additions and dispositions (col. 2 plus col. 3 minus col. 4)		6 Adjustment for current-year additions (1/2 x (col. 3 minus col. 4)). If negative, enter "0"		7 Base amount for capital cost allowance (col. 5 minus col. 6)		8 Rate %	9 CCA for the ye (col. 7 x col. a lesser amo	8 or	10 UCC at the of the ye (col. 5 minus	ar
1	3,865	85					3,865	85			3,865	85	4	154	63	3,711	22

\* If you have a negative amount in this column, add it to income as a recapture under "Recaptured capital cost allowance" on line 9947 on page 1 of this form. If there is no property left in the class and there is a positive amount in the column, deduct the amount from income as a terminal loss under "Terminal loss" on line 9948 on page 1 of this form. For more information, read Chapter 3 of Guide T4036, Rental Income

Total CCA claim for the year\*\*

1 Class number	2 Property details	3 Total cost		4 Personal portion (if applicable)		5 Rental portion (Column 3 minu Column 4)	
	Total equipment and other	property addi	tions	in the year	9925		

#### Area C - Details of building additions in the year

1 Class number	2 Property details	3 Total cost		4 Personal portion (if applicable)		5 Rental portion (Column 3 minus Column 4)	
	Total b	uilding additi	ons ir	n the year	927		

### Area D - Details of equipment and other property dispositions in the year

1 Class number	2 Property details		3 Proceeds of disp (should not be than the capital	more	4 Personal portion (if applicable	e)	5 Rental portion (Column 3 minus Column 4)
in guid	disposed of rental property in the year, see Chapter 3 e T4036, Rental Incometor information about your	Total equipment and other pro	perty disposi	tions	in the year	926	

### Area E - Details of building dispositions in the year

1 Class number	2 Property details	Proceeds of disposition (should not be more than the capital cost)		4 Personal portion (if applicabl		5 Rental portion (Column 3 minus Column 4)	;
in Guid	disposed of rental property in the year, see Chapter 3 le T4036, Rental Income, for information about your ds of disposition.  Total bu	ilding disposi	tions	n the year	9928		

### Area F - Details of land additions and dispositions in the year

Cost of all land additions in the year	9923	
Proceeds from all land dispositions in the year	9924	

<sup>\*\*</sup>Sole proprietors and partnerships: Enter the total claim on line 9936 on page 1 of this form. Co-owners: Enter only your share of the total claim on line 9936.

Name: Barry L Friedman SIN: 232 160 929 T4A(OAS) - STATEMENT OF OLD AGE SECURITY PENSION T4AOAS[1] Taxable pension paid **\_18** 6,579 06 T4A(P) - STATEMENT OF CANADA PENSION PLAN BENEFITS

T4AP	[1]

Retirement benefit	14	8,669 16
Taxable CPP benefits	20	8,669 16
Number of months – retirement	23	12

### **T5 - STATEMENT OF INVESTMENT INCOME**

### T5[1]

Actual amount of dividends other than eligible dividends	10	12,000 00
Taxable amount of dividends other than eligible dividends	11	15,000 00
Dividend tax credit for dividends other than eligible dividends	12	2,000 00