

Tax Return Enclosures List

Please assemble your return as described below and, where appropriate, sign and date the indicated forms.

If you are using NETFILE to submit your return, DO NOT MAIL a paper copy of the return as well. However, be sure to keep all your slips, receipts, and supporting documents for six years in case CRA selects the return for review.

If you are not using NETFILE, the following instructions apply:

T1 - Income Tax and Benefit Return should be signed on the bottom of page 4.

The following enclosures should be attached to the top left corner of page 3 of the T1 return:

All tax information slips (T4, T3, T5, T4E, etc.)

Schedule 1 - Federal Tax

Schedule 4 - Statement of Investment Income

ON428 - Ontario Tax

Make sure you attach receipts for all the deductions or credits you are claiming.

Keep all other supporting documents for six years in case the Canada

Revenue Agency requests them.

Additional instructions:

If you have a correct personalized label from the CRA, affix it over the name and address section on page 1 of the return.

Do not staple together returns of more than one taxpayer

or returns of the same taxpayer for different years.

Note: Do not submit this enclosures list with your return.



Income Tax and Benefit Return

Identification

ON **7**

First name **LIQING**
 Last name **LI**
 Mailing Address:
 Apt. No. **706**
 No./Street **10 STONEHILL CRT**
 PO Box, RR _____
 City **SCARBOROUGH**
 Prov./Terr. **ON** Postal code **M1W 2X8**

Information about you
 Your social insurance number: **541 693 560**
 Your date of birth: **1978/07/12**
 Your language of correspondence:
 Votre langue de correspondance :
 English Français
 Marital status on December 31, 2006:
1. Married

Information about your residence
 Province or territory of residence
 on **December 31, 2006:**
Ontario
 Province/territory where you **currently** reside if
 not the same as your mailing address above:

 Province or territory of self-employment:

 Canadian residency change in **2006:**
 Date of **entry:** _____ or **departure:** _____

**Information about your spouse or
 common-law partner (if applicable)**
 His or her SIN: **541 691 903**
 His/her first name: **YINGXIONG**
 Enter his or her net income for 2006 to claim
 certain credits: (see Help for details)
52,703 | 86
 Enter amount of Universal Child Care Benefit
 included in his or her net income above:
 (see Help for details) _____
 Check this box if he or she
 was self-employed in 2006:
 1

If this **return** is for a **deceased
 person**, enter the date of death:
 Do not use this area

Elections Canada (Canadian citizens only; see Help for details)
DO NOT ANSWER THIS QUESTION IF YOU ARE NOT A CANADIAN CITIZEN.
 As a Canadian citizen, I authorize the Canada Revenue Agency to
 provide my name, address, and date of birth to Elections Canada for
 the National Register of Electors. Yes 1 No 2
 Your authorization is required each year. This information will be used
 only for purposes permitted under the *Canada Elections Act*.

Goods and services tax/harmonized sales tax (GST/HST) credit application
 See **Help** for details.
 Are you applying for the GST/HST credit? Yes 1 No 2

Do not use this area	172					171				
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Please answer the following question:

Did you own or hold foreign property at any time in 2006 with a total cost of more than CAN\$100,000?

(see "Foreign Income" in Help for details)

If yes, attach a completed Form T1135.

If you had dealings with a non-resident trust or corporation in 2006, see **Help**.

266 Yes 1 No 2

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

Total income

Employment income (box 14 on all T4 slips)		101		
Commissions included on line 101 (box 42 on all T4 slips)		102		
Other employment income		104		
Old Age Security pension (box 18 on the T4A(OAS) slip)		113		
CPP or QPP benefits (box 20 on the T4A(P) slip)		114		
Disability benefits included on line 114 (box 16 on the T4A(P) slip)		152		
Other pensions or superannuation		115		
Universal Child Care Benefit (see Help)		117	600	00
Employment Insurance and other benefits (T4E slip, box 14)		119	14,006	00
Taxable amount of dividends (eligible and other than eligible) from taxable Canadian corporations (attach Schedule 4)		120		
Taxable amount of dividends other than eligible dividends, included on l. 120, from taxable Cdn. corporations		180		
Interest and other investment income (attach Schedule 4)		121	14	22
Net partnership income: limited or non-active partners only (attach Schedule 4)		122		
Rental income	Gross	160		Net 126
Taxable capital gains (attach Schedule 3)		127		
Support payments received	Total	156		Taxable amount 128
RRSP income (from all T4RSP slips)		129		
Other income Specify:		130		
Self-employment income (see Help)				
Business income	Gross	162		Net 135
Professional income	Gross	164		Net 137
Commission income	Gross	166		Net 139
Farming income	Gross	168		Net 141
Fishing income	Gross	170		Net 143
Workers' compensation benefits (box 10 on the T5007 slip)		144		
Social assistance payments		145		
Net federal supplements (box 21 on the T4A(OAS) slip)		146		
Add lines 144, 145, and 146				147
Add lines 101, 104 to 143, and 147				150
This is your total income .			14,620	22

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 **total income** from line 150. 150 14,620 | 22

Pension adjustment (box 52 on all T4s, box 34 on all T4As)		206		
Registered pension plan deduction (box 20 on all T4 slips and box 32 on all T4A slips)		207		
RRSP deduction (see Schedule 7 and attach receipts)		208		
Saskatchewan Pension Plan deduction (maximum \$600)		209		
Annual union, professional, or like dues (box 44 on all T4 slips and receipts)		212		
Child care expenses (attach Form T778)		214		
Disability supports deduction		215		
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)		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 232.		233		
Line 150 minus line 233. This is your net income before adjustments .		234	14,620	22
Social benefits repayment (if you reported income on line 113, 119, or 146, see Help)		235		
Line 234 minus line 235 (if negative, enter "0"). If you have a spouse or common-law partner, see Help .		236	14,620	22
This is your net income .				

Taxable income

Canadian Forces personnel and police ded. (box 43 on T4s)		244		
Employee home relocation loan deduction (box 37 on T4s)		248		
Security options deductions		249		
Other payments deduction (if you reported income on line 147, see line 250 in Help)		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)		255		
Add'l deductions Specify:		256		
Add lines 244 to 256.		257		
Line 236 minus line 257 (if negative, enter "0") This is your taxable income .		260	14,620	22

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 tax: line 50 of Sch. 1 (attach Schedule 1, even if the result is "0")	420	881	63
CPP contributions payable on self-employment and other earnings (Sch. 8)	421		
Social benefits repayment (enter the amount from line 235)	422		

Provincial or territorial tax (attach Form 428, even if the result is "0")	428	367	42
Add lines 420 to 428			
This is your total payable .	435	1,249	05

Total income tax deducted (from all information slips)	437	1,295	00
Refundable Québec abatement	440		
CPP overpayment (enter your excess contributions)	448		
Employment Insurance overpayment	450		
Refundable medical expense supplement	452		
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		
Tax paid by instalments	476		
Provincial or territorial credits (attach Form 479)	479		

Add lines 437 to 479.			
These are your total credits .	482	1,295	00
Line 435 minus line 482			1,295 00
			(45 95)

Generally, we do not charge or refund a difference of \$2 or less.

Refund **484** **45 95**

Balance owing **485**

Amount enclosed **486**

Direct Deposit - Start or change (see Help)

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

Refund and GST/HST credit - To start direct deposit or to change account information only, **attach** a "void" cheque or complete lines 460, 461, and 462.

Notes: To deposit your **CCTB** payments (including certain related provincial or territorial payments) into the **same** account, also check box 463.

To deposit your **UCCB** payments into the **same** account, also check box 491.

Branch #	Institution #	Account number	CCTB	UCCB
460	461	462	463	491
(5 digits)	(3 digits)	(maximum 12 digits)		

Attach to page 1 a **cheque** or **money order** payable to the Receiver General. Your payment is due no later than April 30, 2007.

Ontario Opportunities Fund	Amount from line 484 above	45 95	1
You can help reduce Ontario's debt by completing this area to donate some or all of your 2006 refund to the Ontario Opportunities Fund. Please see Help for details.	Your donation to the Ontario Opportunities Fund	465	2
	Net refund	466	45 95 3

I certify that the information given on this return and in any documents attached is correct, complete, and fully discloses all my income. Sign here _____ It is a serious offence to make a false return. Telephone _____ Date: _____	490	For professional tax preparers only Name: _____ Address: _____ Telephone: _____

Do not use this area	487	488							
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T1-2006

Federal Tax

Schedule 1

Complete this schedule to claim your federal non-refundable tax credits and to calculate your net federal tax.

You must attach a copy of this schedule to your return.

Enter your **taxable income** from line 260 of your return. 14,620 | 22 | 1

Use the amount on line 1 to determine which **ONE** of the following you have to complete.

If the amount on line 1 is:	\$36,378 or less	more than \$36,378 but not more than \$72,756	more than \$72,756 but not more than \$118,285	more than \$118,285
Amount from line 1.	14,620 22			
Base amount	0 00	36,378 00	72,756 00	118,285 00
Line 2 minus line 3 (cannot be negative)	14,620 22			
Rate	15.25%	22%	26%	29%
Multiply line 4 by line 5.	2,229 58			
Tax on base amount	0 00	5,548 00	13,551 00	25,388 00
Add lines 6 and 7.	2,229 58			

Federal non-refundable tax credits (see Help)

Basic personal amount	claim \$8,839	300	8,839 00	9
Age amt. (if you were born in 1941 or earlier)	(max. \$5,066)	301		10
Spouse or common-law partner amount:				
Base amount	8,256 00			
Minus: his or her net income	52,703 86			
Result: (if neg., enter "0") (max \$7,505)		303		11
Amount for an eligible dependant	(maximum \$7,505)	305		12
Amount for infirm dependants age 18 or older		306		13
CPP or QPP contributions:				
through employment from box 16 and 17 on all T4 slips		308		●14
on self-employment and other earnings (attach Sch. 8)		310		●15
El premiums from box 18 on all T4 slips	(max. \$729.30)	312		●16
Canada employment amount	(maximum \$250)	363		17
Public transit passes amount (see Help)		364		18
Adoption expenses		313		19
Pension income amount	(maximum \$2,000)	314		20
Caregiver amount (attach Schedule 5)		315		21
Disability amount (for self)		316		22
Disability amount transferred from a dependant		318		23
Interest paid on your student loans		319		24
Tuition, education, and textbook amounts (Schedule 11)		323		25
Tuition, education, and textbook amts. transf. from a child		324		26
Amts. transferred from your spouse or common-law partner		326		27
Medical expenses for self, spouse or common-law partner, and your dependent children born in 1989 or later	330			
Minus: lesser of \$1,884, or 3% of l. 236	438 61			
Subtotal (if negative, enter "0")				(A)
Allowable amount of medical expenses for other dependants (attach Sch 5)	331			(B)
Add lines (A) and (B).		332		28
Add lines 9 to 28.		335	8,839 00	29
Multiply the amount on the line above by 15.25%.		338		1,347 95
Donations and gifts (attach Schedule 9)		349		31
Total federal non-refundable tax credits		350	1,347 95	32

Statement of Investment Income

State the names of the payers below and attach any information slips you received.
 Attach a copy of this schedule to your return.

I - Taxable amount of dividends (eligible and other than eligible) from taxable

Canadian corporation (see line 120 in Help)

Taxable amount of dividends other than eligible dividends (specify):

Amounts from information slips (see S4-SUPP)

		1
		2
		3
Add lines 1 to 3 and enter this amount on line 180 of your return.	180	4

Taxable amount of eligible dividends (specify):

Amounts from information slips (see S4-SUPP)

		5
		6
		7
Add lines 4 to 7 and enter this amount on line 120 of your return.	120	120

II - Interest and other investment income (see line 121 in Help)

Specify:

Amounts from information slips (see S4-SUPP)

		14	22

Income from foreign sources:

Amounts from information slips (see S4-SUPP)

Enter this amount on line 121 of your return.	121	14	22

III - Net partnership income (loss) (see line 122 in Help)

Amounts from T5013 slips

Enter this amount on line 122 of your return.	122		

IV - Carrying charges and interest expenses (see line 221 in Help)

Amounts from T5013 slips

Interest on money borrowed to earn interest, dividend and royalty income

Interest on money borrowed to acquire an interest in a limited partnership
 or a partnership in which you are not an active partner

Enter this amount on line 221 of your return.	221		

Ontario Tax

Complete this form and **attach a copy** of it to your return. See **Help** for more information.

Step 1 - Ontario tax on taxable income

Enter your taxable income from line 260 of your return. (If this amt. is more than \$20,000, you **must** complete **Step 7, Ontario Health Premium**)

Use the amount on line 1 to determine which **ONE** of the following columns you have to complete.

	14,620	22	1						
Enter the amount from line 1 in the applicable column	If line 1 is \$34,758 or less			If line 1 is more than \$34,758 , but not more than \$69,517			If line 1 is more than \$69,517		
	14,620	22	2				14,620	22	2
	0	00	3	34,758	00	3	69,517	00	3
Line 2 minus line 3 (cannot be negative)	14,620	22	4			4			4
	6.05%		5	9.15%		5	11.16%		5
Multiply line 4 by line 5	884	52	6			6			6
	0	00	7	2,103	00	7	5,283	00	7
Add lines 6 and 7	884	52	8			8			8
Ontario tax on taxable income									
	Go to Step 2			Go to Step 2			Go to Step 2		

Step 2 - Ontario non-refundable tax credits

	For internal use only	5605							
Basic personal amount	claim \$8,377	5804		8,377	00	9			
Age amount (if born in 1941 or earlier)		5808				10			
Spouse or common-law partner amount									
Base amount	7,824	00							
Minus: his or her net income	52,703	86							
(if neg., enter "0") (max. \$7,113)			5812			11			
Amount for an eligible dependant			5816			12			
Amount for infirm dependants age 18 or older			5820			13			
Canada Pension Plan or Québec Pension Plan contributions:									
(amount from line 308 of your federal Schedule 1)		5824				14			
(amount from line 310 of your federal Schedule 1)		5828				15			
Employment Insurance premiums (line 312 - fed. Sch.1)		5832				16			
Adoption expenses (amount from line 313, Schedule 1)		5833				17			
Pension income amount (maximum \$1,158)		5836				18			
Caregiver amount		5840				19			
Disability amount (for self)		5844				20			
Disability amount transferred from a dependant		5848				21			
Interest paid on your student loans (line 319, Sch. 1)		5852				22			
Tuition/education amounts [attach Schedule ON(S11)]		5856				23			
Tuition and education amounts transferred from a child		5860				24			
Amounts transferred from your spouse or common-law partner [attach Schedule ON(S2)]		5864				25			
Medical expenses	5868					26			
\$1,896 or 3% of 1.236, whichever is less	438	61				27			
Line 26 minus line 27 (if neg., enter "0")						28			
Allowable medical expenses for other dependants (see Help)	5872					29			
Add lines 28 and 29	5876					30			
Add lines 9 through 25, and line 30		5880		8,377	00		8,377	00	31
Non-refundable tax credit rate							6.05%		32
Multiply line 31 by line 32			5884		506	81			33
Donations and gifts:									
Line 345 of your federal Sch. 9		x 6.05% =				34			
Line 347 of your federal Sch. 9		x 11.16% =				35			
Add lines 34 and 35			5896						36
Add lines 33 and 36			6150		506	81			37
Ontario non-refundable tax credits									
	Go to Step 3								

Step 3 - Ontario tax

Enter your Ontario tax on taxable income from line 8		884	52	38
Enter your Ontario tax on split income from Form T1206	6151			39
Add lines 38 and 39		884	52	40
Enter your Ontario non-refundable tax credits from line 37		506	81	41
Ontario dividend tax credit:				
Credit calculated	6152			42
Ontario overseas employment tax credit:				
Amt. from line 426 on Sch. 1				
x 38.5% =	6153			43
Ontario minimum tax carryover from Form T1219-ON	6154			44
Add lines 41 through 44		506	81	45
Line 40 minus line 45 (if negative, enter "0")		377	71	46
Ontario additional tax for minimum tax purposes:				47
Amount from line 95 of Form T691				
x 39.67% =				
Add lines 46 and 47		377	71	48
Ontario surtax				
(Line 48	377	71		
minus \$4,016) x 20%				49
(Line 48	377	71		
minus \$5,065) x 36%				50
Add lines 49 and 50				51
Add lines 48 and 51		377	71	52

If you are **not** claiming the Ontario tax reduction and the credits in Steps 5 and 6, enter the amount from line 52 on line 69 and **complete Step 7**. Otherwise, continue below.

Step 4 - Ontario tax reduction

Basic reduction		194	00	53
If you had a spouse or common-law partner on December 31, 2006, only the individual with the higher net income can claim the reductions on lines 54 and 55. See Help for more information.				
Reduction for dependent children born in 1988 or later				
Number of dependent children	6269			
x \$357 =				54
Reduction for disabled or infirm dependants				
Number of disabled or infirm dependants	6097			
x \$357 =				55
Add lines 53, 54, and 55		194	00	56
Enter the amount from line 56	194	00		
x 2 =		388	00	57
Enter the amount from line 52		377	71	58
Line 57 minus line 58 (if negative, enter "0")				
Total Ontario tax reduction claimed		10	29	59
Line 52 minus line 59 (if negative, enter "0")		367	42	60
Go to Step 5				

Step 5 - Ontario foreign tax credit

Enter the Ontario foreign tax credit from Form T2036				61
Line 60 minus line 61		367	42	62
Go to Step 6				

Step 6 - Ontario labour sponsored investment fund (LSIF) and employee ownership (EO) tax credits

Total cost of shares from boxes 02 and 04 of LSIF tax credit certificate(s) A	x 15% =	(max. \$750)	6275	● 63
Total cost of ROIF eligible shares from boxes 03 and 05 of LSIF tax credit certificate(s) B	x 5% =	(max. \$250)	6276	● 64
Credit amount from boxes 09 and 11 of EO tax credit certificate(s) (max. \$4,150)			6280	● 65
Unused employee ownership (EO) tax credits from the previous five years				66
Add lines 65 and 66				67
Add lines 63, 64, and 67		LSIF and EO tax credits		68
Line 62 minus line 68 (if negative, enter "0")			367	69
			42	
				Go to Step 7

Step 7 – Ontario Health Premium

If your taxable income (from line 1) is \$20,000, or less, enter "0" on this line. Otherwise, enter the amount calculated for line 70 on the *Provincial Worksheet*

Add lines 69 and 70				70
Enter the result on line 428 of your return		Ontario tax	367	71
			42	