

NEW EMPLOYEE DETAIL FORM

Personal Information:			1
First Name: Keith		Last Name:	lett
Date of Birth (YYYY/MM	M/DD): 1952/10/13		
Phone #: 807-41	13-0696	Alt. #: <u>807</u> -	-626-3871
Email (Personal):		mail.com.	
Home Address:			
RR#2	Nolaly	Ontario	POT 2 KO
# Street	City	Province	Postal Code
Mailing Address (if dif	iferent):		
P.O Box	City	Pronvice	Postal Code
Employment Informati	ion:		
Start Date: AVOIUS	C+ 14,2023	Employee #:	The state of the s
Employment Type.		190	
Permanent	t	Employment Status:	Full Time
Contract	31 Omil	Į.	Part Time
End Date:]	March 31, 2024	\$	Casual
Position: Discha	inge Driver		
Manager: Bonnie	· Una	d	_
Banking & Payroll Info	ANY AND THE RESERVE AND THE STATE OF THE STA		
Name of Bank:	erfin Gredit Un	nion.	
Account #:			
Transit #: 21072			
Institution #: \$38			
SIN#: 619 1	420 219		
Tax Exemption:	TOTO U.S.		
Declaration Form Attach			
	Band Membership #:		
No - FearPro	ov Tax Forms Attached		
Pension and Benefits:			
Pension Eligibility Date:	din	Section Statement of the second section in the	THE SPACE OF PROPERTY AS A SPACE OF THE PARTY OF THE PARTY.
Benefit Eligibility Date:	N/H -	(s <u>:0</u>	
Finance Only:			
Date Received:	100-2-40-110-110-110-110-110-110-110-110-110-	Entered into Adagio Sy	ystems by:

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NISHNAWBE - ASKI Legal Services Corporation

Employee Information

1. Personal	Information			
Full Given Name	Keith NET	<u> </u>	Le, th	M Initial.
Address:	RRFA NOCAC	v	1 1131	
	T. BAY City/Town		ON Province	POT2KO
Home Phone:	(807) 473-0696		ne: <u>(807) 62</u>	6387/ Cel
Primary Email:	KNC# 52 & G.	Mail.a	DOB /3	10152
SSN #:	619420219	Status #		
2. Job Inforr	mation			
Title:		Employee ID:		
Supervisor:		Department:		'
Work Location:		Work Email:		
Work Phone:	()	Cell Phone:	<u>() </u>	
Start Date:		Benefits	Pe	nsion: Y / N
Term Date:		Salary:	\$	
3. Emergend	cy Contact Information			
Full Name:	Ne#		PAREL TN First	M Initial.
Address:	RR# 2 NOLF	acc		Box #
	7 Bar	_	ON	POTZKO
	Ćity/Town		Province	Postal Code
Primary Phone:	807,473.0690	_ Alternate Pho	ne: <u>(807) 62</u>	3 -387/
Relationship:	Wito			

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Direct Deposit or Pre-Authorization Form

04942-828

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Instructions												and the same		0. XI-U	- 100		
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 Sign where indicated. Advise us of any a 		V F 005	aati	-4		_											
J. Advise by Or Carry C	arides to ye	ice duc	ODITI	INCH	HUHU)()											
		was in the						_									
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Company Name																	
Company Address									<u> </u>								
100 100 1																	
Payee/Payor Inforn	ration					-							266.20 (8)		20	No. of the	
Name(s)																	
Keith Wett																	
Address	10 _ 1021																
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Payee/Payor Name				•••		<u> </u>											
Copperfin Credi	t Union																
Branch Address																	
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Institution	Branch		•	-		Acco			_	_	_	_					
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consent to the colec	tion, use, and	disctor	sure a	f my	pers	onal inf	ormati	on aivi	en hen	ein for	the o	· if think a	المداد	lina uz	s lha f	Years!	
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ne account specified	in the Payee	Bonkin	g Info	amai	lion s	ection.											
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Date: Aug 14, 2023 / 14 août 2023

PROTECTED B / PROTÉGÉ B

KEITH LEWIS NETT RR#2 NOLALU ON P0T 2K0

Social Insurance Number (SiN) / Numéro d'assurance sociale (NAS): 619-420-219

Names on the SIN record / Noms au dossier de NAS

First Name / Prénom:

Middle Name(s) / Second(s) prénom(s):

Family Name(s) / Nom(s) de famille:

Protect your SiN; it is confidential

Keep any document containing your SIN in a safe place.

Use of your SIN

You are required to provide your SIN to your employer within three days after the day you receive it. Also, some programs and/or services authenticate a person's identity using data on the SIN record; ensure you are using the names as shown above.

If your SIN begins with the number 9

You must present a valid proof of authorization to work in Canada to your employer. Your SIN record must be updated to reflect the most recent expiry date.

For more information, visit our Web site:

Canada.ca/social-insurance-number

KEITH LEWIS NETT

Protégez votre NAS, il est confidentiel

Conservez tout document où l'on retrouve votre NAS dans un endroit sûr.

Utilisation de votre NAS

Vous devez fournir votre NAS à votre employeur dans les trois jours suivant sa réception. Aussi, certains programmes et/ou services utilisent les données au dossier de NAS afin d'authentifier l'identité d'une personne. Assurez-vous d'utiliser les noms qui figurent ci-dessus.

Si votre NAS débute par le chiffre 9

Vous devez présenter à votre employeur une autorisation valide vous permettant de travailler au Canada. Votre dossier de NAS doit être mis à jour afin de refléter la plus récente date d'expiration.

Pour plus de renseignements, consultez notre site Web :

Canada.ca/numero-assurance-sociale



2023 Personal Tax Credits Return

Read page 2 before filling out this form. Your employer or payer will use this form to determine the amount of your tax deductions.

Fill out this form based on the best estimate of your circumstances.

If you do not fill out this form, your tax deductions will only include the basic personal amount, estimated by your employer or payer based on the income they pay you.

Last name RTT	First name and initial(s)	Date of birth (YYYY/MM/DD)	Employee numb	ber
Address	Postal code	For non-résidents only Country of permanent resider		Social insurance number
RR #2 MOLALV	POT21610	2	6	1199202119
 Basic personal amount – Every resident of Canad from all sources will be greater than \$165,430 and you return at the end of the tax year. If your income from al partial claim. To do so, fill in the appropriate section of the calculated amount here. 	r enter \$15,000, you may ha ill sources will be greater tha	ave an amount owing on your inc an \$165,430, you have the option	come tax and ben n to calculate a	nefit _
Canada caregiver amount for infirm children und 2006 or later who lives with both parents throughout th parent who has the right to claim the "Amount for an el the child.	ne year. If the child does not ligible dependant" on line 8	t live with both parents throughor may also claim the Canada care	ut the year, the egiver amount for	<u> </u>
 Age amount – If you will be 65 or older on Decemb or less, enter \$8,396. You may enter a partial amount calculate a partial amount, fill out the line 3 section of f 	if your net income for the ye Form TD1-WS.	ear will be between \$42,335 and	\$98,309. To	
 Pension income amount – If you will receive regular Pension Plan, Quebec Pension Plan, old age security, \$2,000 or your estimated annual pension income. 	, or guaranteed income supp	plement payments), enter which	never is less:	
 Tuition (full-time and part-time) – Fill in this sectio certified by Employment and Social Development Cana total tuition fees that you will pay if you are a full-time of 	ada, and you will pay more or part-time student.	than \$100 per institution in tuitio	n fees. Enter the	
 Disability amount – If you will claim the disability at Tax Credit Certificate, enter \$9,428. 	mount on your income tax a	ind benefit return by using Form	T2201, Disability	
Spouse or common-law partner amount – Enter to common-law partner is infirm) and your spouse's or following conditions apply: You are supporting your spouse or common-law partners.	r common-law partner's esti			е
Your spouse or common-law partner's net income spouse or common-law partner is infirm)	-	n the amount on line 1 (line 1 pl	ıs \$2,499 if your	
In all cases, go to line 9 if your spouse or common-law	partner is infirm and has a	net income for the year of \$26,"	782 or less.	
8. Amount for an eligible dependant Enter the diffe dependant is infirm) and your eligible dependant's esti	erence between the amount timated net income for the ye	t on line 1 (line 1 plus \$2,499 if y ear if all of the following conditio	our eligible ons apply:	
 You do not have a spouse or common-law partner who you are not supporting or being supported by 	46	common-law partner who does n	ot live with you a	ind
You are supporting the dependant who is related to	•			
 The dependant's net income for the year will be les you cannot claim the Canada caregiver amount 	ss than the amount on line to for infirm children under	I (line 1 plus \$2,499 if your depe 18 years of age for this dependa	indant is infirm a ant)	nd
In all cases, go to line 9 if your dependant is 18 years	or older, infirm, and has a	net income for the year of \$26,	782 or less.	
 Canada caregiver amount for eligible dependant year, you support an infirm eligible dependent (aged 1 the year will be \$26,782 or less. To calculate the amount 	18 or older) <mark>or an infirm</mark> soc int you may enter here, fill o	ouse or common-law partner who out the line 9 section of Form TD	ose net income fo 1-WS.	or
10. Canada caregiver amount for dependant(s) age 18 or older (other than the spouse or common-law par claimed an amount for if their net income were under \$ You may enter a partial amount if their net income for tout the line 10 section of Form TD1-WS. This workshewith another caregiver who supports the same dependent of older.	rtner or eligible dependant y \$17,499) whose net income the year will be between \$18 et may also be used to calc	ou claimed an amount for on lin for the year will be \$18,783 or te 8,783 and \$26,782. To calculate culate your part of the amount if y	e 9 or could have ess, enter \$7,999. a partial amount, ou are sharing it	; , , fill
 Amounts transferred from your spouse or common their age amount, pension income amount, tuition amounused amount. 	ount, or disability amount on	their income tax and benefit retu	um, enter the	×
12. Amounts transferred from a dependant – If your benefit return, enter the unused amount. If your or your all of their tuition amount on their income tax and benefit	r spouse's or common-law p	partner's dependent child or gran	income tax and idchild will not use	e
13. TOTAL CLAIM AMOUNT – Add lines 1 to 12. Your employer or payer will use this amount to determi	ine the amount of your tax of	leductions.		15000
			- 1	, B.

Filling out Form TD1		-
Fill out this form only if any of the following apply: • you have a new employer or payer, and you will receive salary, wages, commissions, pensions, employment insu	rance bene	fits
or any other remuneration you want to change the amounts you previously claimed (for example, the number of your eligible dependants has		
you want to claim the deduction for living in a prescribed zone you want to increase the amount of tax deducted at source	s changed)	
Sign and date it, and give it to your employer or payer.		
More than one employer or payer at the same time		74.
If you have more than one employer or payer at the same time and you have already claimed personal tax credit a you cannot claim them again. If your total income from all sources will be more than the personal tax credits you c this box, enter "0" on Line 13 and do not fill in Lines 2 to 12.	mounts on laimed on a	another Form TD1 for 2023, another Form TD1, check
Total income is less than the total claim amount		
Tick this box if your total income for the year from all employers and payers will be less than your total claim amou will not deduct tax from your earnings.	nt on line 1	3. Your employer or payer
For non-resident only (Tick the box that applies to you.)		
As a non-resident, will 90% or more of your world income be included in determining your taxable income earned in Ca Yes (Fill out the previous page.)	nada in 202	23?
No (Enter "0" on line 13, and do not fill in lines 2 to 12 as you are not entitled to the personal tax credits.)		
Call the international tax and non-resident enquiries line at 1-800-959-8281 if you are unsure of your residency status.		
Provincial or territorial personal tax credits return		
You also have to fill out a provincial or territorial TD1 form if your claim amount on line 13 is more than \$15,000. Use th territory of employment if you are an employee. Use the Form TD1 for your province or territory of residence if you are will use both this federal form and your most recent provincial or territorial Form TD1 to determine the amount of your ta	e a pension	er. Your employer or payer
Your employer or payer will deduct provincial or territorial taxes after allowing the provincial or territorial basic personal personal amount only.	amount if y	ou are claiming the basic
Note: You may be able to claim the child amount on Form TD1SK, 2023 Saskatchewan Personal Tax Credits Retu supporting children under 18 at any time during 2023. Therefore, you may want to fill out Form TD1SK even if you amount on this form.	m if you ar are only cla	e a Saskatchewan resident aiming the basic personal
Deduction for living in a prescribed zone		
You may claim any of the following amounts if you live in the Northwest Territories, Nunavut, Yukon, or another prescrit months in a row beginning or ending in 2023: • \$11.00 for each day that you live in the prescribed northern zone	oed northe	rn zone for more than six
 \$22.00 for each day that you live in the prescribed northern zone if, during that time, you live in a dwelling that you maintain, and you are the only person living in that dwelling who is claiming this deduction Employees living in a prescribed intermediate zone may claim 50% of the total of the above amounts. For more information, go to canada.ca/taxes-northern-residents. 		\$
Additional tax to be deducted		
You may want to have more tax deducted from each payment if you receive other income such as non-employment inc	ome from	
CPP or QPP benefits, or old age security pension. You may have less tax to pay when you file your income tax and ber by doing this. Enter the additional tax amount you want deducted from each payment to choose this option. You may fill	efit return	
Form TD1 to change this deduction later.	001 0 11011	\$
Reduction in tax deductions		
You may ask to have less tax deducted at source if you are eligible for deductions or non-refundable tax credits that are periodic contributions to a registered retirement savings plan (RRSP), child care or employment expenses, charitable dramounts carried forward from the previous year). To make this request, fill out Form T1213, Request to Reduce Tax De authority from your tax services office. Give the letter of authority to your employer or payer. You do not need a letter of RRSP contributions from your salary.	onations, ai	nd tuition and education Source, to get a letter of
Forms and publications		
To get our forms and publications, go to canada.ca/cra-forms-publications or call 1-800-959-5525.		
Personal information (including the SIN) is collected for the purposes of the administration or enforcement of the income Tax Act and related administering tax, benefits, audit, compliance, and collection. The information collected may be used or disclosed for purposes of other fed and collection of a tax or duty. It may also be disclosed to other federal, provincial, territorial, or foreign government institutions to the extern information may result in interest payable, penalties, or other actions. Under the Privacy Act, individuals have a right of protection, access information, or to file a complaint with the Privacy Commissioner of Canada regarding the handling of their personal information. Refer to Form Info Source at canada carca-information-about-programs.	eral acts that it authorized to and correc	t provide for the imposition by law. Failure to provide this tion of their personal
Certification		
I certify that the information given on this form is correct and complete.		
al Mar		
Signature Mi Mar	Date	2023-08-14
It is a serious offence to make a false return.		



2023 Ontario Personal Tax Credits Return

Read page 2 before filling out this form. Your employer or payer will use this form to determine the amount of your provincial tax deductions.

Fill out this form based on the best estimate of your circumstances.

Last name	First name and initial(s)	Date of birth (YYYY/MM/DD)	Employee numb	Der				
NETI	Keith	1952/10/13						
Address	Postal code	For non-residents only		Social insurance number				
RR#2 NOLALU	POTZA			5/19 4202119				
 Basic personal amount – Every person employed if If you will have more than one employer or payer at the on page 2. 	same time in 2023, see *N	fore than one employer or payer	at the same time	11,003				
 Age amount – If you will be 65 or older on December enter a partial amount if your net income for the year w line 2 section of Form TD10N-WS, Worksheet for the 2 	ill be between \$43,127 and	\$81,747. To calculate a partial a	er \$5,793. You n mount, fill out the	5797 ion 1641				
3. Pension income amount – If you will receive regular pension payments from a pension plan or fund (not including Canada Pension Plan, Quebec Pension Plan, Old Age Security, or Guaranteed Income Supplement payments), enter whichever is less: \$1,641 or your estimated annual pension.								
 Disability amount – If you will claim the disability are Tax Credit Certificate, enter \$9,586. 	mount on your income tax a	nd benefit return by using Form 1	72201, Disability					
5. Spouse or common-law partner amount – Enter \$ the following conditions apply:	10,075 if you are supportin	g your spouse or common-law pa	artner and both o	f				
 Your spouse or common-law partner lives with you 								
Your spouse or common-law partner's net income								
You may enter a partial amount if your spouse's or come To calculate a partial amount, fill out the line 5 section of	nmon-law partner's net inco of Form TD1ON-WS.	me for the year will be between \$	1,007 and \$11,0	82.				
6. Amount for an eligible dependant - Enter \$10,075 conditions apply:	if you are supporting an el	igible dependant and all of the fo	llowing					
 You do not have a spouse or common-law partner who you are not supporting or being supported by 	, or you have a spouse or o	common-law partner who does no	t live with you an	d				
The dependant is related to you and lives with you								
 The dependant's net income for the year will be \$1 	,007 or less							
You may enter a partial amount if the eligible dependar partial amount, fill out the line 6 section of Form TD10h	nt's net income for the year N-WS.	will be between \$1,007 and \$11,0	082. To calculate	а				
7. Ontario caregiver amount – You may claim this amyour or your spouse's or common-law partner's:	nount if you are supporting a	an eligible infirm dependant aged	18 or older who	is				
child or grandchild								
 parent, grandparent, brother, sister, aunt, uncle, nie 	ece or nephew who is resid	ent in Canada						
To calculate this amount, fill out the line 7 section of Fo	rm TD1ON-WS.							
8. Amounts transferred from your spouse or commage amount, pension income amount, or disability amo	on-law partner – If your sp unt on their income tax and	ouse or common-law partner will benefit return, enter the unused	not use all of the amount.	ir				
9. Amounts transferred from a dependant – If your dependent tetum, enter the unused amount.	ependant will not use all of	their disability amount on their in	come tax and					
10. TOTAL CLAIM AMOUNT – Add lines 1 to 9. Your employer or payer will use this amount to determine	ne the amount of your provi	ncial tax deductions						
			•					

Protected B when com	plete
Filling out Form TD10N	
Fill out this form only if you are an employee working in Ontario or a pensioner residing in Ontario and any of the following apply:	
 you have a new employer or payer, and you will receive salary, wages, commissions, pensions, employment insurance benefits, or any other remuneration 	
 you want to change the amounts you previously claimed (for example, the number of your eligible dependants has changed) 	
you want to increase the amount of tax deducted at source	
Sign and date it, and give it to your employer or payer.	6
If you do not fill out Form TD1ON, your employer or payer will deduct taxes after allowing the basic personal amount only.	
More than one employer or payer at the same time	
If you have more than one employer or payer at the same time and you have already claimed personal tax credit amounts on another Form TD1ON for 2023, you cannot claim them again. If your total income from all sources will be more than the personal tax credits you claimed on another Form TD1ON, check this box, enter "0" on line 10 and do not fill in lines 2 to 9.	
Total income is less than the total claim amount	
Tick this box if your total income for the year from all employers and payers will be less than your total claim amount on line 10. Your employer or payer will not deduct tax from your earnings.	
Additional tax to be deducted	
If you want to have more tax deducted at source, fill out section "Additional tax to be deducted" on the federal Form TD.	
Reduction in tax deductions	
You may ask to have less tax deducted at source if you are eligible for deductions or non-refundable tax credits that are not listed on this form (for example periodic contributions to a registered retirement savings plan (RRSP), child care or employment expenses, charitable donations, and tuition and education amounts carried forward from the previous year). To make this request, fill out Form T1213, Request to Reduce Tax Deductions at Source, to get a letter of authority from your tax services office. Give the letter of authority to your employer or payer. You do not need a letter of authority if your employer deducts RRSP contributions from your salary.	n of
Forms and publications	
To get our forms and publications, go to canada.ca/cra-forms-publications or call 1-800-959-5525.	
Personal information (including the SIN) is collected for the purposes of the administration or enforcement of the Income Tax Act and related programs and activities including administering tax, benefits, audit, compliance, and collection. The information collected may be used or disclosed for purposes of other feacts that provide for the imposition and collection of a tax or duty. It may also be disclosed to other federal, provincial, territorial, or foreign government astitutions to the extent authorized by law. Failure to provide this information may result in interest payable, penalties, or other actions. Under the Privacy Andividuals have a right of protection, access to and correction of their personal information, or to file a complaint with the Privacy Commissioner of Canada egarding the handling of their personal information. Refer to Personal Information Bank CRA PPU 120 on Info Source at anada.ca/cra-information-about-programs.	
Certification	
I certify that the information given on this form is correct and complete.	

It is a serious offence to make a false return.

Signature

Date

2023-08-14



NISHNAWBE-ASKI LEGAL SERVICES CORPORATION OATH OF CONFIDENTIALITY

As a person working at Nishnawbe-Aski Legal Services Corporation ("NALSC") you are privy to confidential material. Confidentiality of client and NALSC information is essential. While at NALSC, you shall not disclose to any member of the public any confidential information obtained during his/her position with NALSC.

All NALSC files are to be treated as confidential material and may not be disclosed except in accordance with the provisions of NALSC's policies and Service Agreements. No one is to read files except in so far as the position requires it. Files are not to be discussed at any time with anyone within NALSC, except for NALSC related business.

Confidentiality also applies to information about financial and personnel matters or any other confidential information that is attained during your position with NALSC. We are entrusted with the confidential records of clients and of personnel throughout the Corporation and are always expected to comply with NALSC's Oath of Confidentiality Agreement.

EMPLOYEE STATEMENT OF NON-DISCLOSURE

I have read and understand this statement. I agree to abide by NALSC's Oath of Confidentiality Agreement as a condition of my position at Nishnawbe-Aski Legal Services Corporation. Unauthorized disclosure of any confidential material may result in my immediate discharge from my position and may result in further legal action.

I acknowledge that I am bound by the terms of this agreement and further, that these confidentiality requirements continue after my position with NALSC has ceased.

GNATURE A ONE TT BATE

PRINT FULL NAME

SIGNATURE OF WITNESS DATE

PRINT FULL NAME OF WITNESS

Permis de condu Driver's Licence

& LOC JH 2 SANDSTONE LAKE NOLALU, ON, POT 2KO

N2880 - 42965 AN NEIMBER

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ServiceOntario.ca

MSS/ CATÉGORIE

HL6686246

domobiles (max. 4500 kg) domobiles (max. 4500 kg) flortomax, véhicule remorqué .6286605"



Ministry of Transportation Ministère des Transports

Ministry No./No. du V66-9-1119 Search Date/Date de rechercho (Y/A M D/J)
2023/08/07

PAGE 01

3 YEARS DRIVER RECORD SEARCH/ RECHERCHE DANS LE DOSSIER DU CONDUCTEUR DES 3 DERNIÈRES ANNÉES

DRIVER INFORMATION/RENSEIGNEMENTS SUR LE CONDUCTEUR

Name/Nom NETT,KEITH,L

Address/Adresse

Reference No. or Driver's Licence No./

Sex/Sexe _____ M

Condition/Restriction*/N

Earliest Licence Date Available/

Date d'obtention du premier permis de conduire 1972/02/04

Expiry Date/Date d'expiration (Y/A M D/J) 2027/10/13

Status/Statut LICENCED/TITULAIRE D'UN PERMIS DE CONDUIRE

Date Y/A M D/J CONVICTIONS, DISCHARGES, AND OTHER ACTIONS CONDAMNATIONS, LIBÉRATIONS ET AUTRES ACTIONS

CURRENT DEMERIT POINTS TOTAL 00
TOTAL ACTUEL DES POINTS D'INAPTITUDE

****** END OF RECORD/FIN DU DOSSIER ******



*			

Determination of Exemption of an Indian's Employment Income

To make sure correct information is entered, we suggest that this form be filled out by the employer, in the presence of the employee.

As an employer, you can use this form to help determine if an employee's employment income is exempt from income tax. The term "employee" on this form refers only to an employee who is an Indian as defined in the Indian Act.

Read the instructions on the next page for more information on how to fill out this form.

Employee identification			
Last name (please print)	Usual first name and initials		Social insurance number
Residential address including postal code RR # 2 NOL A 4	POTZKO		
Is the employee's residence located on a reserve?		Yes 🗌	No 🖃
Indian status			
Is the employee an Indian as defined in the Indian Act?	•	Yes 🗌	No 🔄
If yes, was the employee an Indian as defined in the In-	dian Act:		_
☐ prior to 2011?			
because of Bill C-3 (also known as the Gender Equity in Indian Registration Act)? Only income earned on or after January 31, 2011, may be exempt from tax.			
because of the creation of the Qalipu Mi'kmaq First Nation Band? Only income earned on or after September 22, 2011, may be exempt from tax.			
Type of exemption 1			
The employee performs employment duties:			
1. entirely on a reserve 2. entirely off a reserve 3. partially on and partially off a reserve			
If you chose 3, indicate the percentage of the employment duties the employee performs on a reserve:			
All of the employee's employment income is exempt from income tax if any one of the following situations applies. Check the appropriate box.			
the employee performs at least 90%*2 of the employment duties on a reserve (guideline 1);			
the employee and the employer reside on a reserve (guideline 2);			
the employee performs more than 50% of the employment duties on a reserve, and the employee or the employer resides on a			
reserve (guideline 3); or the employee's employment duties are connected to the employer's non-commercial activities carried on exclusively for the benefit of Indians who, for the most part, reside on reserves and the employer resides on a reserve; and the employer is:			
an Indian band that has a reserve or a tribal council representing one or more Indian bands that have reserves; or			
 an Indian organization controlled by one or more such bands or tribal councils and is dedicated exclusively to the social, cultural, educational, or economic development of Indians who, for the most part, reside on reserves (guideline 4). 			
*1 The type of exemption is based on the Indian Act Exemption for Employment Income Guidelines. For a full description of the Guidelines including examples of exempt income and term definitions, go to canada.ca/en/revenue-agency/services/aboriginal-peoples/indian-act-exemption -employment-income-guidelines.			
*2 Proration rule may apply: When less than 90% of the duties of an employment are performed on a reserve and the employment income is not exempted by another guideline, the exemption is to be prorated. The exemption will apply to the portion of the income related to the duties performed on the reserve.			
Employee certification			
I certify that the information given on this form is correct and complete.			
2 11			
Signature		Date 14	Aug 14/2023

Personal information (including the SIN) is collected for the purposes of the administration or enforcement of the Income Tax Act and related programs and activities including administering tax, benefits, audit, compliance, and collection. The information collected may be used or disclosed for purposes of other federal acts that provide for the imposition and collection of a tax or duty. It may also be disclosed to other federal, provincial, territorial or foreign 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, request correction, or file a complaint to the Privacy Commissioner of Canada regarding the handling of the individual's personal information. Refer to Personal Information Bank CRA PPU 120 on Info Source at canada.ca/cra-info-source.

Instructions

- The employment income from a particular employment will not be exempt from income tax where one of the main reasons for that
 employment relationship is to establish a connecting factor to a reserve. A connecting factor is a fact which connects income to a
 reserve. For example, the fact that the employer is resident on a reserve is a connecting factor.
- If the employee's circumstances change, the employee will be required to fill out a new form.
- Keep a completed form on file for each employee. We may ask to review the form to verify that the income earned qualifies to be exempt from income tax based on the circumstances of the employment.
- For information on the requirements to deduct Canada Pension Plan contributions and employment insurance premiums, and for instructions on reporting requirements, see Guide T4001, Employers' Guide – Payroll Deductions and Remittances, and Guide RC4120, Employers' Guide – Filing the T4 Slip and Summary.

Employment-related income -

Employment insurance benefits, retiring allowances, Canada Pension Plan benefits, Quebec Pension Plan benefits, registered pension plan benefits, and wage-loss replacement plan benefits will be exempt from income tax when they are received as a result of employment income that was exempt from tax. If a portion of the employment income was exempt, a similar portion of these amounts will be exempt.