

2024 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 number	
-: 1		1995 106 109	Linployee number	
Fletcher Address	Novomi M.E.F	12-		Il insurance number
Country of permanent residence		nce		
1100 Gratineau Blvd. Timmins, (N PHRZC			2500910
Basic personal amount – Every person employed	in Ontario and every pension	oner residing in Ontario can claim	this amount.	40.000
If you will have more than one employer or payer at thon page 2.	e same time in 2024, see "r	viore than one employer or payer	at the same time	12,399
2. Age amount – If you will be 65 or older on Decemb	er 31, 2024, and your net ir	ncome will be \$45,068 or less, en	ter \$6,054. You may	
enter a partial amount if your net income for the year v line 2 section of Form TD1ON-WS, Worksheet for the			mount, fill out the	
3. Pension income amount – If you will receive regul Plan, Quebec Pension Plan, Old Age Security, or Gua your estimated annual pension.	ar pension payments from a ranteed Income Supplemer	a pension plan or fund (not includ nt payments), enter whichever is	ing Canada Pension less: \$1,714 or	
4. Disability amount – If you will claim the disability a Tax Credit Certificate, enter \$10,017.	mount on your income tax a	and benefit return by using Form	T2201, Disability	
5. Spouse or common-law partner amount – Enter the following conditions apply:	\$10,528 if you are supporting	ng your spouse or common-law p	artner and both of	
Your spouse or common-law partner lives with your	J			
 Your spouse or common-law partner's net income 	for the year will be \$1,053	or less		
You may enter a partial amount if your spouse's or cor To calculate a partial amount, fill out the line 5 section		ome for the year will be between s	\$1,053 and \$11,581.	
6. Amount for an eligible dependant – Enter \$10,52 conditions apply:	8 if you are supporting an e	ligible dependant and all of the fo	llowing	
 You do not have a spouse or common-law partne who you are not supporting or being supported by 		common-law partner who does no	ot live with you and	
 The dependant is related to you and lives with you 	I			
 The dependant's net income for the year will be \$ 	1,053 or less			
You may enter a partial amount if the eligible dependa partial amount, fill out the line 6 section of Form TD10		will be between \$1,053 and \$11,	581. To calculate a	
7. Ontario caregiver amount – You may claim this ar	mount if you are supporting	an eligible infirm dependant aged	1 18 or older:	
 your child or your grandchild (or your spouse or co 				
 your parent, grandparent, brother, sister, aunt, uncle, niece or nephew who is resident in Canada (or your spouse or common-law partner) 				
To calculate this amount, fill out the line 7 section of F	orm TD1ON-WS.			
8. Amounts transferred from your spouse or common-law partner – If your spouse or common-law partner will not use all of their age amount, pension income amount, or disability amount on their income tax and benefit return, enter the unused amount.				
9. Amounts transferred from a dependant – If your benefit return, enter the unused amount.	dependant will not use all o	f their disability amount on their in	ncome tax and	
10. TOTAL CLAIM AMOUNT – Add lines 1 to 9. Your employer or payer will use this amount to determ	ine the amount of your prov	vincial tax deductions.		12,399