

2024 Ontario Personal Tax Credits Return

Protected B when completed TD10N

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)			
mapo	Haura-Mark	Date of birth (YYYY/MM/DD)	Employee num	iber
Address	Postal code	For non-residents only		
504 MC1600 Street		Country of	nce	Social insurance number
1. Basic personal amount Event name	PFIC212B	Canada	+	564554368
Basic personal amount – Every person employ if you will have more than one employer or payer at on page 2.	t the same time in 2024, and line	er residing in Ontario can claim	this amount.	
on page 2.	1027, 366 IVIC	he than one employer or paver	at the same time	12,399
2. Age amount – If you will be 65 or older on Dece enter a partial amount if your net income for the year	mber 31, 2024, and your net inc	ome will be \$45,068 or loss		12,000
enter a partial amount if your net income for the yea line 2 section of Form TD10N-WS, Worksheet for the	ar will be between \$45,068 and \$	885,428. To calculate a partial a	er \$6,054. You n	nay
3. Pension income amount of the second	ne 2024 Ontario Personal Tax C	redits Return.	mount, in out the	,
3. Pension income amount – If you will receive receive receive. Plan, Quebec Pension Plan, Old Age Security, or G	gular pension payments from a p	ension plan or fund (not includi	ng Canada Pens	tion
Plan, Quebec Pension Plan, Old Age Security, or G your estimated annual pension.	uaranteed income Supplement p	payments), enter whichever is	less: \$1,714 or	1011
4. Disability amount - If you will claim the disability				
4. Disability amount – If you will claim the disability Tax Credit Certificate, enter \$10,017.	amount on your income tax and	benefit return by using Form 7	2201, Disability	
5. Spouse or common-law partner amount – Enter the following conditions apply:	er \$10,528 if you are supporting	your spouse or common-law pa	rtner and both of	f
 Your spouse or common-law partner lives with y 				
Your spouse or common-law partner's net incom	no for the ware will be a see			
Tou Itlay enter a partial amount if your engineds as		ess		
You may enter a partial amount if your spouse's or c To calculate a partial amount, fill out the line 5 section	on of Form TD1ON-WS	e for the year will be between \$	1,053 and \$11,58	31.
6. Amount for an eligible dependant – Enter \$10,5 conditions apply:	528 if you are supporting an eligil	ole dependant and all of the foll	owing	
 You do not have a spouse or common-law partn who you are not supporting or being supported b 	or or you be			1
The dependant is related to you and lives with your control of the dependant is related to you and lives with your control of the dependant is related to you and lives with your control of the dependant is related to you and lives with your control of the dependant is related to you and lives with your control of the dependant is related to you and lives with your control of the dependant is related to you and lives with your control of the dependant is related to you and lives with your control of the dependant is related to you and lives with your control of the dependant is related to you and lives with your control of the dependant is related to you and lives with your control of the dependant is related to you and lives with your control of the dependant is related to you and lives with your control of the dependant is related to you and lives with your control of the dependant is related to your control of the dependant i	, y		y ou and	
The dependant's net income for the year will be \$\frac{1}{2}\$.	JU \$1.052 or loss			
You may enter a partial amount if the eligible depend	lauta - t t			
You may enter a partial amount if the eligible depend partial amount, fill out the line 6 section of Form TD10	ON-WS.	be between \$1,053 and \$11,58	31. To calculate a	a
7. Ontario caregiver amount – You may claim this a	amount if you are supporting an e	eligible infirm dependant aged 1	8 or older:	
your child or your grandchild (or your spouse or c your parent grandcarpat brother sixty)	common-law partner);			
 your parent, grandparent, brother, sister, aunt, un partner) 	icle, niece or nephew who is res	ident in Canada (or your spous	e or common-law	î
To calculate this amount, fill out the line 7 section of F	Form TD1ON-WS			
3. Amounts transferred from your spouse or come				
	The state of the s	telli tellith enter the linucod or	marint	
penefit return, enter the unused amount.	dependant will not use all of the	ir disability amount on their inco	me tax and	
0. TOTAL CLAIM AMOUNT - Add lines 1 to 9.			1	
our employer or payer will use this amount to determ	nine the amount of your provincia	I tax deductions.		12399
		200000000000000000000000000000000000000		_ [·\alpha 07-]

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Filling out Form TD10N	When comple
Fill out this form only if you are an employee working in Ontario or a pensioner residing in Ontario and any of the following ap	
 you have a new employer or payer, and you will receive salary, wages, commissions, pensions, employment insurance b 	ply: enefits, or any other
 you want to change the amounts you previously claimed (for example, the number of your eligible dependants has changened by you want to increase the amount of tax deducted at source 	ed)
Sign and date it, and give it to your employer or payer.	
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 amount TD1ON for 2024, you cannot claim them again. If your total income from all sources will be more than the personal tax c another Form TD1ON, check this box, enter "0" on line 10 and do not fill in lines 2 to 9.	s on another Form redits you claimed on
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 leaver the year from your earnings.	ine 10.
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 list periodic contributions to a registered retirement savings plan (RRSP), child care or employment expenses, charitable donations amounts carried forward from the previous year). To make this request, fill out Form T1213, Request to Reduce Tax Deduction authority from your tax services office. Give the letter of authority to your employer or payer. You do not need a letter of authority from your salary.	S. and tuition and education

Personal information (including the SIN) is collected and used to administer or enforce the Income Tax Act and related programs and activities including administering tax, benefits, audit, compliance, and collection. The information collected may be disclosed to other federal, provincial, territorial, aboriginal or foreign government institutions to the extent authorized by law. Failure to provide this information may result in paying interest or penalties, or in other actions. Under the Privacy Act, individuals have a right of protection, access to and correction of their personal information, or to file a complaint with the Privacy Commissioner of Canada regarding the handling of their personal information. Refer to Personal Information Bank CRA PPU 120 on Information about Programs and Information Holdings at canada.ca/cra-information-about-programs.

To get our forms and publications, go to canada.ca/cra-forms-publications or call 1-800-959-5525.

Certification		
I certify that the information given on this form is correct and complete.		
Signature	2.1	
It is a serious offence to make a false return.	Date	2024-06-19

Forms and publications

2024 Personal Tax Credits Return

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TD1

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

Last name	First name and initial(s)	Date of birth (YYYY/MM/DD)	Employee number	ar .
Address	Mayla-May K	1994/05/26		1
E	Postal code	For non-residents only Country of permanent resider	Se Se	ocial insurance number
504 McIRCA Street	P17C21213	100000	5	614551431618
1. Basic personal amount – Every resident of Canad from all sources will be greater than \$173,205 and you return at the end of the tax year. If your income from a partial claim. To do so, fill in the appropriate section of the calculated amount here.	Il sources will be greater than Form TD1-WS, Worksheet f	re an amount owing on your inc n \$173,205 you have the option or the 2024 Personal Tax Credi	if your net income come tax and bene to calculate a ts Return, and ent	fit
2. Canada caregiver amount for infirm children und 2007 or later who lives with both parents throughout th parent who has the right to claim the "Amount for an el the child.	igible dependant" on line 8 n	ive with both parents throughou hay also claim the Canada care	it the year, the giver amount for	
3. Age amount – If you will be 65 or older on December or less, enter \$8,790. You may enter a partial amount it calculate a partial amount, fill out the line 3 section of F	orm TD1-WS.	r will be between \$44,325 and	\$102,925. To	
4. Pension income amount – If you will receive regula Pension Plan, Quebec Pension Plan, old age security, \$2,000 or your estimated annual pension income.	or guaranteed income suppli	ement payments), enter which	ever is less:	
5. Tuition (full-time and part-time) – Fill in this section certified by Employment and Social Development Canatotal tuition fees that you will pay if you are a full-time of	r part-time student	an \$100 per institution in tuition	fees. Enter the	
6. Disability amount – If you will claim the disability an Tax Credit Certificate, enter \$9,872.				
7. Spouse or common-law partner amount – Enter the or common-law partner is infirm) and your spouse's or conditions apply:	common-law partners estim	nount on line 1 (line 1 plus \$2,6 ated net income for the year if t	16 if your spouse wo of the following	3
 You are supporting your spouse or common-law pa 	rtner who lives with you			
 Your spouse or common-law partner's net income f spouse or common-law partner is infirm) 				
In all cases, go to line 9 if your spouse or common-law	partner is infirm and has a n	et income for the year of \$28,04	11 or less.	
8. Amount for an eligible dependant – Enter the differ dependant is infirm) and your eligible dependant's estir You do not have a spouse or common-law partner, who you are not supporting or being supported by	liated tiel income for the ves	r it all of the following condition		
 You are supporting the dependant who is related to 	you and lives with you			
 The dependant's net income for the year will be less you cannot claim the Canada caregiver amount for 	s than the amount on line 1 (lor infirm children under 18	years of age for this dependant	nt)	
In all cases, go to line 9 if your dependant is 18 years	or older, infirm, and has a ne	et income for the year of \$28 0	1 01 000	
year, you support an infirm eligible dependant of the year, you support an infirm eligible dependant (aged 18 the year will be \$28,041 or less. To calculate the amoun	or spouse or common-law p or older) or an infirm spous t you may enter here, fill out	partner – Fill out this section if, se or common-law partner whose the line 9 section of Form TD1	at any time in the	
18 or older (other than the spouse or common-law partriclaimed an amount for if their net income were under \$1: You may enter a partial amount if their net income for the out the line 10 section of Form TD1-WS. This worksheet with another caregiver who supports the same dependar or older.	8 or older – If, at any time in ner or eligible dependant you 5,705) whose net income for e year will be between \$19,6 may also be used to calcula nt. You may claim this amour	the year, you support an infirr claimed an amount for on line the year will be \$19,666 or less 66 and \$28,041. To calculate a te your part of the amount if you to for more than one infirm depe	n dependant age 9 or could have 5, enter \$8,375. partial amount, fill u are sharing it endant age 18	
11. Amounts transferred from your spouse or comm their age amount, pension income amount, tuition amour unused amount.	it, or disability amount on the	er income tax and benefit return	n, enter the	
12. Amounts transferred from a dependant – If your depending the transferred from a dependant – If your or your sall of their tuition amount on their income tax and benefit			come tax and child will not use	
13. TOTAL CLAIM AMOUNT – Add lines 1 to 12. Your employer or payer will use this amount to determine	The second secon			15.205

		Totected b when complet
	Filling out Form TD1 Fill out this form only if any of the following apply:	
1	You have a new employer or payer, and you will receive and your will receive and yo	
	 you have a new employer or payer, and you will receive salary, wages, commissions, pensions, employment insurance beneather the property of the p	efits,
	 you want to change the amounts you previously claimed (for example, the number of your eligible dependants has changed) you want to claim the deduction for living in a prescribed zone you want to increase the amount of tax deducted at source Sign and date it, and give it to your employer or payer. 	
	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 you cannot claim them again. If your total income from all sources will be more than the personal tax credits you claimed on a this box, enter "0" on Line 13 and do not fill in Lines 2 to 12.	another Form TD1 for 2024, 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 amount on line 1 will not deduct tax from your earnings.	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 Canada in 202 Yes (Fill out the previous page.)	24?
	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 the Form TD1 ferritory of employment if you are an employee. Use the Form TD1 for your province or territory of residence if you are a pension will use both this federal form and your most recent provincial or territorial Form TD1 to determine the amount of your tax deduction.	er. Your employer or payer
	personal amount only .	ou are claiming the basic
	Note: You may be able to claim the child amount on Form TD1SK, 2024 Saskatchewan Personal Tax Credits Return if you are supporting children under 18 at any time during 2024. Therefore, you may want to fill out Form TD1SK even if you are only cla amount on this form.	a Saskatchewan resident iming the basic personal
1	Deduction for living in a prescribed zone	
E	You may claim any of the following amounts if you live in the Northwest Territories, Nunavut, Yukon, or another prescribed norther months in a row beginning or ending in 2024: \$ \$11.00 for each day that you live in the prescribed northern zone \$ \$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 molecular intermediate zone may claim 50% of the total of the above amounts.	strand zone for more than six
	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 income from	
b	CPP or QPP benefits, or old age security pension. You may have less tax to pay when you file your income tax and benefit return form this. Enter the additional tax amount you want deducted from each payment to choose this option. You may fill out a new form TD1 to change this deduction later.	
	Reduction in tax deductions	\$
Y p a a	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 or reiriodic contributions to a registered retirement savings plan (RRSP), child care or employment expenses, charitable donations, and mounts carried forward from the previous year). To make this request, fill out Form T1213, Request to Reduce Tax Deductions at Start 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 solutions from your salary.	tuition and education
F	forms and publications	
T	o get our forms and publications, go to canada.ca/cra-forms-publications or call 1-800-959-5525.	
dr ore inc	rsonal information (including the SIN) is collected and used to administer or enforce the Income Tax Act and related programs and a ministering tax, benefits, audit, compliance, and collection. The information collected may be disclosed to other federal, provincial, to der the Privacy Act, individuals have a right of protection, access to and correction of their personal information, or to file a complain ministering for a complain the handling of their personal information. Refer to Personal Information Bank CRA PPU 120 on Ingrams and Information Holdings-at canada.ca/cra-information-about-programs.	erritorial, aboriginal or lities, or in other actions.
C	ertification	
lo	certify that the information given on this form is correct and complete.	
Si	ignature A D C Pate	
	Date	2024-06-19

It is a serious offence to make a false return.