

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 num	nber
Sitherland	ElisaJ	1973-04-22		
Address	Postal code	For non-residents only		Social insurance number
136 Cedar St. N. Timmir	5.0NP141N6 17 5	Country of permanent resider	ice	4191312141412155
Basic personal amount – Every person employed if you will have more than one employer or payer at the	n Ontario and every pension same time in 2024, see "N	ner residing in Ontario can claim More than one employer or payer	this amount. at the same tim	e ⁻ 12,399
on page 2.				12,000
 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 TD1ON-WS, Worksheet for the 2 	ill be between \$45,068 and	\$85,428 To calculate a partial a	er \$6,054. You mount, fill out the	may ne
 Pension income amount – If you will receive regular Plan, Quebec Pension Plan, Old Age Security, or Guar your estimated annual pension. 	ar pension payments from a anteed Income Supplemen	pension plan or fund (not includi t payments), enter whichever is	ng Canada Pen less: \$1,714 or	nsion
 Disability amount – If you will claim the disability and Tax Credit Certificate, enter \$10,017. 	nount on your income tax a	nd benefit return by using Form 1	[2201, Disability	,
5. Spouse or common-law partner amount – Enter \$ the following conditions apply:	10,528 if you are supporting	g your spouse or common-law pa	artner and both	of
 Your spouse or common-law partner lives with you 				
 Your spouse or common-law partner's net income 	for the year will be \$1,053 of	or less		
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 \$	1,053 and \$11,5	581.
6. Amount for an eligible dependant – Enter \$10,528 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 a	ind
· The dependant is related to you and lives with you				
 The dependant's net income for the year will be \$1, 	053 or less			
You may enter a partial amount if the eligible dependant partial amount, fill out the line 6 section of Form TD10N	it's net income for the year I-WS.	will be between \$1,053 and \$11,5	81. To calculate	e a
7. Ontario caregiver amount - You may claim this am	ount if you are supporting a	an eligible infirm dependant aged	18 or older:	
· your child or your grandchild (or your spouse or cor	mmon-law partner);			
 your parent, grandparent, brother, sister, aunt, unci partner) 	e, niece or nephew who is	resident in Canada (or your spou	se or common-la	aw
To calculate this amount, fill out the line 7 section of For	m TD10N-WS.			
8. Amounts transferred from your spouse or commo age amount, pension income amount, or disability amount.	on-law partner – If your sp unt on their income tax and	ouse or common-law partner will benefit return, enter the unused a	not use all of the amount.	eir
 Amounts transferred from a dependant – If your debenefit return, enter the unused amount. 	ependant will not use all of	their disability amount on their inc	ome 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.		(F)

Protected b when complete
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.
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 2024, 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.

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.

Programs and Information Holdings at canada.ca/cra-information-about-programs.	ation bank Cron Pro 120 Cil	inomation about
Certification		
I certify that the information given on this form is correct and complete.		
Signature	Date	2024-08-06

Forms and publications