

Protected B when completed



Canada Revenue
Agency

Agence du revenu
du Canada

T1 GENERAL 2014

Income Tax and Benefit Return

Identification

BC **7**

First name and initial

Don

Last name

Gerein

Mailing address: Apt No – Street No Street name

3022 Dunster Road

PO Box

RR

City

Kelowna

Prov./Terr.

BC

Postal code

V1W 4H3

I understand that by providing an email address, I am **registering** for online mail and I **accept the terms and conditions** on page 10 of the guide.

Enter an email address:

Information about you

Enter your social insurance
number (SIN):

712 804 533

Year Month Day

Enter your date of birth:

1951-10-30

Your language of correspondence:

English

Français

Votre langue de correspondance :

☒

☐

Is this return for a deceased person?

If this **return** is for a **deceased**
person, enter the date of death:

Year Month Day

Marital status

Tick the box that applies to your marital status on
December 31, 2014:

1 ☐

Married

2 ☒

Living common-law

3 ☐

Widowed

4 ☐

Divorced

5 ☐

Separated

6 ☐

Single

Information about your spouse or common-law partner (if you ticked box 1 or 2 above)

Enter his or her SIN:

622 054 781

Enter his or her first name: Karen

Enter his or her net income for 2014
to claim certain credits:

7,249|10

Enter the amount of universal child care
benefit (UCCB) from line 117 of his or her return:

Enter the amount of UCCB repayment
from line 213 of his or her return:

Tick this box if he or she was self-employed in 2014:

1 ☒

Information about your residence

Enter your province or territory of
residence on **December 31, 2014**:

British Columbia

Enter the province or territory where
you **currently** reside if it is not the
same as your mailing address above:

If you were self-employed in 2014,
enter the province or territory of
self-employment:

British Columbia

If you **became** or **ceased** to be a **resident of Canada** for income tax
purposes in **2014**, enter the date of:

entry Month Day or departure Month Day

Residency information for tax administration agreements

For more information, see Information Sheet T1-BC10(E), *Residency information for tax administration agreements*,
included in this package.

Did you reside within **Nisga'a Lands** on December 31, 2014?

Yes ☐ 1 No ☒ 2

If **yes**, are you a citizen of the **Nisga'a Nation**?

Yes ☐ 1 No ☐ 2



Elections Canada (see the Elections Canada page in the tax guide for details or visit www.elections.ca)

A) Are you a Canadian citizen?

Yes ☒ 1 No ☐ 2

Answer the following question **only** if you are a **Canadian citizen**.

B) As a Canadian citizen, do you authorize the Canada Revenue Agency to give your name, address, date of birth,
and citizenship to Elections Canada to update the National Register of Electors?

Yes ☒ 1 No ☐ 2

Your authorization is valid until you file your next return. Your information will only be used for purposes permitted under the *Canada
Elections Act*, which include sharing the information with provincial/territorial election agencies, members of Parliament, and registered
political parties, as well as candidates at election time.

Do not use
this area

172

171

Please answer the following question:

Did you own or hold foreign property at any time in 2014 with a total cost of more than CAN\$100,000? See "Foreign income" in the guide for more information.

266 Yes ☐ 1 No ☒ 2

If **yes**, complete Form T1135 and attach it to your return.

If you had dealings with a non-resident trust or corporation in 2014, see "Foreign income" in the guide.

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

Total income

Employment income (box 14 of all T4 slips)		101		
Commissions included on line 101 (box 42 of all T4 slips)	102			
Wage loss replacement contributions (see line 101 in the guide)	103			
Other employment income		104		
Old age security pension (box 18 of the T4A(OAS) slip)		113		
CPP or QPP benefits (box 20 of the T4A(P) slip)		114	6,786	12
Disability benefits included on line 114 (box 16 of the T4A(P) slip)	152			
Other pensions and superannuation		115		
Elected split-pension amount (attach Form T1032)		116		
Universal child care benefit (UCCB)		117		
UCCB amount designated to a dependant	185			
Employment insurance and other benefits (box 14 of the T4E slip)		119		
Taxable amount of dividends (eligible and other than eligible) from taxable Canadian corporations (attach Schedule 4)		120	97,910	80
Taxable amount of dividends other than eligible dividends, included on line 120, from taxable Canadian corporations	180	73,686	28	
Interest and other investment income (attach Schedule 4)		121	0	59
Net partnership income: limited or non-active partners only		122		
Registered disability savings plan income		125		
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				
Business income	Gross 162		Net 135	
Professional income	Gross 164		Net 137	
Commission income	Gross 166		Net 139	
Farming income	Gross 168	5,700	00 Section 31	Net 141
Fishing income	Gross 170			Net 143
Workers' compensation benefits (box 10 of the T5007 slip)	144			
Social assistance payments	145			
Net federal supplements (box 21 of the T4A(OAS) slip)	146			
Add lines 144, 145, and 146 (see line 250 in the guide).			147	
Add lines 101, 104 to 143, and 147.		This is your total income. 150	101,646	20

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.

150 101,646 20

Pension adjustment

(box 52 of all T4 slips and box 034 of all T4A slips)

206

Registered pension plan deduction (box 20 of all T4 slips and box 032 of all T4A slips)

207

RRSP/pooled registered pension plan (PRPP) deduction

(see Schedule 7, and **attach** receipts)

208

PRPP **employer** contributions

(amount from your PRPP contribution receipts)

205

Deduction for elected split-pension amount (**attach** Form T1032)

210

Annual union, professional, or like dues (box 44 of all T4 slips, and receipts)

212

Universal child care benefit repayment (box 12 of all RC62 slips)

213

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 or Form RC381, whichever applies)

222

Exploration and development expenses (**attach** Form T1229)

224

Other employment expenses

229

Clergy residence deduction

231

Other deductions

Specify:

232

Add lines 207, 208, 210 to 224, 229, 231, and 232.

233

Line 150 minus line 233 (if negative, enter "0")

This is your **net income before adjustments**.

234 101,646 20

Social benefits repayment (if you reported income on line 113, 119, or 146, see line 235 in the guide).

Use the federal worksheet to calculate your repayment.

235

Line 234 minus line 235 (if negative, enter "0")

This is your **net income**.

236 101,646 20

Taxable income

Canadian Forces personnel and police deduction (box 43 of all T4 slips)

244

Employee home relocation loan deduction (box 37 of all T4 slips)

248

Security options deductions

249

Other payments deduction

(if you reported income on line 147, see line 250 in the guide)

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

Additional deductions

Specify:

256

Add lines 244 to 256.

257

Line 236 minus line 257 (if negative, enter "0")

This is your **taxable income**.

260 101,646 20

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: enter the amount from line 66 of Schedule 1 (attach Schedule 1, even if the result is "0")	420	5,824	73
CPP contributions payable on self-employment and other earnings (attach Schedule 8 or Form RC381, whichever applies)	421		
Employment insurance premiums payable on self-employment and other eligible earnings (attach Schedule 13)	430		
Social benefits repayment (amount from line 235)	422		
Provincial or territorial tax (attach Form 428, even if the result is "0")	428	2,914	60
Add lines 420, 421, 430, 422, and 428.	This is your total payable.		435 8,739 33 •
Total income tax deducted	437		•
Refundable Quebec abatement	440		•
CPP overpayment (enter your excess contributions)	448		•
Employment insurance overpayment (enter your excess contributions)	450		•
Refundable medical expense supplement (use the federal worksheet)	452		•
Working income tax benefit (WITB) (attach Schedule 6)	453		•
Refund of investment tax credit (attach Form T2038(IND))	454		•
Part XII.2 trust tax credit (box 38 of all T3 slips)	456		•
Employee and partner GST/HST rebate (attach Form GST370)	457		•
Tax paid by instalments	476	199	60 •
Provincial or territorial credits (attach Form 479 if it applies)	479		•
Add lines 437 to 479.	These are your total credits.		482 199 60 ►
Line 435 minus line 482	This is your refund or balance owing.		199 60
			8,539 73

If the result is negative, you have a **refund**. If the result is positive, you have a **balance owing**.

Enter the amount below on whichever line applies.

Refund **484** | .

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

Balance owing **485** | 8,539 | 73 | .

For more information on how to make your payment, see line 485 in the guide or go to www.cra.gc.ca/payments. Your payment is due no later than April 30, 2015.

Direct deposit – Enrol or update (see line 484 in the guide)

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

To enrol for direct deposit or to update your account information, complete lines 460, 461, and 462 below.

By providing my banking information I **authorize** the Receiver General to deposit in the bank account number shown below **any amounts payable** to me by the CRA, until otherwise notified by me. I understand that this authorization will replace all of my previous direct deposit authorizations.

Branch number **460** (5 digits) Institution number **461** (3 digits) Account number **462** (maximum 12 digits)

PREPARED SOLELY FOR INCOME TAX PURPOSES WITHOUT AUDIT OR REVIEW FROM INFORMATION PROVIDED BY THE TAXPAYER. READERS ARE CAUTIONED THAT THIS STATEMENT MAY NOT BE APPROPRIATE FOR THEIR PURPOSES.

I certify that the information given on this return and in any documents attached is correct and complete and fully discloses all my income.		490 If a fee was charged for preparing this return, complete the following:	
Sign here _____ It is a serious offence to make a false return.		Name of preparer: PMF Chartered Accountants Inc.	
Telephone (250) 764-7492 Date 2015-03-30		Telephone: (250) 763-4660	
		EFILE number (if applicable): 489 N5964	

Personal information, including the social insurance number, is collected under the Income Tax Act to assess individual income tax for the federal government and the provinces and territories. It can be used for audit, compliance, or evaluation purposes and shared or verified with other federal and provincial/territorial government institutions. Failure to provide the information may result in interest payable, penalties, or other actions. Under the *Privacy Act*, individuals have a right to and shall, on request, be given access to their personal information and to request correction of it: refer to InfoSource (www.infosource.gc.ca), personal information bank CRA PPU 005.

[illegible]

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Federal Tax

Schedule 1

Complete this schedule, and **attach** a copy to your return.
For more information, see the related line in the guide.

Step 1 – Federal non-refundable tax credits

Basic personal amount	claim \$11,138	300	11,138	00	1
Age amount (if you were born in 1949 or earlier) (use the federal worksheet)	(maximum \$6,916)	301			2
Spouse or common-law partner amount (attach Schedule 5)		303	3,888	90	3
Amount for an eligible dependant (attach Schedule 5)		305			4
Amount for children born in 1997 or later					
Number of children for whom you are not claiming the family caregiver amount	366 x \$2,255 =				5
Number of children for whom you are claiming the family caregiver amount	352 x \$4,313 =				6
Add lines 5 and 6.		367			7
Amount for infirm dependants age 18 or older (attach Schedule 5)		306			8
CPP or QPP contributions:					
through employment from box 16 and box 17 of all T4 slips (attach Schedule 8 or Form RC381, whichever applies)		308			• 9
on self-employment and other earnings (attach Schedule 8 or Form RC381, whichever applies)		310			• 10
Employment insurance premiums:					
through employment from box 18 and box 55 of all T4 slips (maximum \$913.68)		312			• 11
on self-employment and other eligible earnings (attach Schedule 13)		317			• 12
Volunteer firefighters' amount		362			13
Search and rescue volunteers' amount		395			14
Canada employment amount (If you reported employment income on line 101 or line 104, see line 363 in the guide.)	(maximum \$1,127)	363			15
Public transit amount		364			16
Children's fitness amount		365			17
Children's arts amount		370			18
Home buyers' amount		369			19
Adoption expenses		313			20
Pension income amount (use the federal worksheet)	(maximum \$2,000)	314			21
Caregiver amount (attach Schedule 5)		315			22
Disability amount (for self) (claim \$7,766 or, if you were under 18 years of age, use the federal worksheet)		316			23
Disability amount transferred from a dependant (use the federal worksheet)		318			24
Interest paid on your student loans		319			25
Your tuition, education, and textbook amounts (attach Schedule 11)		323			26
Tuition, education, and textbook amounts transferred from a child		324			27
Amounts transferred from your spouse or common-law partner (attach Schedule 2)		326			28
Medical expenses for self, spouse or common-law partner, and your dependent children born in 1997 or later	330				29
Enter \$2,171 or 3% of line 236 of your return, whichever is less.					30
Line 29 minus line 30 (if negative, enter "0")					31
Allowable amount of medical expenses for other dependants (do the calculation at line 331 in the guide)	331				32
Add lines 31 and 32.		332			33
Add lines 1 to 4, 7 to 28, and line 33.		335	15,026	90	34
Federal non-refundable tax credit rate			15 %		35
Multiply line 34 by line 35.		338	2,254	04	36
Donations and gifts (attach Schedule 9)		349			37
Add lines 36 and 37.					
Enter this amount on line 50 on the next page.	Total federal non-refundable tax credits	350	2,254	04	38

Go to Step 2 on the next page.

Step 2 – Federal tax on taxable income

Enter your **taxable income** from line 260 of your return.

101,646 | 20 | 39

Complete the appropriate column depending on the amount on line 39.

Line 39 is
\$43,953 or less

Line 39 is more
than **\$43,953** but
not more than
\$87,907

Line 39 is more
than **\$87,907** but
not more than
\$136,270

Line 39 is more
than **\$136,270**

Enter the amount from line 39.

0 | 00

43,953 | 00

101,646 | 20

87,907 | 00

136,270 | 00

40

Line 40 minus line 41 (cannot be negative)

15 %

22 %

26 %

29 %

42

Multiply line 42 by line 43.

0 | 00

6,593 | 00

3,572 | 19

16,263 | 00

28,837 | 00

44

Add lines 44 and 45.

19,835 | 19

Go to Step 3.

46

Go to Step 3.

Go to Step 3.

Go to Step 3.

Step 3 – Net federal tax

Enter the amount from line 46.

19,835 | 19 | 47

Federal tax on split income (from line 5 of Form T1206)

424

• 48

Add lines 47 and 48.

404

19,835 | 19

19,835 | 19

49

Enter your total federal non-refundable tax credits from line 38 on the previous page.

350

2,254 | 04

50

Family tax cut (attach Schedule 1-A)

423

• 50A

Federal dividend tax credit

425

11,756 | 42

51

Overseas employment tax credit (attach Form T626)

426

52

Minimum tax carryover (attach Form T691)

427

• 53

Add lines 50 to 53.

14,010 | 46

14,010 | 46

54

Line 49 minus line 54 (if negative, enter "0")

Basic federal tax 429

5,824 | 73

55

Federal foreign tax credit (attach Form T2209)

405

56

Line 55 minus line 56 (if negative, enter "0")

Federal tax 406

5,824 | 73

57

Total federal political contributions (attach receipts)

409

58

Federal political contribution tax credit (use the federal worksheet)

(maximum \$650) 410

• 59

Investment tax credit (attach Form T2038(IND))

412

• 60

Labour-sponsored funds tax credit

Net cost 413

Allowable credit 414

• 61

Add lines 59, 60, and 61.

416

62

Line 57 minus line 62 (if negative, enter "0")

417

5,824 | 73

63

If you have an amount on line 48 above, see Form T1206.

Working income tax benefit advance payments received (box 10 of the RC210 slip)

415

• 64

Special taxes (see line 418 in the guide)

418

65

Add lines 63, 64, and 65.

Enter this amount on line 420 of your return.

Net federal tax 420

5,824 | 73

66

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Statement of Investment Income

Schedule 4

State the names of the payers below, and attach any information slips you received. Attach a separate sheet of paper if you need more space.
Attach a copy of this schedule to your return.

I – Taxable amount of dividends (eligible and other than eligible) from taxable Canadian corporations

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

Slip	Issuer	Taxpayer share and exchange rate	
T5	Palm Springs North Realty		73,686 28
Enter this amount on line 180 of your return.			180 73,686 28

Taxable amount of eligible dividends (specify):

Slip	Issuer	Taxpayer share and exchange rate	
T5	Palm Springs North Realty		24,224 52
Enter this amount on line 120 of your return.			120 97,910 80

II – Interest and other investment income

Specify:

Slip	Issuer	Taxpayer share and exchange rate	
T5	First West Credit Union	(0.50 x 50.00%)	0 25
T5	First West Credit Union		0 34

Income from foreign sources (specify):

Enter this amount on line 121 of your return.			121 0 59
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III – Carrying charges and interest expenses

Carrying charges (specify):

Interest expenses (specify):

Enter this amount on line 221 of your return.			221
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T1-2014

Amounts for Spouse or Common-Law Partner and Dependants

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Schedule 5

See the guide to find out if you can claim an amount on line 303, 305, 306, or 315 of Schedule 1. For each dependant claimed, provide the details requested below. **Attach a copy of this schedule to your return.**

Lines 303 and 305

Has your marital status changed in 2014? If yes, tick this box

5522

and enter the date of the change.

Month Day

Make sure you have ticked the box on page 1 of your return indicating your marital status on December 31, 2014.

Line 303 – Spouse or common-law partner amount

Base amount

11,138 00 1

If you are entitled to the family caregiver amount, enter \$2,058 (see page 35 in the guide).

5109 2

Add lines 1 and 2.

11,138 00 3

Spouse's or common-law partner's net income from page 1 of your return

7,249 10 4

Line 3 minus line 4 (if negative, enter "0").

Enter this amount on line 303 of your Schedule 1.

3,888 90 5

Line 305 – Amount for an eligible dependant

Provide the requested information and complete the following calculation for this dependant.

First and last name:	Year of birth	Relationship to you	Is this dependant physically or mentally infirm?
Address:			Yes ☐ No ☐

Base amount

If you are entitled to the family caregiver amount, enter \$2,058 (see page 35 in the guide and read the note below).

5110 2

Add lines 1 and 2.

Dependant's net income (line 236 of his or her return)

5106 4

Line 3 minus line 4 (if negative, enter "0").

Enter this amount on line 305 of your Schedule 1.

Note: If you are entitled to the family caregiver amount for this dependant and you are claiming the child amount on line 367 for the same dependant, you must claim the family caregiver amount on line 367, and not on this line.

Line 306 – Amount for an infirm dependant aged 18 or older (attach a separate sheet of paper if you need more space)

Provide the requested information and complete the following calculation for each dependant.

First and last name:	Year of birth	Relationship to you
Address:		

Base amount

Infirm dependant's net income (line 236 of his or her return)

Allowable amount for this dependant: line 1 minus line 2 (if negative, enter "0")

(maximum \$6,589)

Enter, on line 306 of your Schedule 1, the total amount you are claiming for all dependants.

Line 315 – Caregiver amount (attach a separate sheet of paper if you need more space)

Provide the requested information and complete the following calculation for each dependant.

First and last name:	Year of birth	Relationship to you	Is this dependant physically or mentally infirm?
Address:			Yes ☐ No ☐

Base amount

If you are entitled to the family caregiver amount, enter \$2,058 (see page 35 in the guide and complete box 5112 below).

Add lines 1 and 2.

Dependant's net income (line 236 of his or her return)

Line 3 minus line 4 (if negative, enter "0"). If you are entitled to the family caregiver amount on line 2, the maximum amount is \$6,588. If not, the maximum is \$4,530.

If you claimed this dependant on line 305 of Schedule 1, enter the amount you claimed.

Allowable amount for this dependant: line 5 minus line 6 (if negative, enter "0")

Enter, on line 315 of your Schedule 1, the total amount you are claiming for all dependants.

Enter the total number of dependants for whom you entered \$2,058 on line 2 for this calculation.

5112

See the privacy notice on your return.

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British Columbia Tax

BC428
T1 General – 2014

Complete this form and **attach a copy** to your return. For more information, see the related line in the forms book.

Step 1 – British Columbia non-refundable tax credits

		For internal use only	5609			
Basic personal amount		claim \$9,869	5804	9,869	00	1
Age amount (if born in 1949 or earlier) (use the <i>Provincial Worksheet</i>)		(maximum \$4,426)	5808			2
Spouse or common-law partner amount						
Base amount	9,295	00				
Minus: his or her net income from page 1 of your return	7,249	10				
Result: (if negative, enter "0")	2,045	90	(maximum \$8,450) ▶	5812	2,045	90 3
Amount for an eligible dependant						
Base amount						
Minus: his or her net income from line 236 of his or her return						
Result: (if negative, enter "0")			(maximum \$8,450) ▶	5816		4
Amount for infirm dependants age 18 or older (use the <i>Provincial Worksheet</i>)			5820			5
CPP or QPP contributions:						
(amount from line 308 of your federal Schedule 1)			5824			• 6
(amount from line 310 of your federal Schedule 1)			5828			• 7
Employment insurance premiums:						
(amount from line 312 of your federal Schedule 1)			5832			• 8
(amount from line 317 of your federal Schedule 1)			5829			• 9
Adoption expenses (amount from line 313 of your federal Schedule 1)			5833			10
Children's fitness amount			5838			11
Children's arts amount (amount from line 370 of your federal Schedule 1)			5841			12
Pension income amount		(maximum \$1,000)	5836			13
Caregiver amount (use the <i>Provincial Worksheet</i>)			5840			14
Disability amount (for self) (Claim \$7,402 or, if you were under 18 years of age, use the <i>Provincial Worksheet</i> .)			5844			15
Disability amount transferred from a dependant (use the <i>Provincial Worksheet</i>)			5848			16
Interest paid on your student loans (amount from line 319 of your federal Schedule 1)			5852			17
Your tuition and education amounts [use and attach Schedule BC(S11)]			5856			18
Tuition and education amounts transferred from a child			5860			19
Amounts transferred from your spouse or common-law partner [use and attach Schedule BC(S2)]			5864			20
Medical expenses:						
Amount from line 330 of your federal Schedule 1	5868			21		
Enter \$2,052 or 3% of net income from line 236 of your return, whichever is less.				22		
Line 21 minus line 22 (if negative, enter "0")				23		
Allowable amount of medical expenses for other dependants (use the <i>Provincial Worksheet</i>)	5872			24		
Add lines 23 and 24.	5876		▶			25
Add lines 1 to 20, and line 25.			5880	11,914	90	26
British Columbia non-refundable tax credit rate				5.06%		27
Multiply line 26 by line 27.			5884	602	89	28
Donations and gifts:						
Amount from line 345 of your federal Schedule 9	x 5.06% =			29		
Amount from line 347 of your federal Schedule 9	x 14.7% =			30		
Add lines 29 and 30.	5896		▶			31
Add lines 28 and 31.						
Enter this amount on line 44.	British Columbia non-refundable tax credits	6150		602	89	32

Go to Step 2 on the next page.

Step 2 – British Columbia tax on taxable income

Enter your **taxable income** from line 260 of your return.

101,646 20 33

Complete the appropriate column depending on the amount on line 33.

Enter the amount from line 33.

Line 34 minus line 35 (cannot be negative)

Multiply line 36 by line 37.

Add lines 38 and 39.
Go to Step 3.

Line 33 is \$37,606 or less	Line 33 is more than \$37,606 but not more than \$75,213	Line 33 is more than \$75,213 but not more than \$86,354	Line 33 is more than \$86,354 but not more than \$104,858	Line 33 is more than \$104,858 but not more than \$150,000	Line 33 is more than \$150,000
0 00	37,606 00	75,213 00	86,354 00	104,858 00	150,000 00
5.06 %	7.7 %	10.5 %	12.29 %	14.7 %	16.8 %
0 00	1,903 00	4,799 00	5,969 00	8,243 00	14,879 00
			7,848 41		

34
35
36
37
38
39
40

Step 3 – British Columbia tax

Enter your British Columbia tax on taxable income from line 40.

7,848 41 41

Enter your British Columbia tax on split income from Form T1206.

6151 • 42

Add lines 41 and 42.

7,848 41 43

Enter your British Columbia non-refundable tax credits from line 32.

602 89 44

British Columbia dividend tax credit:

Credit calculated for line 6152 on the *Provincial Worksheet*

6152 4,330 92 • 45

British Columbia overseas employment tax credit:

Amount calculated for line 46 on the *Provincial Worksheet*

6153 • 46

British Columbia minimum tax carryover:

Amount from line 427 of your federal Schedule 1

x 33.7% = 6154 • 47

Add lines 44 to 47.

4,933 81 48

Line 43 minus line 48 (if negative, enter "0")

2,914 60 49

British Columbia additional tax for minimum tax purposes:

Amount from line 117 of Form T691

x 33.7% =

50

Add lines 49 and 50.

2,914 60 51

Provincial foreign tax credit from Form T2036

52

Line 51 minus line 52 (if negative, enter "0")

2,914 60 53

BC tax reduction

If your net income (line 236 of your return) is **less than \$30,981**, complete the following calculation.
Otherwise, enter "0" on line 60 and continue on line 61.

Basic reduction

claim \$409 409 00 54

Enter your net income from line 236 of your return.

101,646 20 55

Base amount

18,200 00 56

Line 55 minus line 56 (if negative, enter "0")

83,446 20 57

Applicable rate

3.2 % 58

Multiply line 57 by line 58.

2,670 28 59

Line 54 minus line 59 (if negative, enter "0")

60

Line 53 minus line 60 (if negative, enter "0")

2,914 60 61

Logging tax credit from Form FIN 542S or Form FIN 542P

62

Line 61 minus line 62 (if negative, enter "0")

2,914 60 63

Continue on the next page.

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BC428 – Page 3

Step 3 – British Columbia tax (continued)

Enter the amount from line 63 on the previous page.

2,914|60 64

British Columbia political contribution tax credit

Enter your British Columbia political contributions made in 2014.

6040

65

Credit calculated for line 66 on the *Provincial Worksheet*

(maximum \$500)

66

Line 64 minus line 66 (if negative, enter "0")

2,914|60 67

British Columbia employee investment tax credits

Enter your employee share ownership plan tax credit from Certificate ESOP 20.

6045

• 68

Enter your employee venture capital tax credit from Certificate EVCC 30.

6047

• 69

Add lines 68 and 69.

(maximum \$2,000)

▶

70

Line 67 minus line 70 (if negative, enter "0")

2,914|60 71

British Columbia mining flow-through share tax credit

Enter the tax credit amount calculated on Form T1231.

6881

• 72

Line 71 minus line 72 (if negative, enter "0")

Enter the result on line 428 of your return.

British Columbia tax

2,914|60 73

See the privacy notice on your return.

Provincial Worksheet

Line 6152 – British Columbia dividend tax credit

Calculate the amount to enter on line 6152 of Form BC428 by completing **one** of the **two** following calculations:

- If you entered an amount on line 120 but **no** amount on line 180 of your return, complete the following:

Line 120 of your return			x	10.00 %	=		
-------------------------	--	--	---	---------	---	--	--

Enter this amount on line 6152 of Form BC428.

- If you entered amounts on lines 180 **and** 120 of your return, complete the following:

Line 120 of your return		97,910	80	1					
Line 180 of your return	-	73,686	28	2	x	2.59 %	=	1,908	47 4
Line 1 minus line 2	=	24,224	52	3	x	10.00 %	=	2,422	45 5
Add lines 4 and 5.							=	4,330	92 6

Enter this amount on line 6152 of Form BC428.

Statement of Farming Activities

• For more information on how to complete this form, see Guide T4003, *Farming Income*.

Identification			
Your name Don Gerein		Your Social insurance number 712 804 533	
Farm name Farm		Program account number (15 characters)	
Farm address 3022 Dunster Road			
City Kelowna		Province or territory	Postal code V1W 4H3
Fiscal period From: 2014-01-01 to: 2014-12-31	Year Month Day		Was 2014 your last year of farming? ☐ Yes ☒ No
Main product or service		Industry code (see Chapter 2 of Guide T4003) 111993	
Accounting method ☒ Cash ☐ Accrual	Tax shelter identification number	Partnership business number (9 digits)	Your percentage of the partnership 50.00 %
Name and address of person or firm preparing this form PMF Chartered Accountants Inc. 1353 Ellis Street Suite 206 Kelowna BC V1Y 1Z9			

Internet business activities
How many Internet webpages and websites does your business earn income from? Enter "0" if none. _____
Provide the main webpage or site address(es) (also known as URL address(es)):
http:// _____
http:// _____
http:// _____
http:// _____
http:// _____
Percentage of your gross income generated from the webpages and websites. (If no gross income was generated from the Internet, enter "0") _____ %

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Income

Income – from box 124 of the T5013 slip		
Wheat	9371	
Oats	9372	
Barley	9373	
Mixed grains	9374	
Corn	9375	
Canola	9376	
Flaxseed	9377	
Soybeans	9378	
Other grains and oilseeds	9370	
Fruit	9421	5,700 00
Potatoes	9422	
Vegetables (not including potatoes)	9423	
Tobacco	9424	
Other crops	9420	
Greenhouse and nursery products	9425	
Forage crops or seeds	9426	
Livestock sold		
Cattle	9471	
Swine	9472	
Poultry	9473	
Sheep and lambs	9474	
Other animal specialties	9470	
Milk and Cream (not including dairy subsidies)	9476	
Eggs	9477	
Other commodities	9520	
Program payments		
Dairy subsidies	9541	
Crop insurance	9542	
Other payments	9540	
Rebates	9570	
Custom or contract work, and machine rentals	9601	
Insurance proceeds	9604	
Patronage dividends	9605	
Other income (specify)		
Total other income	9600	
Gross income – Total of above lines (enter this amount on line 168 of your income tax and benefit return)		
	9659	5,700 00 a

Protected B when completed

Net income (loss) before adjustments

Expenses (enter "business part" only)

Containers and twine	9661		
Fertilizers and lime	9662	672	00
Pesticides (herbicides, insecticides, fungicides)	9663		
Seeds and plants	9664		
Feed, supplements, straw, and bedding	9711		
Livestock bought	9712		
Veterinary fees, medicine, and breeding fees	9713		
Machinery expenses			
Repairs, licences, and insurance	9760	2,470	00
Gasoline, diesel fuel, and oil	9764	432	00
Building and fence repairs	9795	3,240	00
Clearing, levelling, and draining land	9796		
Crop insurance	9797		
Custom or contract work, and machinery rental	9798		
Electricity	9799	660	00
Heating fuel	9802		
Insurance program overpayment recapture	9803		
Insurance	9804		
Interest	9805		
Office expenses	9808		
Legal and accounting fees	9809		
Property taxes	9810	1,471	00
Rent (land, buildings, and pasture)	9811		
Salaries, wages, and benefits (including employer's contributions)	9814		
Motor vehicle expenses (not including CCA)	9819		
Small tools	9820		
Mandatory inventory adjustment included in 2013	9937		
Optional inventory adjustment included in 2013	9938		
Other expenses			
Irrigation		600	00
Supplies		792	00
R&M		590	00
Total other expenses	9790	1,982	00
			1,982 00
			10,927 00
Subtotal of expenses			
Allowance on eligible capital property	9935		
Capital cost allowance (amount from Area A)	9936	1,978	21
Total farm expenses (total of the above three lines)	9898	12,905	21
Net income (loss) before inventory adjustments (amount a minus amount b)			12,905 21
Optional inventory adjustment included in 2014	9899	-7,205	21
Mandatory inventory adjustment included in 2014	9941		
	9942		
Net income (loss) after inventory adjustments (total of the above three lines)			-7,205 21

Your net income (loss)

Your share of the amount on line c		-3,602	61	d
Plus: GST/HST rebate for partners received in the year	9974			
Total (amount d plus line 9974)		-3,602	61	e
Minus: Other amounts deductible from your share of net partnership income (loss)	9943			f
Net income (loss) after adjustments (amount e minus amount f)		-3,602	61	g
Minus: Business-use-of-home expenses	9945			
Your net income (loss) (amount g minus line 9945) (enter this amount on line 141 of your income tax and benefit return)	9946	-3,602	61	

Business use of motor vehicle	
Meals and entertainment	
Private health services plan premiums	
Total (enter this amount on line f)	

Calculating business-use-of-home expenses

Heat		
Electricity		
Insurance		
Maintenance		
Mortgage interest		
Property taxes		
Other expenses (specify)		
	Subtotal	
Minus: Personal-use part		
	Subtotal	
Plus:		
Capital cost allowance (business part only)		
Amount carried forward from previous year		
	Subtotal	1
Minus: Net income (loss) after adjustments (from line g) – If negative, enter "0".		2
Business-use-of-home expenses available to carry forward (line 1 minus line 2) – if negative, enter "0"		
Allowable claim (the lesser of amount 1 and 2 above) – enter your share of this amount on line 9945		

Details of other partners

Name of partner Karen Mellor				
Address	Province or territory	Postal code	Share of net income or (loss) \$ -3,602 61	Percentage of partnership 50.00 %
Name of partner				
Address	Province or territory	Postal code	Share of net income or (loss) \$	Percentage of partnership %
Name of partner				
Address	Province or territory	Postal code	Share of net income or (loss) \$	Percentage of partnership %
Name of partner				
Address	Province or territory	Postal code	Share of net income or (loss) \$	Percentage of partnership %
Name of partner				
Address	Province or territory	Postal code	Share of net income or (loss) \$	Percentage of partnership %
Name of partner				

Protected B when completed

Details of equity

Total business liabilities	9931	
Drawings in 2014	9932	
Capital contributions in 2014	9933	

Area A – Calculating capital cost allowance (CCA)

CCA other than classes 10.1 and 13

1 Class number	2 Undepreciated capital cost (UCC) at the start of the year	3 Amount to be subtracted	4 Cost of additions in the year	5 Proceeds of dispositions in the year	6 Base amount for CCA	7 Rate (%)	8 CCA for the year (col. 6 multiplied by col. 7 or an adjusted amount)	9 UCC at the end of the year
8	9,891 07				9,891 07	20.00	1,978 21	7,912 86

Total CCA for classes other than 10.1 and 13. ► 1,978|21 i

Total capital cost allowance (Part XI Method) included on line 9936 ► 1,978|21

Area B – Details of equipment additions in the year

1 Class number	2 Property description	3 Total cost	4 Personal part (if applicable)	5 Business part (column 3 minus column 4)
Total equipment additions in the year 9925				

Area C – Details of building additions in the year

1 Class number	2 Property description	3 Total cost	4 Personal part (if applicable)	5 Business part (column 3 minus column 4)
Total building additions in the year 9927				

Area D – Details of equipment dispositions in the year

1 Class number	2 Property description	3 Proceeds of disposition	4 Personal part (if applicable)	5 Business part (column 3 minus column 4)
Total equipment dispositions in the year 9926				

Area E – Details of building dispositions in the year

1 Class number	2 Property description	3 Proceeds of disposition	4 Personal part (if applicable)	5 Business part (column 3 minus column 4)
Total building dispositions in the year 9928				

Area F – Details of land additions and dispositions in the year

Total cost of all land additions in the year	9923	
Total proceeds from all land dispositions in the year	9924	

Area G – Details of quota additions and dispositions in the year

Total cost of all quota additions in the year	9929	
Total proceeds from all quota dispositions in the year	9930	

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Statement of Restricted Farm Losses

Part 1 – Restricted farm losses in 2014

The lesser of

Net loss (loss - income) from all farming business		3,602	61	1
2,500 + 1/2 (line 1)	3,602	61	- 2,500)	2
Maximum farm losses deductible (Note)		17,500	00	3
	Farming losses deductible	3,051	31	4

Note

For taxation years ending:

- before March 21, 2013, the maximum deductible in accordance with restricted farm losses is \$8,750;
- on or after March 21, 2013, the maximum deductible in accordance with restricted farm losses is \$17,500.

Part 2 – Restricted farm loss for carry back

Net loss (loss - income) from all farming business			3,602	61	5
Farming losses deductible (amount of line 4)		-	3,051	31	6
	Restricted farm losses available for carry back	=	551	30	7
Restricted farm loss to be applied to 2011					
Restricted farm loss to be applied to 2012	+				
Restricted farm loss to be applied to 2013	+				
	Subtotal (must not exceed the amount of line 7)	=			8
	Balance of restricted farm loss available for carry forward	=	551	30	9

Five-Year Comparative Review – Federal – 2014

Income	2014	2013	2012	2011	2010
114. CPP/QPP benefits	6,786	6,726	6,607	1,071	
120. Taxable dividends	97,911	100,000	86,875	100,000	192,500
121. Interest and other investment income	1	1			
135. Business					-3,271
141. Farming	-3,051	-2,609	-1,577	-2,504	
150. Total income	101,646	104,118	91,905	98,567	189,229
Deductions					
236. Net income	101,646	104,118	91,905	98,567	189,229
Deductions from net income					
260. Taxable income	101,646	104,118	91,905	98,567	189,229
Non-refundable tax credits					
300. Basic amount	11,138	11,038	10,822	10,527	10,382
303. Spousal amount	3,889				
335. Total amounts	15,027	11,038	10,822	10,527	10,382
338. Credits	2,254	1,656	1,623	1,579	1,557
350. Total non-refundable tax credits	2,254	1,656	1,623	1,579	1,557
Federal taxes					
404. Tax on taxable income	19,835	20,537	17,490	19,395	44,920
425. Dividend tax credit	11,756	13,333	11,583	13,333	25,667
350. Non-refundable tax credits	2,254	1,656	1,623	1,579	1,557
429. Basic federal tax	5,825	5,548	4,283	4,483	17,696
406. Federal tax	5,825	5,548	4,283	4,483	17,696
420. Net federal tax payable	5,825	5,548	4,283	4,483	17,696
Provincial					
Tax on taxable income	7,848	8,157	6,724	3,688	13,876
Non-refundable tax credits	603	520	575		
Dividend tax credit	4,331	3,400	2,954		
428. Net provincial tax	2,915	4,237	3,195	3,688	13,876
435. Total payable	8,739	9,784	7,478	8,171	31,572
Credits					
476. Instalments	200				
482. Total credits	200				
Balance due/refund (-)	8,540	9,784	7,478	8,171	31,572
Miscellaneous information					
Average tax rate					
Average tax rate	8.60 %	9.40 %	8.14 %	8.29 %	16.68 %
Header for special tax returns:					