Estimated Calculation for the Solidarity Tax Credit

(July 1, 2016 to June 30, 2017)

You can apply for the solidarity tax credit if, on December 31, 2015 the following requirements are met:

- 18 or older (subject to certain exceptions)
- Resident in Québec
- Hold a recognized status (ex. Canadian citizen, permanent resident or protected person)

Not confined to a prison of similar institution			
Net family income			
Amount from line 275 of your return			<u> 18,880 00</u> 1
Amount from line 275 of your spouse's return		+	2
Add lines 1 and 2.	Family income	=	18,880 <u>00</u> 3
Basic amount			33,685 00 4
Subtract line 4 from line 3.			
If the result is negative, enter 0.	Net family income	=	0 00 5
Estimation of the coloulation of the Coliderity tay are dit			
Estimation of the calculation of the Solidarity tax credit			
A - Component related to QST	F::4-:: \$000		000 00 0
Basic amount	Enter \$283		283 00 6
Amount for spouse Amount if you are the only person in your dwelling to meet the eligibility requirements	Enter \$283 s for the credit. Enter \$135	+	135 00 8
• • • • • • • • • • • • • • • • • • • •	QST component	^ ᡛ	418 00 9
Add lines 6 through 8.	<u> QST component</u>	A E	418 00 9
B - Component related to housing			
If the taxpayer lives in an eligible dwelling, one of the following situations:			1
Of which he or she is the owner, lessee or sublessee and in which no other person usually live			
either the taxpayer's cohabiting spouse or an eligible individual who is the owner, lessee or su	ublessee of		
the dwelling, enter \$548 on line 10. Of which the taxpayer, or his or her cohabiting spouse with whom the taxpayer usually lives a	at that time		
is the owner, lessee or sublessee and in which no other eligible individual who is the owner, lessee or sublessee and in which no other eligible individual who is the owner, lessee or sublessee and in which no other eligible individual who is the owner, lessee or sublessee and in which no other eligible individual who is the owner, lessee or sublessee and in which no other eligible individual who is the owner, lessee or sublessee and in which no other eligible individual who is the owner.			
sublessee ordinarily lives, enter \$665 on line 10.			
• Of which he or she is the owner, lessee or sublessee together with one or several other person	ons who also		
usually live in the dwelling, enter an amount equal to that obtained after dividing \$665 by the	number of		
persons usually living in the dwelling of which they are owners, lessees or sublessees.	\$665 ÷		<u>548 00</u> 10
Amount for children:			
Number of children living with you without shared custody	x \$117	<u>+</u>	11
Number of children living with you with shared custody	x \$117 x 50%		12
Add lines 10 through 12.	Housing component	8 <u>⊨</u>	548 00 13
C - Component related to individuals living in a northern village			
Principal residence of the taxpayer located in a northern village	Enter \$1,664		14
Principal residence of the spouse located in a northern village	Enter \$1,664	+	15
Amount for children:			
Number of children living with you without shared custody	x \$360	+	16
Number of children living with you with shared custody	x \$360 x 50%	<u>+</u>	17
Add lines 14 through 17.			
Component for individu	<u>ıals living in nortern villages</u> (≎ ೬	18
Add lines 9, 13, and 18. Total of the component	its of the solidarity tax credit	=	966 00 19
		_	
Reduction based on family income			
Net family income (amount from line 5)	:	20	
Reduction rate of 6 %, unless the individual is entitled to only one of the three compo	onents		
of the solidarity tax credit, in which case the reduction rate is equal to 3 %.	<u>× 6%</u> 2	21	1
Amount from line 20 multiplied by rate on line 21.		▶	22
Subtract line 22 from line 19.	Solidarity tax credit amount	=	966 00 23
— Doymont of the Caliderity tax and t			
Payment of the Solidarity tax credit	or of managements will decrease at the		t = f
Payments of the tax credit are made in the first five days of the month. The frequency	y or payments will depend on th	ie amou	IN OT

the credit determined for the payment period. Accordingly, if the amount determined for the payment period is:

- \$800 or more, you will receive monthly payments of the tax credit for each month of the payment period;
- more than \$240 but less than \$800, you will receive quarterly payments (July and October 2016, January and April 2017);
- \$240 or less, you will receive a single payment of the tax credit in July 2016.

July 2016	80 50 Augu	ust 2016 80 50	September 2016	80 50	October 2016	80 50	November 2016	80 50	December 2016	80	50
January 2017	80 50 Febr	ruary 2017 <u>80</u> 50	March 2017 _	80 50	April 2017	80 50	May 2017	80 50	June 2017	80	<u>50</u>

INCOME TAX RETURN

TP-1.D-V

Authorization number RQ15-TP54

Infor	mation	about	you

(see page 16 in the guide) Use blue or black ink.

	Last name	
1	STUDENT	
	First name	Date of birth
2	INCOME	6 1995-01-01
3	If this is your first Québec income tax return, check this box.	
	· · · · · · · · · · · · · · · · · · ·	anguage of communication
4		this is your first Québec income tax return): 1 French 2 X English
	Apartment Street number Street name, P.O. box	
7	123 ANY STREET	
	City, town or municipality	Province Postal code
8	MONTREAL	QC 9 H3E 1J6
11	Social insurance number 123 456 789	If you entered a date on line 18, enter the income you earned while you were not resident in Canada. 19 If you did not earn any income, enter 0. 0 00
	Your situation on December 31, 2015 (see the definition of "spouse on December 31, 2015" at line 12 in the guide)	
12	1 X You did not have a spouse.2 You had a spouse.	Date of bankruptcy Period covered by the return: (where applicable) 1 before the bankruptcy
	If your situation (line 12)	21 2015 2
	has changed since 2014,	Election concerning the calculation of QPP contributions on income from self-employment (if you checked box 1). See the guide.
13	enter the date of the change. 201	from self-employment (if you checked box 1). See the guide.
17	If, on December 31, 2015, you were not resident in Québec, state where (prov., terr. or country) you were resident.	If you are the beneficiary of a designated trust, refer to the guide.
18	If you were resident in Canada for only part of the year, enter your date of arrival: your date of departure: 2015-01-01 20	If the above information concerns a deceased person, 20 enter the date of death. 201
	Reason for your arrival or departure (see the guide) 03	office the date of death.
Inf	ormation about your spouse on Decemb	per 31, 2015
	Last name	If your spouse earned income
31		from self-employment or
	First name	received an RL-29 slip,
32		check this box.
36	Date of birth	Your spouse's net income (see the guide). If your spouse 51 had no income, enter 0.
	If your spouse died in 2015,	
37	enter the date of death. 2015	If, on December 31, your spouse was not resident in Québec, state where (prov., terr. or country)
41	Social insurance number	he or she was resident.
	Solidarity	tax credit

Complete Schedule D to claim the solidarity tax credit. Certain conditions apply. See page 18 in the guide.

Add lines 256 and 260.

If the result is negative, enter 0. Carry the result to page 3.

Total income													
If you held employment outside Canada, check thi	s box.						94						
If you held employment in Canada, outside Québe								95					
CPP contribution 96	1		QPP contribu	ition RI-1	elir	hov	R			98		866	25
Pensionable earnings (CPP) 96.1			Pensionable :					slin ha	x G	98.	\dashv \vdash	20,000	
QPIP premium, <i>RL-1 slip, box H</i> 97	111	80	Taxable bene						. 0	00.	1	20,000	00
Commissions received, <i>RL-1 slip, box M</i> 100			on which no							102	<u>. </u>		
Commissions reserved, RE 7 shp, box W			OTT WITHOUT THE C	QI I OOIIII	Dut	ion we	do withinoic						
Employment income, RL-1 slip, box A										1	01	20,00	00
Correction of employment income, if you received a	n RL-22 slip (Wo	rk cha	rt 105)							+ 1	05		
Other employment income (see the guide)			•			s	pecify:	106) .	+ 1	07		
Parental insurance benefits, RL-6 slip, box A										+ 1	10		
Employment Insurance benefits, T4E slip										+ 1	11		
Old Age Security pension, T4A(OAS) slip										+ 1	14		
QPP or CPP benefits, RL-2 slip, box C										+ 1	19		
Payments from a pension plan, an RRSP, a RRIF,	a DPSP or a PRP	P/VR	SP, or annuitie	es						+ 1	22		
Retirement income transferred by your spouse (see	the guide)									+ 1	23		
Dividends from taxable Actual a	mount of eligible of	divide	nds 166									1	
	nount of ordinary o						Taxa	ble amo	ount -	+ 1	28		
Interest and other investment income	•										30		
Rental income. Attach form TP-128-V or your finance	cial statements.												
,		s inco	me 168					Net inco	ome ·	+ 1	36		
											39		
Support payments received (taxable amount). See										+ 1	42		
Social assistance payments, RL-5 slip, box A, and	-	ssista	nce, <i>RL-5 slip</i> ,	box B						+ 1	47		
								+ 1	48				
Other income (see the guide)						s	pecify:	153		+ 1	54		
Business income. Complete Schedule L.								Net inco	ome ·	+ 1	64		
Add lines 101 and 105 through 164.							То	tal inco	ome	= 1	99	20,00	00 00
Net income													
Deduction for workers (see the guide)						201		1,120	00				
Registered pension plan (RPP) deduction, RL-1 slip	o, box D				+	205							
Employment expenses and deductions			Specify:	206	+	207							
RRSP or PRPP/VRSP deduction	HBP or LLP		212]+	214							
Support payments made (deductible amount). See	the guide.			·	_	•		,					
Recipient's social insul	-	224			7								
·	Support paym	ents r	nade (deductik	ole amoun	_ t) +	225]						
Moving expenses. Complete form TP-348-V.			•		+	228							
Carrying charges and interest expenses (see lines	231 and 260 in the	e guid	e)		+	231							
Business investment loss. Complete form TP-232.	1-V.		·										
Total losses	233		Allo	owable los	s +	234							
Deduction for residents of designated remote areas	. Complete form	TP-3	50.1-V.		+	236							
Deduction for exploration and development expens	es				+	241							
Deduction for retirement income transferred to your	spouse on Decei	mber	31, 2015.										
Complete Schedule Q.	•				_ +	245							
Deduction for a repayment of amounts overpaid to	you (see the guide	e)			_ +	246	<u> </u>						
Deduction for amounts contributed to the QPP and	the QPIP on inco	me fro	m self-employ	ment	_ +	248							
Other deductions (see the guide)			Specify:	249	+	250	<u> </u>						
Carry-over of the adjustment of investment expense	es (see the guide)				_ +	252				_			
Add lines 201 through 207, 214 through 231, and 2	34 through 252.		Total o	deduction	<u>s</u> =	254		1,120	00	<u></u>	254	1,12	00 00
Subtract line 254 from line 199.										= 2	256	18,88	00
Adjustment of investment expenses (see the guide)	Complete Sche	dule	N.							+ 2	260		

Credits transferred from one spouse to the other (see the guide)

If the result is negative, enter 0. Carry the result to page 4.

Subtract line 431 from line 430, or enter the amount from line 18 in Part B of Schedule E.

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Taxable income					
Amount from line 275				275	18,880 00
Adjustment of deductions (see the guide)	Specify:	277	+	276	
Universal Child Care Benefit and income from a registered disability savings plan (see the guide)			+	278	
Add lines 275 through 278.			_ =	279	18,880 00
Deductions for strategic investments (see the guide) Specify: 286	287				
Non-capital losses from other years + 2	289				
Net capital losses from other years (see lines 276 and 290 in the guide) + 2	290				
Capital gains deduction (see the guide) + 2	292				
Deduction for an Indian + 2	293				
Deductions for certain income (see the guide) + 2	295				
Miscellaneous deductions (see the guide) Specify: 296 + 2	297				
Add lines 287 through 297. Total deductions = 2	298		Ī	298	
Subtract line 298 from line 279. If the result is negative , enter 0.	Taxa	ble income	= =	299	18,880 00
Non-refundable tax credits				250	11,425 00
Basic personal amount			-	350 358	11,425 00
Adjustment for income replacement indemnities (maximum \$10,282.50). See the guide.				359	11,425 00
Subtract line 358 from line 350.			- =	361	1,340 00
Age amount, amount for a person living alone and amount for retirement income. Complete Schedule B Amount for dependants and amount transferred by a child 18 or over enrolled in post-secondary	3.		- +	301	1,340 00
studies. Complete Schedule A.			+	367	
Amount for a severe and prolonged impairment in mental or physical functions (see the guide)			+	376	
Expenses for medical services not available in your area			+	378	
Medical expenses. Complete Schedule B.			+	381	
Interest paid on a student loan. Complete Schedule M.	Amo	unt claimed	+ 1:	385	
Add lines 359 through 385.	,		=	388	12,765 00
- 100 000 timough 000.			×		20%
Multiply line 388 by 20%.			=	389	2,553 00
			_		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Tax credit for volunteer firefighters and search and rescue volunteers (see the guide)			_ +	390	
Tax credit for workers 65 or older (see the guide)			_ +	391	
Tax credit for recent graduates working in remote resource regions. Complete form TP-776.1.ND-V .			_ +	392	
Tax credits for donations and gifts Amount from line 1 of Work chart 395 395	3				
(see the guide)			- +	395	
Tax credits for union, professional or other dues 397.1	× 10%	<u> </u>	- +	397	400 00
Tax credit for tuition or examination fees. Complete Schedule T.			- +	398	400 00
Tax credit for tuition or examination fees transferred by a child (see the guide)			- +	398.1	0.050.00
Add lines 389 through 392, 395, 397, 398 and 398.1.	n-refundable	tax credits	<u> </u>	399	2,953 00
Income tax and contributions					
Income tax on taxable income. Complete Work chart 401. If you must complete form TP-22-V or TP-25-V, check box 403.		403	7	401	3,020 80
Non-refundable tax credits (line 399)			_	406	2,953 00
Subtract line 406 from line 401. If you must complete Part A of Schedule E, enter instead		404]		
the amount from line 413 of Schedule E. If you are completing form TP-766.2-V , check box 404. If you are completing Part 4 of form TP-766.2-V , check box 405.		405]_	413	67 80
Tax credit for contributions to authorized Québec political parties (Work chart 414)	414		_		
Dividend tax credit + 4	415		_		
Tax credit for the acquisition of Capital régional et coopératif Desjardins shares, RL-26 slip, box B +	422		_		
	424		_		
	425		₽	425	
Subtract line 425 from line 413. If the result is negative, see line 431 in the guide.			=	430	67 80

	T	P-1.D-V (20	015-12) Page 4
Amount from line 432		432	67 80
Additional contribution for subsidized educational childcare. Complete Schedule I.		+ 434	
Annual registration fee for the enterprise register (see the guide) 437 2 2		7 '	
Is the information in the enterprise register correct?	Yes No	+ 438	
QPIP premium on income from self-employment or employment outside Québec. Complete Schedule R.		+ 439	
Advance payments of tax credits, <i>RL-19 slip, box A, B, C, D</i> or <i>G</i>		+ 441	
Special taxes (see the guide) Specify: 442		+ 443	
QPP contribution on income from self-employment (Work chart 445)	444	+ 445	
Contribution to the health services fund. Complete Schedule F.		+ 446	
Premium payable under the Québec prescription drug insurance plan.		- * -	
	449	+ 447	228 10
Complete Schedule K or enter the number corresponding to your situation in box 449.		+ 447 -	220 10
Health contribution Number of dependent Work about 440 and 44	448.2	- . , , , .	25 50
Complete Work chart 448 or enter the number corresponding to your situation in box 448.2.		+ 448	25 50
Add lines 432 through 448. Inco	ome tax and contribution	<u>is</u> = 450	321 40
Refund or balance due			
Québec income tax withheld at source, as shown on your RL slips			
or other information slips			
Amount from line 58 of your Schedule Q - 451.1		_	
<u>Subtract line 451.1 from line 451.</u> = 451.2 ►	451.2	_	
Québec income tax withholding transferred by your spouse +	451.3		
QPP or CPP overpayment +	452	_	
Income tax paid in instalments +	453		
Transferable portion of the income tax withheld for another province +	454		
Tax credit for childcare expenses. Complete Schedule C. +	455		
Tax credits respecting the work premium. Complete Schedule P. +	456	_	
QPIP overpayment +	457	_	
Tax credit for home-support services for seniors. Complete Schedule J. +	458	_	
QST rebate for employees and partners +	459		
Other credits (see the guide) Specify: 461 +	462	_	
Add lines 451.2 through 462. Income tax paid and other credits =	465	_	
Financial compensation for home-support services (see the guide) +	466		
Add lines 465 and 466.	468	- 468	
Subtract line 468 from line 450.		= 470	321 40
To find out how to register for direct deposit, see page 11 of the guide.	Refund		
Amount from line 470, if it is negative	474	_	
*	476	_	
Refund transferred to your spouse. See the guide before entering an amount.	478	_	
Subtract line 476 from line 474. Refund =	480	_	Deleves due
Accelerated refund (see the guide)	400		Balance due
Amount from line 470, if it is positive		_ 475	321 40
Amount transferred by your spouse. See the guide before entering an amount.		477 _	
Subtract line 477 from line 475. You are not required to pay a balance of less than \$2.	Balance du	<u>ie</u> = 479	321 40
Amount paid. Complete the remittance slip and make your cheque or money order payable to the			
Minister of Revenue of Québec.		481	
I certify that, in this return and in any documents attached, the information about me is accurate and complete, and fully discloses all of my income. If I am entitled to a refund and have entered an amount on line 476, I agree to have the amount	Area code Telephone	(home or cell	ular)
applied to the payment of my spouse's balance due (line 475 of my spouse's return).	Area code Telephone (work)	Extension
If I have entered an amount on line 123, it is because I have elected to add part of my spouse's retirement income to my income.	9		
	may compare the information obtained from other		
	ormation obtained from othe nmunicate the information		
Dale	ernment departments and		
© Revenu Québec			



Solidarity Tax Credit



If, on December 31, 2015, you had a *spouse* who ordinarily lived with you, only one of you can complete Schedule D to claim the credit for both of you. If you and your spouse did not live together, you must each file a separate Schedule D.

,	, ,							
۷.	Information about the person claimin	ng the cre	dit					
	Last name					Date of birth		
1	STUDENT				6	1995-01-01		
2	First name INCOME				11	Social insurance i	number	1
	Situation on December 31, 2015					, (.=e .ee .ee		
	ver the questions below so that we can determine the amour ns in blue are defined on the next page. Read the definiti	•		•	•	our situation on I	December 31, 2015.	
1	Principal residence							
	address of your principal residence on December 31, 2015,	, the same as th	he addı	ress on your return?		13 X Yes	No	
f you	answered no , enter the address below.	Ct t						
14	Apartment Street number	Street name						ı
14	City, town or municipality				Prov	ince Pos	tal code	J
15						16	ital oodo	I
								٦
2	People living with you							
	ighout 2015 , did you live in a <i>dwelling</i> , either alone or only e under 18?	with one or mo	ore			20 X Yes	No	
f you	had a spouse on December 31, 2015, did you live with him	ı or her?				21 Yes	No	
	December 31, 2015, you lived with one or more people (other their full names below.	er than your s	spouse) who were the owners	or <i>tenan</i>	ts or subtenants	of your dwelling,	
	Last name			First name				
22			23					
24			25					
26			27]
28			29					
_	need to list more than four people, check box 30 and attach	ı a sheet contai	ining th	e required information.		30		
3	Tenant or subtenant							
	lete this section if you or your spouse received an RL-31 sli ng and neither you nor your spouse received an RL-31 slip,	· .			cember 31	I, 2015. If you live	ed in an eligible	
	received an RL-31 slip for your dwelling? (Check all that app	oly.)				31 X You	Your spouse	
Owell	ing number (box A of your or your spouse's RL-31 slip)							
32	40C25-7D680-3AA00							
otal	number of tenants and subtenants (box B of your or your spe	ouse's RL-31 s	slip)			33 1		
4	Owner							
Com	plete this section if, on December 31, 2015, you lived in an	eligible dwelli	ng of w	hich you or your spous	e was the	owner.		
Vho	owned the dwelling? (Check all that apply.)					34 You	Your spouse	
	umber ("numéro matricule") or identification number ("numér	ro d'identification	on") sh	own on your or your sp	ouse's mu		car opouse	
35								
	Enclose a copy of this sched	ule with the d	ocume	ents you submit to Rev	venu Qué	bec.	_	

Eligibility requirements

To claim the solidarity tax credit, you must have met **all** of the following requirements **on December 31, 2015**:

- You were 18 or older or, if you were younger than 18, you
- had a spouse;
- were the father or mother of a child who lived with you; or
- were recognized as an emancipated minor by a competent authority (such as a court).
- · You were resident in Québec.
- You or your spouse was
 - a Canadian citizen;
 - a permanent resident or a protected person, within the meaning of the Immigration and Refugee Protection Act, or
 - a temporary resident or the holder of a temporary resident permit, within the meaning of the *Immigration and Refugee Protection Act*, who had been living in Canada for the preceding 18 months.

However, you are not eligible for the solidarity tax credit if either of the following apply:

- You were confined to a prison or similar institution on December 31, 2015, and, in 2015, you were so confined for one or more periods totalling more than six months.
- Someone received the child assistance payment from the Régie des rentes du Québec with regard to you for the month of December 2015 (unless you turned 18 during that month).

Definitions

Dwelling

A house, an apartment or a similar place of residence in which a person ordinarily eats and sleeps and that is equipped with kitchen and bathroom facilities.

Note

A room in a hotel establishment or boarding house is not a dwelling.

Eligible dwelling

A dwelling (a house, an apartment, a room or a similar place of residence) located in Québec in which an individual ordinarily lives and that is the individual's principal residence, **excluding**, for example,

- a dwelling in low-rental housing (HLM);
- a dwelling in a facility maintained by a public institution or a private institution under agreement (publicly funded) that operates a hospital centre, a residential and long-term care centre (CHSLD) or a rehabilitation centre governed by the Act respecting health services and social services;
- a dwelling for which an amount is paid toward rent by a public body;
- a dwelling located in a building or residential facility where the services of an intermediate resource or a family-type resource are offered;
- a room located in the principal residence of the landlord where fewer than three rooms are rented or offered for rent, unless the room has either a separate entrance from the outside or sanitary facilities separate from those used by the landlord;
- a room located in a hotel establishment or in a rooming house that is leased or subleased for a period of fewer than 60 consecutive days.

Owner

The person registered as the owner at the registry office (Bureau de la publicité des droits).

Spouse

The person who

- is married to you, is living in a civil union with you or is your de facto spouse;
 and
- from whom you have not been living separate and apart for 90 days or more because of the breakdown of your relationship.

A **de facto spouse** is a person of the opposite sex or of the same sex who, at a particular time,

- is living in a conjugal relationship with you and is the biological or adoptive parent (legally or in fact) of a child of whom you are also the parent; or
- has been living in a conjugal relationship with you for at least 12 consecutive months (if you were separated for fewer than 90 days, the 12-month period is considered not to have been interrupted).

Tenant or subtenant

A person who is leasing or subleasing a dwelling and is therefore responsible for paying the rent.

IMPORTANT

The owner of any building that includes an *eligible dwelling* must issue an RL-31 slip to every person who was a *tenant or subtenant* of the dwelling on December 31, 2015. The slip must be issued no later than February 29, 2016. If you or your spouse lived in an eligible dwelling on December 31, 2015, but did not receive an RL-31 slip, contact the owner of your building.

