



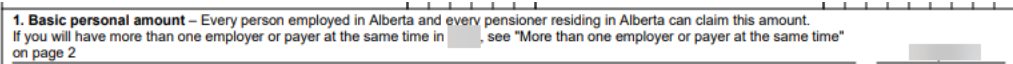
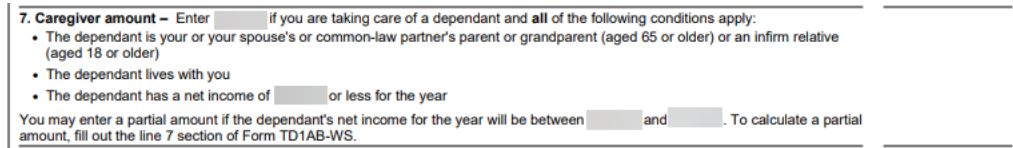
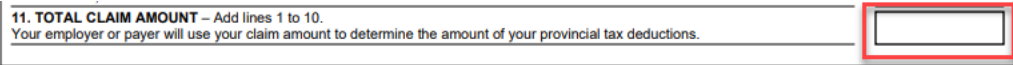
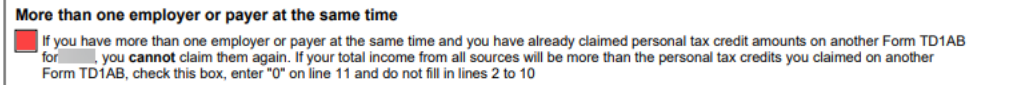
## Introduction

This guide provides instructions for **new employees** in filling out the required TD1-AB and TD1 Federal tax forms. **Note:** This is not financial advice. For more information, please refer to the [CRA](#) website.

- [TD1AB](#) – Alberta Personal Tax Credits Return
- [TD1](#) – Personal Tax Credits Return

**Important:** Ensure to download and save the fillable PDF forms from the CRA website to your computer first or it may come through blank when you send back to the Human Resources department.

The **Information and Notes** columns provide additional information and/or screenshots to help locate the input field on the forms.

| Information                                        | Notes                                                                                                                                                                                                                                                                                              |
|----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>TD1AB – Alberta Personal Tax Credits Return</b> |                                                                                                                                                                                                                                                                                                    |
| 1. Claiming a basic amount                         | <ul style="list-style-type: none"><li>▪ When entering the basic amount, refer to the limits and amounts listed in the description of the box.</li><li>▪ This amount will be filled in automatically</li></ul>  |
| 2. Claiming a caregiver amount                     |                                                                                                                                                                                                                |
| 3. Total claim amount                              | <ul style="list-style-type: none"><li>▪ When lines 1-10 on the TD1AB have been filled out, the sum needs to be calculated and entered in the Total Claim Amount box</li></ul>                                  |
| 4. More than one employer (if applicable)          | <ul style="list-style-type: none"><li>▪ If you are now employed by more than one employer, you must check off the box on the second page</li></ul>                                                             |

## Quick Reference Guide: Filling TD1 Forms for New Employees

| Information                                            | Notes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|--------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>5. Total income being less than the total claim</p> | <ul style="list-style-type: none"> <li>If your total income is less than the total claim amount, you must check off the box on the second page</li> </ul> <div data-bbox="483 342 1495 407"> <p><b>Total income is less than the total claim amount</b></p> <p><input type="checkbox"/> Tick this box if your total income for the year from all employers and payers will be <b>less</b> than your total claim amount on line 11. Your employer or payer will not deduct tax from your earnings.</p> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <p>6. Signature and Date</p>                           | <ul style="list-style-type: none"> <li>You must sign and date on the bottom of the second page</li> <li><b>Note:</b> signature must be completed digitally or signed by hand. Typing your name as a signature will <b>not</b> be accepted.</li> </ul> <div data-bbox="483 609 1495 760"> <p><b>Certification</b></p> <p>I certify that the information given on this form is correct and complete.</p> <p>Signature _____ Date _____</p> <p><b>It is a serious offence to make a false return.</b></p> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| TD1 – Personal Tax Credits Return                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <p>1. Claiming a basic amount</p>                      | <ul style="list-style-type: none"> <li>When entering the basic amount, refer to the limits and amounts listed in the description of the box.</li> <li>This amount will be <b>blank</b></li> </ul> <div data-bbox="483 1058 1495 1146"> <p><b>1. Basic personal amount</b> – Every resident of Canada can enter a basic personal amount of _____. However, if your net income from all sources will be greater than _____ and you enter _____, you may have an amount owing on your income tax and benefit return at the end of the tax year. If your income from all sources will be greater than _____ you have the option to calculate a partial claim. To do so, fill in the appropriate section of Form TD1-WS, Worksheet for the _____ Personal Tax Credits Return, and enter the calculated amount here.</p> <div data-bbox="1349 1077 1490 1142" style="border: 1px solid red; width: 87px; height: 31px; margin-left: 10px;"></div> </div> |
| <p>2. Claiming a caregiver amount</p>                  | <ul style="list-style-type: none"> <li>When claiming a caregiver amount, this amount should match the caregiver amount you entered under TD1AB – Step 2.</li> </ul> <div data-bbox="483 1289 1495 1346"> <p><b>9. Canada caregiver amount for eligible dependant or spouse or common-law partner</b> – Fill out this section if, at any time in the year, you support an <b>infirm</b> eligible dependant (aged 18 or older) or an <b>infirm</b> spouse or common-law partner whose net income for the year will be _____ or less. To calculate the amount you may enter here, fill out the line 9 section of Form TD1-WS.</p> <div data-bbox="1349 1289 1490 1346" style="border: 1px solid black; width: 87px; height: 27px; margin-left: 10px;"></div> </div>                                                                                                                                                                                   |
| <p>3. Total claim amount</p>                           | <ul style="list-style-type: none"> <li>When lines 1-12 on the TD1 have been filled out, the sum needs to be calculated and entered in the Total Claim Amount box</li> </ul> <div data-bbox="483 1486 1495 1530"> <p><b>13. TOTAL CLAIM AMOUNT</b> – Add lines 1 to 12.</p> <p>Your employer or payer will use this amount to determine the amount of your tax deductions.</p> <div data-bbox="1349 1486 1490 1530" style="border: 1px solid red; width: 87px; height: 21px; margin-left: 10px;"></div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <p>4. More than one employer (if applicable)</p>       | <ul style="list-style-type: none"> <li>If you are now employed by more than one employer, you must check off the box on the second page</li> </ul> <div data-bbox="483 1671 1495 1745"> <p><b>More than one employer or payer at the same time</b></p> <p><input type="checkbox"/> 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 TD1 for _____, you <b>cannot</b> claim them again. If your total income from all sources will be more than the personal tax credits you claimed on another Form TD1, check this box, enter "0" on Line 13 and do not fill in Lines 2 to 12.</p> </div>                                                                                                                                                                                                                                                                    |

## Quick Reference Guide: Filling TD1 Forms for New Employees

| Information                                     | Notes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|-------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 5. Total income being less than the total claim | <ul style="list-style-type: none"> <li>If your total income is less than the total claim amount, you must check off the box on the second page</li> </ul> <div> <p><b>Total income is less than the total claim amount</b></p> <p><input type="checkbox"/> Tick this box if your total income for the year from <b>all</b> employers and payers will be <b>less</b> than your total claim amount on line 13. Your employer or payer will not deduct tax from your earnings.</p> </div> |
| 6. Signature and Date                           | <ul style="list-style-type: none"> <li>You must sign and date on the bottom of the second page</li> <li><b>Note:</b> signature must be completed digitally or signed by hand. Typing your name as a signature will <b>not</b> be accepted.</li> </ul> <div> <p><b>Certification</b></p> <p>I certify that the information given on this form is correct and complete.</p> <p>Signature _____ Date _____</p> <p><b>It is a serious offence to make a false return.</b></p> </div>       |