Statement of Investment Income

T1-2011

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): _____ **1**

_____ + **2**

_____ + **3**

Add lines 1 to 3, and enter this amount on line 180 of your return. 180 = **4**

Taxable amount of eligible dividends (specify): _____ + **5**

_____ + **6**

_____ + **7**

Add lines 4 to 7, and enter this amount on line 120 of your return. 120 =

II – **Interest and other investment income**

Specify: _____

_____ +

Income from foreign sources (specify): _____ +

Enter this amount on line 121 of your return. 121 =

III – **Net partnership income (loss)**

_____

_____ +

Enter this amount on line 122 of your return. 122 =

IV – **Carrying charges and interest expenses**

Carrying charges (specify): _____

Interest expenses (specify): _____ +

Enter this amount on line 221 of your return. 221 =

5000-S4

- ✂ -

Details of Dependant

T1-2011

Schedule 5

See the guide to find out if you can claim an amount on line 305, 306, 315, or 331 of Schedule 1. For each dependant claimed, provide the details requested below. **Attach a copy of this schedule to your return.**

Line 305 – Amount for an eligible dependant

Month   Day

If your marital status changed in 2011, enter the date of the change. ▶

Do not forget to tick the box on page 1 of your return to state your marital status on December 31, 2011.

Last name / First name / Address	Date of birth Year Month Day	Relationship to you	Net income in 2011	Nature of the impairment (if it applies)	Amount of claim
Last name					
First name					
Address					

Line 306, 315, or 331 – Attach a separate sheet of paper if you need more space.

Last name / First name / Address	Year of birth	Relationship to you	Net income in 2011	Nature of the impairment (if it applies)	Line claimed	Amount of claim
Last name						
First name						
Address						

Last name / First name / Address	Year of birth	Relationship to you	Net income in 2011	Nature of the impairment (if it applies)	Line claimed	Amount of claim
Last name						
First name						
Address						

5000-S5