

Be sure to use the **guide** in filling out your income tax return; the information in the guide follows the order of the lines on the return.

If you received an identification label, attach it here.
If you expect to change your address, see page 11 of the guide.

If this is your first income tax return, check this box.

Information about you

(see page 11 of the guide)

Last name
1 **COUTURE**

First name
2 **LULU**

Date of birth
6 **19861008**

4 Sex: 1 Male 2 Female

5 Language of correspondence 1 French 2 English

7 Number **333** Street, P.O. box **DU BUISSON** Apartment

8 City, town or municipality **VERTEVILLE** Province **QC** Postal code **9 G1G 0A0**

11 Social insurance number (SIN): **222444666**

Check the box corresponding to your situation on December 31, 2005 (see the definition of the term "spouse on December 31, 2005").

12 You **did not** have a spouse. 2 You **had** a spouse.

If your situation (line 12) has changed since 2004, indicate the date of the change.
13 **2 0 0** M D

If Québec **was not** your province of residence on December 31, 2005, indicate the province or territory.
17

If you were not resident in Canada throughout the year, indicate your date of arrival: your date of departure:
18 Y M D Y M D

If you indicated a date on line 18, enter the income you earned during the period in which you were not resident in Canada.
19

Date of bankruptcy (where applicable) Period covered by the return
21 **2 0 0 5** M D pre-bankruptcy post-bankruptcy

If you are the beneficiary of a designated trust, refer to the guide.
22

If the above information concerns a deceased person, enter the **date of death**.
20 **2 0 0** M D

Information about your spouse on December 31, 2005

31 Last name and first name:

36 Date of birth: **1 9** Y M D

If your spouse died in 2005, enter the **date of death**.
37 **2 0 0 5** M D

41 Social insurance number:

If your spouse earned income from self-employment, check this box.
50

Your spouse's income (line 275 of your spouse's return).
51 If your spouse had no income, enter "nil."

QST credit

90 If you are claiming the QST credit, check this box.



92 If you did not have a spouse on December 31, 2005, see page 12 of the guide.



Total income

QPP contributions, <i>RL-1 slip, box B</i> , and CPP contributions	98	140	23		
Commissions received, <i>RL-1 slip, box M</i>	100				
Employment income, <i>RL-1 slip, box A</i>				94	101
Correction of employment income, if you received an RL-22 slip (work chart 105)					105
Other employment income (see the guide)				Specify: 106	107
Employment insurance benefits, <i>T4E slip</i>					111
Old age security pension, <i>T4A(OAS) slip</i>					114
QPP or CPP benefits, <i>RL-2 slip, box C</i>					119
Payments from a pension plan, <i>RL-2 slip, box A</i> , or <i>RL-16 slip, box D</i> , an RRSP, a RRIF or a DPSP, or annuities (see the guide)					122
Taxable amount of dividends from taxable Canadian corporations					128
Interest and other investment income					130
Rental income. Attach your financial statements or form TP-128-V. Gross income	168			Net income	136
Taxable capital gains (see the guide). Complete Schedule G.					139
Support payments received (taxable amount)					142
Social assistance payments, <i>RL-5 slip, box A</i> , and similar financial assistance, <i>RL-5 slip, box B</i>					147
Income replacement indemnities, <i>RL-5 slip, box C, D, E or K</i> , and net federal supplements, <i>T4A(OAS) slip</i>					148
Other income (see the guide)				Specify: 153	154
Business income. Complete Schedule L. Net income					164
Add lines 101 through 164.				Total income	199
					3925
					81

Net income

Registered pension plan deduction, <i>RL-1 slip, box D</i>				205	
Employment expenses and deductions				Specify: 206	207
RRSP deduction		HBP or LLP	212		214
Support payments made (deductible amount). See the guide. Attach the required documents.					
Name of recipient:					
Recipient's social insurance number:	224				
If there is another recipient, attach a note indicating his or her name and social insurance number.					
Support payments made (deductible amount)					225
Moving expenses. Complete form TP-348-V.					228
Carrying charges and interest expenses (see lines 231 and 260 in the guide)					231
Business investment loss. Complete form TP-232.1-V.					
Total losses	233			Allowable loss	234
Deduction for residents of designated remote areas. Complete form TP-350.1-V.					236
Deduction for exploration and development expenses					241
Other deductions (see the guide)				Specify: 249	250
Carry-over of the adjustment of investment expenses (see the guide)					252
Add lines 205, 207, 214 through 231 and 234 through 252.				Total deductions	254
Subtract line 254 from line 199.					256
Adjustment of investment expenses (see the guide). Complete Schedule N.					260
Add lines 256 and 260.					
If the result is negative, enter 0. Carry the result to page 3.				Net income	275
					3925
					81

Attach your documents here.



If you have a balance due, please attach your cheque or money order to page 1.

Taxable income

Amount from line 275	275	3925	81		
Adjustment of deductions (see the guide)	+	276			
Support-payment arrears	+	277			
Add lines 275 through 277.	=	279	3925	81	279 3925 81
Deduction for strategic investments. Complete Schedule D.		287			
Non-capital losses from other years	+	289			
Net capital losses from other years (see lines 276 and 290 in the guide)	+	290			
Capital gains deduction	+	292			
Deduction for an Indian or a person of Indian ancestry	+	293			
Deduction for certain income (see the guide)	+	295			
Miscellaneous deductions (see the guide) Specify: 296	+	297			
Add lines 287 through 297.	=	298			298
Subtract line 298 from line 279. If the result is negative, enter 0.					
Taxable income	=	299	3925	81	299 3925 81

Non-refundable tax credits

These credits reduce the income tax that you are required to pay. Be sure to claim all the amounts to which you are entitled.

Basic personal amount		350	6,365	00	
QPP and CPP contributions. Enter the amount from line 98 on page 2 (maximum \$1,861.20). If you were self-employed, see the guide.		351	140	23	
Employment insurance premiums, RL-1 slip, box C (maximum \$760.50)	+	352	86	38	
Contribution to the health services fund (see the guide). Complete Schedule F.	+	354			
Add lines 351 through 354.	=	355	226	61	
Enter the higher of the following amounts: the amount from line 355 or \$2,965.	+	356	2965	00	
Add lines 350 and 356.	=	357	9330	00	
Adjustment for income replacement indemnities (maximum \$8,397). See the guide.	-	358			
Subtract line 358 from line 357.	=	359	9330	00	
Amount with respect to age, for a person living alone or for retirement income. Complete Schedule B.	+	361			
Amount for children enrolled in post-secondary studies or amount for other dependants. Complete Schedule A.	+	367			
Union, professional or other dues	+	373			
Amount for a severe and prolonged impairment in mental or physical functions	+	376			
Expenses for medical services not available in your area	+	378			
Medical expenses. Complete Schedule B.	+	381			
Tuition or examination fees. Complete Schedule M. Amount claimed	+	384			
Interest paid on a student loan. Complete Schedule M. Amount claimed	+	385			
Impairment amount transferred by a dependant. Complete Schedule A.	+	386			
Donations and gifts (see the guide). Attach your receipts.	+	389			
Add lines 359 through 389.	=	395	9330	00	
Multiply line 395 by 20%. Carry the result to line 406.	X	396	20%		
Non-refundable tax credits	=	399	1866	00	

Income tax and contributions

2005 – TP-1.D-V

Income tax on taxable income.

Complete work chart 401. If you must complete form TP-22-V or TP-25-V, check box 403.

Non-refundable tax credits (line 399)

Subtract line 406 from line 401. If you must complete Part A of Schedule E, enter instead the amount from line 413 of Schedule E. If you are completing form TP-766.2-V, check box 404.

Tax credit for contributions to authorized Québec political parties (work chart 414)

Dividend tax credit

Tax credit respecting the acquisition of Capital régional et coopératif Desjardins shares, *RL-26 slip, box B*

Tax credit with respect to a labour-sponsored fund (see the guide)

Add lines 414 through 424.

Subtract line 425 from line 413. If this amount is negative, see line 431 in the guide.

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

Subtract line 431 from line 430, or enter the amount from line 18 of Part B of Schedule E. If the result is negative, enter 0.

Registration fee for the Québec enterprise register. Complete Schedule O.

Advance payments of the tax credit respecting the work premium and the tax credit for child-care expenses

Advance payments of the tax credit respecting home-support services for seniors

Special taxes

QPP contributions on income from self-employment

Contribution to the health services fund. Complete Schedule F.

Premium payable under the Québec prescription drug insurance plan.

Complete Schedule K or enter the number corresponding to your situation in box 449.

Add lines 432 through 447.

Income tax and contributions

401	628	13
406	1866	00
413	-1237	87
425		
430	-1237	87
431		
432		
438		
441		
442		
443		
445		
446		
447		
450		

Refund or balance due

Québec income tax withheld at source, as shown on your RL slips or other information slips

QPP and CPP overpayments

Income tax paid in instalments

Transferable portion of the income tax withheld for another province

Tax credit for child-care expenses. Complete Schedule C.

Tax credit respecting the work premium. Complete Schedule P.

QST rebate for employees and partners

Property tax refund. Complete Schedule B.

Other credits (see the guide)

Add lines 451 through 462.

Subtract line 465 from line 450.

Income tax paid and other credits

451	229	33
452		
453		
454		
455		
456	106	81
459		
460		
462		
465	336	14
465	336	14
470	-336	14

To request direct deposit, see line 478 in the guide.

Amount from line 470, if it is negative

Refund transferred to your spouse. See the guide before entering an amount.

Subtract line 476 from line 474.

Accelerated refund (see the guide)

Refund to which you are entitled

Refund

474	336	14
476		
478	336	14
480	336	14

Balance due

Amount from line 470, if it is positive

Amount transferred by your spouse. See the guide before entering an amount.

Subtract line 477 from line 475. Do not pay a balance due of less than \$2.

Amount enclosed. Attach to page 1 a cheque or money order payable to the **Minister of Revenue of Québec**.

Indicate your **social insurance number** on the front of the cheque or money order.

Balance due

475		
477		
479		
481		

Signature

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 applied to the payment of my spouse's balance due (line 475 of my spouse's return).

X *Lulu Couture*
Signature

March 25, 2006
Date

Area code Telephone (home)
498 1 2 3 4 5 6 7 8 9 0

Area code Telephone (work) Ext.
499

Revenu Québec may compare the information in this return with information obtained from other sources, and may communicate the information to other government departments and agencies.