

Identification

Name of employer	Québec enterprise number (NEQ)
	Identification number <b>RS</b>
Address in full	Postal code

Year **2006**

Do not use this area.  
Date

Number of RL-1 slips filed:  in paper form,  on magnetic media,  by Internet

Transmitter number, if applicable: **NP**

Part 1 Statement of duties (by month)

Month	Amount paid or payable

Part 2 Summary of deductions and contributions payable

<b>QPP contributions</b>	Employee contributions (RL-1 slips, box B)	1			
	Employer contribution	2			3
<b>QPIP premiums</b>	Employee premiums (RL-1 slips, box H)	7			
	Employer premium	8			9
<b>Québec income tax</b>	RL-1 slips (box E) and RL-25 slips (box I)	10			
	RL-2 slips (box J)	11			12
<b>Compensation tax (for specified financial institutions other than corporations)</b>	Wages subject to compensation tax (see guide RL-1.G-V)	20			
	Add lines 3, 9, 12 and 21.				21
					25
	<b>QPP contributions, QPIP premiums, income tax and compensation tax remitted</b> during the year, using the applicable TPZ-1015-V remittance slips. The total of the amounts on lines 26 and 38 must correspond to the grand total obtained in Part 1.				26
	Subtract line 26 from line 25. If the result is negative, enter it in brackets. Carry the result to box 91 (Part 4).				27
					27

Contribution to the health services fund

<b>Total payroll</b> for the purpose of determining the contribution rate to be entered in box 36. Carry this amount to box 90 (Part 4).	28				
Wages subject to the contribution	30				
Exempt wages (see guide RL-1.G-V or RLF-1.GS-V)	31				
Subtract line 32 from line 30.	32				
	34				
			36	%	37
<b>Contributions to the health services fund remitted</b> during the year, using the applicable TPZ-1015-V remittance slips. The total of the amounts on lines 26 and 38 must correspond to the grand total obtained in Part 1.					38
Subtract line 38 from line 37. If the result is negative, enter it in brackets. Carry the result to box 92 (Part 4).					39
					39

Identification number: \_\_\_\_\_

Year  
**2006**

**Contribution to the financing of the Commission des normes du travail (CNT).** Carry the amount on line 41 to box 93 (Part 4).

Remuneration subject to the contribution (calculated on the 2006-01 version of form LE-39.0.2-V)  x **0.08%** ▶

**Contribution to the Fonds national de formation de la main-d'œuvre (FNFMO)**

**Payroll, if over \$1,000,000**  x **1%** ▶   
 Eligible training expenditures (complete the work chart in Part 3)  -   
 Subtract line 52 from line 51.  
 If the result is negative, enter 0. Carry the result to box 94 (Part 4). =   
 Add or subtract, as applicable, the amounts on lines 27, 39, 41 and 53. **If the result is negative**, enter the refund on line 71.  
**If the result is positive**, enter the balance due on line 72. Any unpaid balance may result in interest charges and a penalty. **Balance** =

**Certification**

I hereby certify that the information provided on this form and on the RL-1, RL-2 and RL-25 slips is accurate and complete.

**X**  
 Signature \_\_\_\_\_ Date \_\_\_\_\_ Area code \_\_\_\_\_ Telephone \_\_\_\_\_

<b>Refund</b>	<input type="text" value="71"/>
<b>Balance due</b>	<input type="text" value="72"/>

Revenu Québec may compare the information you provide with information obtained from other sources and transmit it to other government departments or agencies.

**Part 3 Work chart – Eligible training expenditures**

Balance of eligible training expenditures carried forward from previous years		<input type="text" value="75"/>
Eligible training expenditures for the current year	+	<input type="text" value="76"/>
Add lines 75 and 76.	=	<input type="text" value="77"/>
Amount used to reduce or cancel the contribution on line 51. Carry this amount to line 52.	-	<input type="text" value="78"/>
Subtract line 78 from line 77.	=	<input type="text" value="79"/>

**Balance of eligible training expenditures that may be carried forward to subsequent years** =

**Explanatory notes**

Pages 1 and 2 of this form and copy 1 of the RL-1, RL-2 and RL-25 slips for 2006 must be returned to Revenu Québec **no later than February 28, 2007**. Use the enclosed return envelope. For further information, refer to section 6.1 in the *Guide to Filing the RL-1 Slip (RL-1.G-V)* or the *Guide to Filing the RL-1 Slip: Short Version (RLF-1.GS-V)*.

If you ceased to carry on your business in 2006, you must instead file these forms within 30 days after the date on which the activities of the business ceased. If you permanently stop making remittances but continue to carry on your business, you must file these forms by the 20th day of the month following the month in which you made your final remittance.

To determine the date for remitting the contribution to the financing of the CNT (line 41) and the contribution to the FNFMO (line 53), see section 6.2 of the above-mentioned guides.

To determine your total payroll and your contribution rate for the health services fund, see section 6.6 in the *Guide to Filing the RL-1 Slip (RL-1.G-V)* or section 6.5 in the *Guide to Filing the RL-1 Slip: Short Version (RLF-1.GS-V)*.

If the amount payable indicated in box 95 of Part 4 is under \$2, do not make a remittance; otherwise, make your remittance either by Internet, or by a cheque or money order made payable to the Minister of Revenue of Québec.

To keep a record of the information on this form, photocopy the form or transcribe the data on another copy. You may obtain a copy in either of the guides already referred to, or print one out from our Web site ([www.revenu.gouv.qc.ca](http://www.revenu.gouv.qc.ca)).

Ministère du Revenu

Do not attach documents to Part 4 below.

Remittance slip

Year  
**2006**

RLZ-1.S-V (2006-10)

**Part 4**

90. Total payroll (health services fund). Do not include this amount in box 95.	91. QPP, QPIP, income tax and compensation tax (line 27)	+ 92. Health services fund (line 39)
<input type="text"/>	<input type="text"/>	<input type="text"/>
+ 93. CNT (line 41)	+ 94. FNFMO (line 53)	= 95. Amount payable (boxes 91 to 94)
<input type="text"/>	<input type="text"/>	<input type="text"/>

Enclose your cheque or money order with the remittance slip.