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TRUST INCOME TAX RETURN AND INFORMATION RETURN

For Departmental Use

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Identification

Name of Trust
a) _____

Name of Trustee Executor Administrator
b) _____

Address of Residence of Trust
c) _____

Province of Residence of Trust Postal Code Telephone Number

Mailing Address (if different from address above)
d) _____

Postal Code

e) Return for taxation year
from _____ 19____ to _____ 19____
Day Month Year Day Month Year

f) Has the fiscal period changed since last return filed? No Yes

g) Is this the first year of filing? No Yes

h) Is this an amended return? No Yes

i) Taxation Office where T3 return was filed ▶ _____

j) If the trust has been wound up, give date
_____ 19____
Day Month Year

k) Has a clearance certificate been requested? No Yes

Type of Trust

l) Inter vivos
 Spouse trust
 Unit trust
 Mutual fund trust
 Communal Organization
 Insurance segregated fund trust
 Fully registered
 Partially registered
 Non registered
 Other inter vivos trust (Please specify) _____

o) Date trust created _____ 19____

p) If this is the first year of a testamentary or inter vivos trust has a copy of the will or trust document been filed with this return or the final T1 Return? No Yes

m) Testamentary
 Spouse trust
 Other

n) Deceased Taxpayer Information
Date of death _____ 19____
Social Insurance Number _____

Summary of Tax and Credits

"B"

"Taxable Income" of the Trust (from Trust Schedule 1) - - - 80	_____	
Federal Tax Payable (from Trust Schedule 2A or 2B; Guide items 41 to 41M) - - - 81	_____	
Add: Provincial or Territorial Tax Payable (from Trust Schedule 3A or 3B; Guide item 41N to 41S) - - - 82	_____	
Total Payable	_____	83
Less:		
Payments on Account - - - - - 84	_____	
Total Tax Deducted per Information Slips (Guide item 8) - - - - - 85	_____	
Refundable Quebec Abatement (from Trust Schedule 2A or 2B) - - - - - 86	_____	
Refundable Investment Tax Credit (From form T2038 (IND.)) - - - - - 87	_____	
Other Credits (Specify) _____ 88	_____	
Total Credits	_____	89
Balance Owning or Refund (A difference of less than one dollar is neither charged nor refunded)		90

Payment: Attach cheque or money order made payable to the Receiver General

Non-Resident Tax (Guide item 38)

"C"

Total Income Paid or Payable to Non-Resident Beneficiaries (from page 3, line 49) - - 400	_____	
Add/deduct: Non-cash items included above — (please provide reconciliation) - - - 401	_____	
Amounts paid or credited other than capital distributions - - - - - 402	_____	
Deduct: Amounts not subject to Part XIII tax (refer to Interpretation Bulletin IT-465R, Information Circular 76-12R3 and to Canada tax treaties) (Guide item 25D)		
—Capital gains distributions of mutual fund trusts - - - - - 403	_____	
—Distributions by certain trusts established before 1949 - - - 404	_____	
—Other (Specify) _____	_____	
Sub Total	_____	406
Amount subject to Non-Resident Tax 407	_____	

Non-Resident Tax Payable (This amount must agree with amount reported on form NR4-NR4A Summary and related forms NR4 Supplementary) - - - - - 408	_____	
Deduct: Amounts previously remitted per form PD7A - - - - - 409	_____	

Payer's Remittance No. _____

Balance due — remit on form PD7A 410 _____

Taxable Income	Federal Tax	Provincial Tax	Penalties Fed. Prov.
Province of	Instalment Int.	Arrears Int.	Refund Int.
			Balance Unpaid
			Refund
			LFP
			Total

Summary of Income and Deductions Before Allocations

Business, Farming, Fishing or Rental Income (Guide items 9 to 12)

Business Income (Guide item 9)	- - - -	Gross 1A		Net 01	
Farming Income (Guide item 10)	- - - -	Gross 2A		Net 02	
Fishing Income (Guide item 10)	- - - -	Gross 3A		Net 03	
Real Estate Rentals (from Trust Schedule 7)	- -	Gross 4A		Net 04	

Actual Amount of Dividends from Taxable Canadian Corporations

Eligible for Interest and Dividend Income Deduction (Guide item 13A)	- - -	05	
Not Eligible for Interest and Dividend Income Deduction (Guide item 13B)	- -	06	

Interest from Canadian Sources

Eligible for Interest and Dividend Income Deduction (Guide item 14)	- - - -	07	
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Investment Income

Not Eligible for Interest and Dividend Income Deduction (Guide item 15)	- - -	08	
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Superannuation or Pension Payments (Guide item 16)

	- - - - -	09	
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Taxable Capital Gains (from Trust Schedule 5) (Guide item 17)

	- - - - -	10	
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Other Income (Guide item 18) (Specify and attach any information slips received)

Total Income (add lines 01 to 11 inclusive)		11		12	
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Deductions from Total Income

Total trustee fees *(Guide item 19)	- - - - -		
Less: Trustee fees not applicable to income	- - - - -		
Portion of trustee fees deductible from income	- - - - -		
*All trustee fees are income of recipient.			
Name of Trustee _____			
Address _____			

Carrying charges on Stocks and Bonds (Guide item 20)	- - - - -	14	
Capital Cost Allowance not designated to beneficiaries (Schedule 8) (Guide item 21)		15	
Allowable Business Investment Losses (Guide items 22)	- - - - -	16	

Other Deductions applicable to income (Guide item 23) (Specify)

Total Expenses (add lines 13 to 17 inclusive)		17		18	
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Trust Income (subtract line 18 from line 12) 19

Add: A reasonable proportion of any amounts deducted in determining net income for upkeep, maintenance and taxes of any property used or occupied by any beneficiary. (This amount is to be reported on the beneficiary's form T3 Supplementary.) (Guide item 24) - - - - - 20

Trust Income Before Designations/Allocations (add lines 19 and 20) (enter this amount at line 40 on page 3) 21

Trust Income Before Designations/Allocations (from page 2, line 21)

40

Deduct: Amounts Designated/Allocated to Particular Beneficiaries

Items Allocated	Income Paid or Payable (Guide items 25C and 25D)		Elective Income (Guide item 25E)		Total
	a) Resident Beneficiaries	b) Non-Resident Beneficiaries	c) Resident Beneficiaries		
(A) Actual Amount of Eligible Dividends (page 2, line 05)					41
(B) Actual Amount of Ineligible Dividends (page 2, line 06)					42
(C) Eligible Interest (page 2, line 07)					43
(D) Foreign Business Income					44
(E) Foreign Non-business Income					45
(F) Net Taxable Capital Gains † (page 2, line 10)					46
(G) Other Income ††					47
Totals (not to exceed line 21 on page 2)	48	49	50		51

Income of Trust before gross-up of dividends, if any (line 40 less line 52)

(If result is zero, refer to Guide item 40H and Trust Schedule 2B for Maximum Tax liability)

(If result is greater than zero, carry forward to Trust Schedule 1, line 101)

†Double these amounts on T3 Supplementaries (Box F).

††Where Pension Benefits or Death Benefits are included, Refer to Guide item 25A for reporting requirements.

Other Amounts Designated/Allocated (Guide item 26)

Item Designated/Allocated	AMOUNT DESIGNATED/ALLOCATED TO		Elective Income		
	a) Resident Beneficiaries	b) Non-Resident Beneficiaries	c) Resident Beneficiaries		
(H) Taxable Amount of Eligible Dividends ("Actual Amount" in item (A) above plus 1/2 of "Actual Amount")					54
(I) Taxable Amount of Ineligible Dividends ("Actual Amount in item (B) above plus 1/2 of "Actual Amount")					55
Total Taxable Amount of Dividends from Taxable Canadian Corporations (boxes (H) plus boxes (I)).					56
(J) Federal Dividend Tax Credit (22 2/3% of "Total Taxable Amount of Dividends from Taxable Canadian Corporations")					57
(K) Foreign Business Income Tax Paid					58
(L) Foreign Non-business Income Tax Paid					59
(M) Capital Cost Allowance					60
(N ₁) RRSP Refund of Premiums (attach form T2019)					61
(N ₂) Superannuation and Pension Benefits					62
(N ₃) Death Benefits					63
(O) Deemed RHOSP Receipts (re: deaths occurring prior to May 23, 1985)					64
(P) Insurance Segregated Fund Losses					65
(Q) Capital Gains Eligible for Deduction					66
(R) Investment in Qualified Property for I.T.C.					67
(S) Investment Tax Credit (I.T.C.)					68
(T) Tax Credit					69
—Share-Purchase Tax Credit (S.P.T.C.)					70
—Scientific Research Tax Credit (S.R.T.C.)					71
—Manitoba Manufacturing Investment Tax Credit (M.M.I.T.C.)					72
—Employment Tax Credit (E.T.C.)					73
—Saskatchewan Livestock Investment Tax Credit (S.L.I.T.C.)*					74
—Saskatchewan Livestock Facilities Tax Credit (S.L.F.T.C.)*					75

*For communal organizations only

Additional Information Required (To be completed by all Trusts)

All items must be answered "YES" or "NO". (Guide item 27)

- Has there been a change in the ownership of capital or income interests during the taxation year? If "YES", attach a statement showing changes from all trusts other than unit trusts. YES NO
- Have any capital additions by way of gift or bequest been received since 18th June, 1971? YES NO
- Has a loan or obligation been incurred in a non-arm's length transaction since 18th June, 1971? YES NO
- Have there been any dispositions of capital property during the taxation year? YES NO
- Does the trust have any non-resident beneficiaries or a beneficiary trust with non-resident beneficiaries? YES NO
- Is the trust non-resident? YES NO
- Was there a distribution of estate assets to beneficiaries during the taxation year? If "YES", attach a statement. YES NO
- Has a 164(6) election been made? If "Yes", attach a statement. YES NO
- Is the trust one of a multiple of trusts created as a consequence of contributions to the trusts by an individual? If "YES", attach a statement. YES NO

Statement of Investment Income (Guide items 28 to 35)

State names of payers in appropriate areas and enclose any information slips received. If space below is insufficient attach statements.

A. Actual Amount of Dividends from Taxable Canadian Corporations (from boxes A and B on T3 slips or Boxes A and E on T5 slips)

Include amounts credited through banks, trust companies, brokers etc.
1. Dividends Eligible for Interest and Dividend Income Deduction — *do not include dividends received from a corporation not dealt with at arm's length* (Guide item 29)

Total dividends eligible for interest and dividend income deduction (Enter this amount on line 05 on page 2)

601

2. Dividends Not Eligible for Interest and Dividend Income Deduction — *include dividends received from a corporation not dealt with at arm's length* (Guide item 30)

Total dividends not eligible for interest and dividend income deduction (Enter this amount at line 06 on page 2)

602

B. Interest from Canadian Sources Eligible for Interest and Dividend Income Deduction

Interest—Bonds, from Trust, Bank or other Deposits (specify) (Guide item 31)

Interest from Mortgages, Notes and other Securities (except interest received from a related person and from a partnership by a partner which is to be reported under C.)

Total Interest from Canadian Sources Eligible for Interest and Dividend Income Deduction (Enter this amount at line 07 on page 2)

603

C. Investment Income Not Eligible for Interest and Dividend Income Deduction

Other Canadian Investment Income (specify) (Guide item 32)

Interest and Other Investment Income from Foreign Sources

Total Investment Income Not Eligible for Interest and Dividend Income Deduction (enter this amount at line 08 on page 2)

604

D. Eligible Interest to be allocated (Guide item 33)

Eligible interest per (B) above

Add: Eligible interest reported on financial statements and included in determining the amounts reported on page 2, lines 01 to 04

Total Eligible Interest Available for Allocation (Enter at line 113 of Trust Schedule 1)

605

E. Interest Expense Related to Eligible Interest and Dividend Income

Total Interest Expense (included in carrying charges or in financial statements) Incurred to Earn Eligible Dividends and Interest (Enter at line 119 of Trust Schedule 1) (Guide item 35)

606

Less: Interest expense on that portion of the eligible income being allocated to beneficiaries (Guide item 25B)

607

Interest expenses on eligible income not allocated to beneficiaries

608

Name of Person or Company (Other than Trustee/Executor/Administrator) who prepared this return (Guide item 36B)		CERTIFICATION (Guide item 36A) I, _____ (Print Name) HEREBY CERTIFY that the information given in this return—form T3 and related T3 Supplementary (when required)—and in any documents attached is true, correct and complete and fully discloses the income from all sources for the period covered; and that non-resident tax has been withheld where required and remitted to the Department	
Address in full			
Postal Code	Telephone Number	Signature of Authorized Person	
		Date _____ 19__	