

Alberta Seniors Benefit Income information form

Alberta Seniors and Housing
Seniors Financial Assistance
PO Box 3100
Edmonton AB T5J 4W3

Complete this form if you have not filed your income tax return for the previous calendar year. Please complete pages 1 and 2 of this form. Provide your previous year's income in **annual amounts only and include T-slips**.

Applicant Name	Personal Health Number
Spouse Name	Personal Health Number

If you (and/or your spouse) had no income from any source, check the box, sign and date the back of this form. →	<input type="checkbox"/> I had no income (applicant)
	<input type="checkbox"/> I had no income (spouse)

Income year: _____ (January to December YYYY)	APPLICANT ANNUAL INCOME	SPOUSE ANNUAL INCOME
Old Age Security		
Net Federal Supplements (Guaranteed Income Supplement, Allowance)		
Canada Pension Plan		
Canada Pension Plan Disability		
Canada Pension Plan Death Benefit		
Seniors Benefit / Social Assistance		
Private or foreign pensions (in Canadian funds)		
Employment income (provide description of work below) _____		
Employment Insurance		
Emergency Response Benefits (CERB, CRB etc.)		
Worker's Compensation		
Alimony/Maintenance received		
Taxable Capital Gains		
Investment and Interest Income		
Taxable Dividends		
Registered Retirement Savings Plan income		
Registered Disability Savings Plan income		
Other income (net rental/ net self-employed)		
TOTAL YEARLY INCOME (add above amounts) →		

Page 1 of 2 (complete and sign the back of this form)

If applicable, please report contributions or commission expenses below and provide T-slips:	APPLICANT ANNUAL INCOME	SPOUSE ANNUAL INCOME
Registered Pension Plan Contributions		
Registered Retirement Savings Plan Contributions		
Employment Commission Expenses		

Declaration and Signature

I declare that, to the best of my knowledge, the information given on this income information form is true and complete. I acknowledge that any difference between the income information I provided and my actual income may result in receiving benefits for which I am not eligible and which I may be required to repay.

Applicant Signature:	Date
Spouse Signature:	Date

Explanation of decrease in income, if greater than \$1,000:	Event Date
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Final considerations before returning your form.

- Enter full **annual** income amounts only. If you use monthly amounts, you will need to complete a new form.
- Report all income received during the previous calendar year and provide T-slips for income sources where applicable.
- Please send photocopies of documents, as originals may not be returned.
- If your current income has decreased and you are applying for the first time (or have not received benefits) refer to our website for information on income estimates.

Please return both pages of this form using one of the following options:

Online: www.seniors-housing.alberta.ca/submit-documents/

By fax: 780-422-5954

By mail: Alberta Seniors and Housing

PO Box 3100 Edmonton AB T5J 4W3

For more information on seniors programs, please visit www.alberta.ca/seniors-financial-assistance.aspx or call the Alberta Supports Contact Centre at 1-877-644-9992.

Commonly Used CRA Income Tax Return line numbers

Line 15000 Total income	Line 20700 Registered Pension Plan deduction
Line 11300 Old Age Security pension	Line 20800 Registered Retirement Savings Plan deduction
Line 12500 Registered Disability Savings Plan (RDSP) income	Line 11500 Other pension / superannuation
Line 14500 Social Assistance payments	Line 12100 Interest / investment
Line 14600 Net federal supplements (GIS/Allowance)	Line 10100/22900* Employment Income / Other employment expenses

*Up to \$3,600 of line 10100 or 22900 (whichever is higher) is deducted from your total income

Collection of Personal Information: The personal information provided on this form is collected under the authority of the *Seniors Benefit Act* (RSA 2000) and the *Seniors Benefit Act General Regulation* and managed in accordance with the *Freedom of Information and Protection of Privacy Act* (RSA 2000). The information will be used for the purpose of administering the Alberta Seniors Financial Assistance Programs, including the Alberta Seniors Benefit, Dental and Optical Assistance for Seniors.