

AvanTax Filing Services 2024

Import File Layout



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1 Headings for Import Files

Column headings are used by the import function to identify the information in the column; the keyword "NULL" can be used as the heading of any column you wish the import to ignore. You may also enter "NULL" into the first cell of any row (column A) if you wish the import to ignore that entire row. If data exceeds the maximum size of a field, an error message will be given and the import process will be halted. Where applicable, default data that will be used if a field is empty (or not represented in the import file); these values are listed in the Comments & Examples column in **bold** print. The various formats used are described below:

- **Text** - Text fields may contain letters, numbers, spaces and punctuation. In some cases, they must be in upper case (such as Province, Postal and Country codes); otherwise, mixed case is acceptable.
- **X, Yes, Blank, No** - X, Yes, Blank, No fields contain logical data and consist of "Y", "1", "Yes" or "X" for "Yes"; "N", "0", "No" or leave the field blank for "No."
- **Currency** - Currency fields contain dollar amounts and are formatted either in dollars and cents or in dollars only. If no decimal value is entered a whole dollar amount will be assumed.
- **Numeric** - Numeric fields may only contain numbers; either integer or decimal. The number of decimal places will be specified if applicable.

Cell A1 must contain a heading defining the type of data to import. The table below shows the appropriate heading for each form (click on any form for detailed heading information):

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1.1 Company Headings

Cell A1 must contain the word "COMPANY"

Heading	Description	Type, Size	Comments & Examples
NAME1	Line 1 of company name	Text, 35	
NAME2	Line 2 of company name	Text,30	
CAREOF	Care of line of address	Text,30	
ADDRESS1	Line 1 of address	Text,30	
ADDRESS2	Line 2 of address	Text,30	
CITY	City	Text,28	
PROV	Province code	Text,2	ON, QC, BC...
POSTAL	Postal code (including space)	Text,10	
COUNTRY	Country code	Text,3	CAN , USA...
DEFPROVEMP	Usual province of employment	Text,2	
ACCOUNTNO	Business number	Text,15	
EIFACTOR	Employer's EI rate	Numeric, 8	4 digits + 4 decimals
CATEGORY	Company category code, used to group companies for printing & etc.	Text 10	
WEBCODE	Web Access Code; recorded here for reference	Text, 6	
ACCOUNTNO	Business number (RP)	Text,15	123456789RP0001
ACCOUNTNORZ	Account number for T5, T5007, T5008 & RRSP returns (RZ)	Text, 15	123456789RZ0001
ACCOUNTNORZ_T5013	Account number for T5013 returns (RZ)	Text, 15	123456789RZ0001
ACCOUNTNORZ_T5018	Account number for T5018 returns (RZ)	Text, 15	123456789RZ0001
ACCOUNTNORZ_TFSA	Account number for TFSA returns (RZ)	Text, 15	123456789RZ0001
ACCOUNTNONR	Non-resident tax account number (NR)	Text, 15	NR?123456
NEQ	Québec Enterprise number	Text,10	
IDNOQ	Québec Identification number and file number (RS)	Text,16	1234567890RS0001
ADJCPPOU	Adjust CPP/QPP if over max. or under min.	Yes/No	Mutually exclusive with ADJCPPWKS
ADJCPPWKS	Adjust CPP/QPP based on number of pensionable weeks	Yes/No	Mutually exclusive with ADJCPPOU
ADJMAXPENWKS	Maximum number of pensionable weeks	Numeric, 2	2 digits
ADJEIOVERMAX	Adjust EI if over annual maximum	Yes/No	
ADJEIONEARN	Adjust EI premiums based on EI earnings	Yes/No	Mutually exclusive with ADJEIEARN
ADJEIEARN	Adjust EI earnings based on EI premiums	Yes/No	Mutually exclusive with

Heading	Description	Type, Size	Comments & Examples
ADJPPIPOVERMAX	Adjust PPIP if over annual maximum	Yes/No	ADJEIONEARN
ADJPPIPONEARN	Adjust PPIP premiums based on PPIP earnings		Mutually exclusive with ADJPPIPEARN
ADJPPIPEARN	Adjust PPIP earnings based on PPIP premiums	Yes/No	Mutually exclusive with ADJPPIPONEARN
ADJXFRSIN	SIN of individual to whom over-remittances will be transferred	Text, 9	
ADJXFRINCR	Increase gross pay of individual indicated by ADJXFRSIN by amount of over-remittance	Yes/No	
ADJMIN	Only differences greater than the amount indicated will be adjusted	Currency	1.00
ADJBDO	Adjust CPP/QPP/EI/PPIP to calculated amounts even if there is insufficient tax to offset the adjustment	Yes/No	
ADJBDOMAX	Maximum amount by which tax may be reduced	Currency	9,999.99
UNLINKT5RL3	Disable numeric data synchronization between T5 and Relevé 3 slips ("No" is default; maintaining sync.)	Yes/No	"Yes" disables synchronization, "No" maintains synchronization See Company Setup for details

1.2 AGR-1 Headings

Cell A1 must contain "AGR1"

Heading	Description	Type, Size	Comments & Examples
RECTYPE	Recipient type	Text, 1	1 - Individual 3 - Corporation 4 - Association, trust, club or partnership
NAME1	Recipient name line 1 (type 3 & 4)	Text, 50	Required; type 3 & 4
NAME2	Recipient name line 2 (type 3 & 4)	Text, 50	
LASTNAME	Recipient last name (type 1)	Text, 30	Required; type 1, 3 & 4
FIRSTNAME	Recipient first name (type 1)	Text, 30	
INITIAL	Recipient initial (type 1)	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	ON, QC, etc.
POSTAL	Postal code	Text, 10	
COUNTRY	Country	Text, 3	CAN, USA, etc.
YEAR	Year	Numeric, 4	2020
SIN	SIN	Numeric, 9	
SEQUENCE	Sequence Number	Numeric, 9	
TRUST	Trust account number	Text, 9	
PARTNERSHIP	Partnership account number	Text, 15	
RECBN	Business number	Text, 15	
INCOME	Income, grants and subsidies (14)	Currency	
GAIN	Gain on settlement of debt (15)	Currency	
INSURANCE	Gross insurance proceeds (16)	Currency	
OVERPAY	Overpayment recapture (17)	Currency	
INVESTMENT	Investment income (18)	Currency	
FOOTNOTES	Footnotes (22)	Text, 60	
PRGCODE1	Program 1 code	Numeric, 3	
PRGNAME1	Program 1 name	Text, 60	
PRGAMOUNT1	Program 1 amount	Currency	
PRGBOX1	Program 1 box	Numeric, 2	

Heading	Description	Type, Size	Comments & Examples
PRGCODE2	Program 2 code	Numeric, 3	
PRGNAME2	Program 2 name	Text, 60	
PRGAMOUNT2	Program 2 amount	Currency	
PRGBOX2	Program 2 box	Numeric, 2	
PRGCODE3	Program 3 code	Numeric, 3	
PRGNAME3	Program 3 name	Text, 60	
PRGAMOUNT3	Program 3 amount	Currency	
PRGBOX3	Program 3 box	Numeric, 2	
PRGCODE4	Program 4 code	Numeric, 3	
PRGNAME4	Program 4 name	Text, 60	
PRGAMOUNT4	Program 4 amount	Currency	
PRGBOX4	Program 4 box	Numeric, 2	
PRGCODE5	Program 5 code	Numeric, 3	
PRGNAME5	Program 5 name	Text, 60	
PRGAMOUNT5	Program 5 amount	Currency	
PRGBOX5	Program 5 box	Numeric, 2	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	
NOTES	Notes	Text, 255	

1.3 FHSA Headings

Cell A1 must contain "FHSA"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Recipient last name	Text, 30	Required
FIRSTNAME	Recipient first name	Text, 30	
INITIAL	Recipient initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	
SLIPSTATUS	Status of slip	Text, 1	
CONTRIBUTIONS	Contributions (18)	Currency	
QUALIFYINGWITHDRAWALS	Qualifying withdrawals (20)	Currency	
TAXABLEWITHDRAWALS	Taxable withdrawals (22)	Currency	
BENEFICIARYDISTRIBUTIONSRECEIVED	FHSA beneficiary distributions received (24)	Currency	
DEEMEDRECEIVEDONCESSATION	Amount deemed received on FHSA cessation (26)	Currency	
SECURITYFORLOAN	Security for a loan (28)	Currency	
INCOMETAX	Income tax deducted (30)	Currency	
RRSPTRANSFERSIN	RRSP transfers in (32)	Currency	
SPOUSALRRSPTRANSFERSIN	Spousal RRSP transfers in (34)	Currency	
DESIGNATEDTRANSFERSOUT	Designated - RRSP/RRIF transfers out (36)	Currency	
DESIGNATEDWITHDRAWALS	Designated - Withdrawals (38)	Currency	
SIN	Social insurance number (12)	Text, 9	
FHSAContractNumber	FHSA contract Number (14)	Text, 30	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	

Heading	Description	Type, Size	Comments & Examples
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.4 FHSAX Headings

Cell A1 must contain "FHSAX"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Recipient last name	Text, 30	Required
FIRSTNAME	Recipient first name	Text, 30	
INITIAL	Recipient initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	
SIN	Social insurance number	Text, 9	
FHSACONTRACTNUMBER	FHSA contract number	Text, 30	
DATEOFBIRTH	Recipient date of birth	Date	Mmm, dd, yyyy
DATEOFDEATH	Recipient date of death	Date	Mmm, dd, yyyy
HOLDERDEATHFAIRMARKETVALUE	Fair market value at time of death	Currency	
UNIQUESLIPNUMBER	Unique slip number (USN)	Text, 20	
SLIPSTATUS	Slip report type code	Text, 1	O - Original, A - Amended or C - Cancelled
FHSANEWACCOUNTINDICATOR	New FHSA account indicator	Yes/No	
FHSAACCOUNTCLOSEDINDICATOR	FHSA account closed indicator	Yes/No	
FHASACCOUNTCLOSEDDATE	FHSA account closed date	Date	Mmm, dd, yyyy
FHSASUCCESSORACCOUNTINDICATOR	Successor holder account indicator	Yes/No	
FHSABENEFICIARYINDICATOR	FHSA beneficiary indicator	Yes/No	
TOTALHFSADISTRIBUTIONBENEFICIARYCOUNT	Total number of beneficiaries	Numeric, 6	
DECEASEDACCOUNTHOLDERFHSACONTRACTNUMBER	Deceased account holder FHSA contract number	Text, 30	
DECEASEDACCOUNTHOLDERSIN	Deceased account holder SIN	Text, 9	
DECEASEDACCOUNTHOLDERDEATHDATE	Deceased account holder date of death	Date	Mmm, dd, yyyy
CALENDARYEARENDFAIRMARKETVALUE	Calendar year-end fair market value	Currency	
TRANSACTIONDATE	Transaction date	Date	Mmm, dd, yyyy

Heading	Description	Type, Size	Comments & Examples
TRANSACTIONSEQUENCE	Transaction sequence on this day for this USN	Numeric, 10	
CONTRIBUTION	Contribution	Currency	
FHSADEEMEDTRANSFER	FHSA deemed transfer	Currency	
QUALIFYINGWITHDRAWAL	Qualifying withdrawal	Currency	
TAXABLEWITHDRAWAL	Taxable withdrawal	Currency	
INCOMETAXDEDUCTED	Income tax deducted	Currency	
FHSATRANSFERIN	FHSA transfer in	Currency	
FHSATRANSFEROUT	FHSA transfer out	Currency	
RRSPTRANSFERIN	RRSP transfer in	Currency	
SPOUSALRRSPTRANSFERIN	Spousal RRSP transfer in	Currency	
FAIRMARKETVALUEIMMEDIATELY PRIORTRANSFEROUT	Fair market value immediately prior to transfer out	Currency	
RRSPRRIFTRANSFEROUT	RRSP/RRIF transfer out	Currency	
DESIGNATEDRRSPRRIFTRANSFEROUT	Designated - RRSP/RRIF transfer out	Currency	
DESIGNATEDWITHDRAWAL	Designated - withdrawal	Currency	
FHSABENEFICIARYDISTRIBUTIONOUT	FHSA beneficiary distribution out	Currency	
FHSABENEFICIARYDISTRIBUTIONRECEIVED	FHSA beneficiary distribution received	Currency	
FHSATRANSFEROUTTOSURVIVOR	FHSA transfer out to survivor	Currency	
RRSPRRIFTRANSFEROUTTOSURVIVOR	RRSP/RRIF transfer out to survivor	Currency	
SURVIVORFHSATRANSFERIN	Survivor FHSA transfer in	Currency	
FHSACESSATIONHOLDERDEEMEDRECEIVED	Amount deemed received on FHSA cessation	Currency	
SECURITYFORLOAN	Security for a loan	Currency	
NONQUALIFIEDINVESTMENTACQUISITION	Acquisition of non-qualified investment	Currency	
NONQUALIFIEDINVESTMENTDISPOSITION	Disposition of non-qualified investment	Currency	
MARRIAGEBREAKDOWNFHSATRANSFERIN	Marriage breakdown - FHSA transfer in	Currency	
MARRIAGEBREAKDOWNFHSATRANSFEROUT	Marriage breakdown - FHSA transfer out	Currency	
MARRIAGEBREAKDOWNRRSPRRIFTRANSFEROUT	Marriage breakdown - RRSP/RRIF transfer out	Currency	
ACCOUNTHOLDERFORMERS	Family name of former spouse or	Text, 30	

Heading	Description	Type, Size	Comments & Examples
POUSEFAMILYNAME	common-law partner		
ACCOUNTHOLDERFORMERS POUSEGIVENNAME	Given name of former spouse or common-law partner	Text, 30	
ACCOUNTHOLDERFORMERS POUSESIN	SIN of former spouse or common-law partner	Text, 9	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.5 NR4 Headings

Cell A1 must contain "NR4"

Heading	Description	Type, Size	Comments & Examples
NAME1	Recipient name line 1 (type 3, 4 & 5)	Text, 50	Required; type 3, 4 & 5
NAME2	Recipient name line 2 (type 3, 4 & 5)	Text, 50	
LASTNAME1	First recipient last name (type 1 & 2)	Text, 30	Required; type 1 & 2
FIRSTNAME1	First recipient first name (type 1 & 2)	Text, 30	
INITIAL1	First recipient initial (type 1 & 2)	Text, 1	
LASTNAME2	Second recipient last name (type 1 & 2)	Text, 30	
FIRSTNAME2	Second recipient first name (type 1 & 2)	Text, 30	
INITIAL2	Second recipient initial (type 1 & 2)	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	CAN, USA, etc.
SLIPSTATUS	Status of slip	Text, 1	O - Original, A - Amended or C - Cancelled
TAXYEAR	Year (10)	Numeric, 4	2020
RECTYPE	Recipient Type (11)	Text, 1	1 - Individual 2 - Joint account 3 - Corporation 4 - Association, trust, club or partnership 5 - Gov't or int'l org.
COUNTRYCODE	Country code (12)	Text, 3	
PAYERID	Payer or remitter Identification Number	Text, 20	
SIN	Foreign Social Security or Insurance No.	Text, 20	
INCOMECODE1	Income Code (14)	Text, 2	02, 03, etc.
CURRENCYCODE1	Currency code (15)	Text, 3	CAD, USD, etc.
INCOME1	Gross Income (16)	Currency	
TAX1	Non-resident tax withheld (17)	Currency	
EXEMPTIONCODE1	Exemption code (18)	Text, 1	I, C, etc.
INCOMECODE2	Income Code (24)	Text, 2	02, 03, etc.
CURRENCYCODE2	Currency code (25)	Text, 3	CAD, USD, etc.
INCOME2	Gross Income (26)	Currency	

Heading	Description	Type, Size	Comments & Examples
TAX2	Non-resident tax withheld (27)	Currency	
EXEMPTIONCODE2	Exemption code (28)	Text, 1	I, C, etc.
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.6 RRSP Headings

Cell A1 must contain "RRSP"

Heading	Description	Type, Size	Comments & Examples
LASTNAME1	Contributor last name	Text, 35	Required
FIRSTNAME1	Contributor first name	Text, 47	
INITIAL1	Contributor initial	Text, 1	
LASTNAME2	Annuitant last name	Text, 35	
FIRSTNAME2	Annuitant first name	Text, 47	
INITIAL2	Annuitant initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country code	Text, 3	
SIN1	Contributor Social Insurance Number	Numeric, 9	
SIN2	Annuitant Social Insurance Number	Numeric, 9	
SAMEINDIVIDUAL	Select if contributor and annuitant are same individual	Yes/No	No
SLIPSTATUS	Status of slip	Text, 1	O - Original, A - Amended or C - Cancelled
YEAR	Year of contribution (Numeric, 4	2020
PLANNUMBER	RRSP specimen plan number	Text, 20	
CONTRACTNUMBER	Contract number	Text, 12	
CONTRIBUTORID	Contributor indicator	Numeric, 1	
PRIORAMOUNT	Amount from prior year	Currency	
CURRENTAMOUNT	Amount from current year	Currency	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	

CUSTOMFIELD	GUID or other unique identifier	Text, 50
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20

1.7 T1204 Headings

Cell A1 must contain "T1204"

Heading	Description	Type, Size	Comments & Examples
NAME1	Recipient name line 1	Text, 50	Required
NAME2	Recipient name line 2	Text, 50	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
POSTAL	Postal code (including space)	Text, 10	
PROV	Province code	Text, 2	
COUNTRY	Country, in address	Text, 3	CAN, USA, etc.
YEAR	Year	Numeric, 4	2020
RECTYPE	Recipient type (23)	Text, 1	1 - Sole prop. 3 - Corporation 4 - Partnership
SERVICEPAYMENTS	Service payments (82)	Currency	
MIXEDPAYMENTS	Mixed services payments (84)	Currency	
SIN	Social insurance number (12)	Numeric, 9	
BN	Business number (61)	Text, 15	
PARTNERSHIPID	Partnership's filer ID (86)	Text, 9	
LASTNAME	Sole proprietor's last name	Text, 20	
FIRSTNAME	Sole proprietor's first name	Text, 12	
INITIAL	Sole proprietor's initial	Text, 1	
SLIPSTATUS	Status of slip	Text, 1	O - Original, A - Amended or C - Cancelled
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.8 T215 Headings

Cell A1 must contain "T215"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Employee last name	Text, 30	Required
FIRSTNAME	Employee first name	Text, 30	
INITIAL	Employee initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country code	Text, 3	
YEAR	Year	Numeric, 4	2020
SLIPSTATUS	Status of slip (5)	Text, 1	O - Original, A - Amended C - Cancelled
SIN	Social insurance number (4)	Numeric, 9	
PSPAAMOUNT	PSPA amount (2)	Currency	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.9 T2200 Headings

eForms Standard & Enterprise Only

Cell A1 (import from Excel) or the first data element (import from CSV) must contain "T2200"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Recipient last name	Text, 30	Required
FIRSTNAME	Recipient first name	Text, 30	
INITIAL	Recipient initial	Text, 1	
ADDRESS1	Address line 1 (Home address)	Text, 50	
ADDRESS2	Address line 2 (Business address)	Text, 50	
CITY	City	Text, 6	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	CAN, USA, etc.
SIN	Social insurance number	Numeric, 9	SIN is not required and is not printed but can be used by eForms Enterprise as a password on individual recipient PDFs
TAXYEAR	Taxation year	Numeric, 4	2020
EMPNUM	Employee number	Text, 20	
JOBTITLE	Job title & brief description of duties	Text, 100	
Q1YES	Q. 1, "Expense," Yes	Text, 1	"X" = Checked
Q1NO	Q. 1, "Expense," No	Text, 1	"X" = Checked
Q2FROM	Q. 2, "From date"	Date	Mmm. dd, yyyy (Apr. 1, 2020)
Q2TO	Q. 2, "To date"	Date	Mmm. dd, yyyy (Apr. 1, 2020)
Q2BREAK	Q. 2, "Break in employment"	Text, 60	
Q3AYES	Q. 3, "Commission," Yes	Text, 1	"X" = Checked
Q3ANO	Q. 3, "Commission," No	Text, 1	"X" = Checked
Q3COMMISSION	Q. 3, "Commissions"	Currency	
Q3TYPEOFSALES	Q. 3, "Type of goods or contracts"	Text, 75	
Q3BYES	Q. 3, "Bus. development acc't," Yes	Text, 1	"X" = Checked
Q3BNO	Q. 3, "Bus. development acc't," No	Text, 1	"X" = Checked
Q3CYES	Q. 3, "Commission incl. T4," Yes	Text, 1	"X" = Checked
Q3CNO	Q. 3, "Commission incl. T4," No	Text, 1	"X" = Checked

Heading	Description	Type, Size	Comments & Examples
Q4YES	Q. 4, "Repayment received," Yes	Text, 1	"X" = Checked
Q4NO	Q. 4, "Repayment received," No	Text, 1	"X" = Checked
Q4AMTPROOF	Q. 4, "Received on proof of payment"	Currency	
Q4AMTCHARGED	Q. 4, "Amount charged to employer"	Currency	
Q4TYPEPROOF	Q. 4, "Expense type, Proof"	Text, 75	
Q4TYPECHARGED	Q. 4, "Expense type, Charged"	Text, 75	
Q4PROOFYES	Q. 4, "Expense, Proof, T4," Yes	Text, 1	"X" = Checked
Q4PROOFNO	Q. 4, "Expense, Proof, T4" No	Text, 1	"X" = Checked
Q4CHARGEDYES	Q. 4, "Expense, Charged, T4" Yes	Text, 1	"X" = Checked
Q4CHARGEDNO	Q. 4, "Expense, Charged, T4" No	Text, 1	"X" = Checked
Q5AYES	Q. 5, "Rent office, Yes"	Text, 1	"X" = Checked
Q5ANO	Q. 5, "Rent office, No"	Text, 1	"X" = Checked
Q5BYES	Q. 5, "Pay substitute, Yes"	Text, 1	"X" = Checked
Q5BNO	Q. 5, "Pay substitute, No"	Text, 1	"X" = Checked
Q5CYES	Q. 5, "Pay supplies, Yes"	Text, 1	"X" = Checked
Q5CNO	Q. 5, "Pay supplies, No"	Text, 1	"X" = Checked
Q5DYES	Q. 5, "Pay cell phone, Yes"	Text, 1	"X" = Checked
Q5DNO	Q. 5, "Pay cell phone, No"	Text, 1	"X" = Checked
Q5EYES	Q. 5, "Repay, Yes"	Text, 1	"X" = Checked
Q5ENO	Q. 5, "Repay, No"	Text, 1	"X" = Checked
Q5AMT1	Q. 5, "Expense Amount," Line 1	Currency	
Q5TYPE1	Q. 5, "Expense Type," Line 1	Text, 75	
Q5INCLUDED1YES	Q. 5, "Expense, Incl. T4," Line 1, Yes	Text, 1	"X" = Checked
Q5INCLUDED1NO	Q. 5, "Expense, Incl. T4," Line 1, No	Text, 1	"X" = Checked
Q5AMT2	Q. 5, "Expense Amount," Line 2	Currency	
Q5TYPE2	Q. 5, "Expense Type," Line 2	Text, 75	
Q5INCLUDED2YES	Q. 5, "Expense, Incl. T4," Line 2, Yes	Text, 1	"X" = Checked
Q5INCLUDED2NO	Q. 5, "Expense, Incl. T4," Line 2, No	Text, 1	"X" = Checked
Q5AMT3	Q. 5, "Expense Amount," Line 3	Currency	
Q5TYPE3	Q. 5, "Expense Type," Line 3	Text, 75	
Q5INCLUDED3YES	Q. 5, "Expense, Incl. T4," Line 3, Yes	Text, 1	"X" = Checked
Q5INCLUDED3NO	Q. 5, "Expense, Incl. T4," Line 3, No	Text, 1	"X" = Checked
Q60AYES	Q. 6, "Use Portion," Yes	Text, 1	"X" = Checked
Q6ANO	Q. 6, "Use Portion," No	Text, 1	"X" = Checked
Q6PERCENTAGE	Q. 6, "Percentage of Workday"	Text, 75	
Q6CYES	Q. 6, "Repay," Yes	Text, 1	"X" = Checked

Heading	Description	Type, Size	Comments & Examples
Q6CNO	Q. 6, "Repay," No	Text, 1	"X" = Checked
Q6AMT1	Q. 6, "Expense Amount," Line 1	Currency	
Q6TYPE1	Q. 6, "Expense Type," Line 1	Text, 75	
Q6INCLUDED1YES	Q. 6, "Expense, Incl. T4," Line 1, Yes	Text, 1	"X" = Checked
Q6INCLUDED1NO	Q. 6, "Expense, Incl. T4," Line 1, No	Text, 1	"X" = Checked
Q6AMT2	Q. 6, "Expense Amount," Line 2	Currency	
Q6TYPE2	Q. 6, "Expense Type," Line 2	Text, 75	
Q6INCLUDED2YES	Q. 6, "Expense, Incl. T4," Line 2, Yes	Text, 1	"X" = Checked
Q6INCLUDED2NO	Q. 6, "Expense, Incl. T4," Line 2, No	Text, 1	"X" = Checked
Q6AMT3	Q. 6, "Expense Amount," Line 3	Currency	
Q6TYPE3	Q. 6, "Expense Type," Line 3	Text, 75	
Q6INCLUDED3YES	Q. 6, "Expense, Incl. T4," Line 3, Yes	Text, 1	"X" = Checked
Q6INCLUDED3NO	Q. 6, "Expense, Incl. T4," Line 3, No	Text, 1	"X" = Checked
Q7YES	Q. 7, "Area of travel," Yes	Text, 1	"X" = Checked
Q7NO	Q. 7, "Area of travel," No	Text, 1	"X" = Checked
Q7AREA	Q. 7, "Area of travel"	Text, 75	
Q8YES	Q. 8, "Consecutive hours," Yes	Text, 1	"X" = Checked
Q8NO	Q. 8, "Consecutive hours," No	Text, 1	"X" = Checked
Q8HOWFREQUENTLY	Q. 8, "How Frequently"	Text, 75	
Q9AYES	Q. 9, "Vehicle allowance," Yes	Text, 1	"X" = Checked
Q9ANO	Q. 9, "Vehicle allowance," No	Text, 1	"X" = Checked
Q9AMTFIXED	Q. 9, "Fixed allowance amount"	Currency	
Q9PERKMRATE	Q. 9, "Per km rate"	Currency	
Q9AAMTFORKM	Q. 9, "km amount received"	Currency	
Q9AMTONT4	Q. 9, "Amount reported on T4"	Currency	
Q9BYES	Q. 9, "Company vehicle," Yes	Text, 1	"X" = Checked
Q9BNO	Q. 9, "Company vehicle," No	Text, 1	"X" = Checked
Q9CYES	Q. 9, "Expense," Yes	Text, 1	"X" = Checked
Q9CNO	Q. 9, "Expense," No	Text, 1	"X" = Checked
Q9AMT1	Q. 9, "Expense Amount," Line 1	Currency	
Q9TYPE1	Q. 9, "Expense Type," Line 1	Text, 75	
Q9AMT2	Q. 9, "Expense Amount," Line 2	Currency	
Q9TYPE2	Q. 9, "Expense Type," Line 2	Text, 75	
Q9AMT3	Q. 9, "Expense Amount," Line 3	Currency	
Q9TYPE3	Q. 9, "Expense Type," Line 3	Text, 75	
Q10YES	Q. 10, "Other expenses," Yes	Text, 1	"X" = Checked

Heading	Description	Type, Size	Comments & Examples
Q10NO	Q. 10, "Other expenses," No	Text, 1	"X" = Checked
Q10TYPEOTHER	Q. 10 "Other expense description"	Text, 75	
Q11AYES	Q. 11, "Tradesperson," Yes	Text, 1	"X" = Checked
Q11ANO	Q. 11, "Tradesperson," No	Text, 1	"X" = Checked
Q11BYES	Q. 11, "Purchase tools," Yes	Text, 1	"X" = Checked
Q11BNO	Q. 11, "Purchase tools," No	Text, 1	"X" = Checked
Q11CYES	Q. 11, "Satisfy," Yes	Text, 1	"X" = Checked
Q11CNO	Q. 11, "Satisfy," No	Text, 1	"X" = Checked
Q12AYES	Q. 12, "Apprentice," Yes	Text, 1	"X" = Checked
Q12ANO	Q. 12, "Apprentice," No	Text, 1	"X" = Checked
Q12BYES	Q. 12, "Designation," Yes	Text, 1	"X" = Checked
Q12BNO	Q. 12, "Designation," No	Text, 1	"X" = Checked
Q12CYES	Q. 12, "Purchase Tools," Yes	Text, 1	"X" = Checked
Q12CNO	Q. 12, "Purchase Tools," No	Text, 1	"X" = Checked
Q12DYES	Q. 12, "Used for work," Yes	Text, 1	"X" = Checked
Q12DNO	Q. 12, "Used for work," No	Text, 1	"X" = Checked
Q13AYES	Q. 13, "Forestry," Yes	Text, 1	"X" = Checked
Q13ANO	Q. 13, "Forestry," No	Text, 1	"X" = Checked
Q13BYES	Q. 13, "Provide Saw," Yes	Text, 1	"X" = Checked
Q13BNO	Q. 13, "Provide Saw," No	Text, 1	"X" = Checked
EMAILADDRESS	Recipient email address	Text, 255	eForms Enterprise only One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	eForms Enterprise only
COMPANY.NAME1	Company associated with slip	Text, 35	eForms Enterprise only
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	eForms Enterprise only
SLIPTAG	Subset tag	Text, 10	eForms Enterprise only
CUSTOMFIELD	GUID or other unique identifier	Text, 50	eForms Enterprise only
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	eForms Enterprise only

1.10 T2202 Headings

Cell A1 must contain "T2202"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Recipient last name	Text, 50	Required
FIRSTNAME	Recipient first name	Text, 50	
INITIAL	Recipient initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	CAN, USA, etc.
SLIPSTATUS	Status of slip	Text, 1	O - Original, A - Amended or C - Cancelled
SIN	Student's Social Insurance Number	Numeric, 9	
PROGRAMNAME	Name of program of study	Text, 50	
TAXYEAR	Taxation year	Numeric, 4	2020
FLYINGSCHOOLCOURSETYPE	Flying school course type. NOTE: The value for "School Type Code" is not imported but is entered manually on the summary, from which it is reported on each T2202 form.	Text, 1	1 - Private pilot's license 2 - Commercial pilot's licence 3 - Civil flying instructor rating 4 - Helicopter category rating 5 - Instrument rating 6 - Other
STUDENTNUMBER	Student number	Text, 15	
FROMYEAR1	From: Year, line 1	Numeric, 4	
FROMMONTH1	From: Month, line 1	Numeric, 2	1 to 12
TOYEAR1	To: Year, line 1	Numeric, 4	2020
TOMONTH1	To: Month, line 1	Numeric, 2	1 to 12
TUITIONFEES1	Eligible tuition fees, line 1	Currency	
PARTTIMEMONTHS1	Number of months for: Part-time, line 1	Numeric, 2	1 to 12
FULLTIMEMONTHS1	Number of months for: Full-time, line 1	Numeric, 2	1 to 12

Heading	Description	Type, Size	Comments & Examples
FROMYEAR2	From: Year, line 2	Numeric, 4	2020
FROMMONTH2	From: Month, line 2	Numeric, 2	1 to 12
TOYEAR2	To: Year, line 2	Numeric, 4	2020
TOMONTH2	To: Month, line 2	Numeric, 2	1 to 12
TUITIONFEES2	Eligible tuition fees, line 2	Currency	
PARTTIMEMONTHS2	Number of months for: Part-time, line 2	Numeric, 2	1 to 12
FULLTIMEMONTHS2	Number of months for: Full-time, line 2	Numeric, 2	1 to 12
FROMYEAR3	From: Year, line 3	Numeric, 4	2020
FROMMONTH3	From: Month, line 3	Numeric, 2	1 to 12
TOYEAR3	To: Year, line 3	Numeric, 4	2020
TOMONTH3	To: Month, line 3	Numeric, 2	1 to 12
TUITIONFEES3	Eligible tuition fees, line 3	Currency	
PARTTIMEMONTHS3	Number of months for: Part-time, line 3	Numeric, 2	1 to 12
FULLTIMEMONTHS3	Number of months for: Full-time, line 3	Numeric, 2	1 to 12
FROMYEAR4	From: Year, line 4	Numeric, 4	2020
FROMMONTH4	From: Month, line 4	Numeric, 2	1 to 12
TOYEAR4	To: Year, line 4	Numeric, 4	2020
TOMONTH4	To: Month, line 4	Numeric, 2	1 to 12
TUITIONFEES4	Eligible tuition fees, line 4	Currency	
PARTTIMEMONTHS4	Number of months for: Part-time, line 4	Numeric, 2	1 to 12
FULLTIMEMONTHS4	Number of months for: Full-time, line 4	Numeric, 2	1 to 12
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	

Heading	Description	Type, Size	Comments & Examples
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.11 T3 Headings

Cell A1 must contain "T3"

Heading	Description	Type, Size	Comments & Examples
NAME1	Recipient name line 1 (type 3, 4 & 5)	Text, 35	Required; type 3, 4 & 5
NAME2	Recipient name line 2 (type 3, 4 & 5)	Text, 35	
LASTNAME1	First recipient last name (type 1 & 2)	Text, 25	Required; type 1 & 2
FIRSTNAME1	First recipient first name (type 1 & 2)	Text, 40	
INITIAL1	First recipient initial (type 1 & 2)	Text, 1	
LASTNAME2	Second recipient last name (type 1 & 2)	Text, 25	
FIRSTNAME2	Second recipient first name (type 1 & 2)	Text, 40	
INITIAL2	Second recipient initial (type 1 & 2)	Text, 1	
ADDRESS1	Address line 1	Text,30	
ADDRESS2	Address line 2	Text,30	
CITY	City	Text,28	
PROV	Province code	Text,2	
POSTAL	Postal code	Text, 10	
COUNTRY	Country	Text ,3	CAN, USA, etc.
SLIPSTATUS	Status of Slip	Text,1	O - Original , A - Amended or C - Cancelled
RECTYPE	Beneficiary code	Text,1	1 - Individual 2 - Joint account 3 - Corporation 4 - Association, trust, club or partnership 5 - Government or international organization
SIN	Recipient's SIN, Business number or Trust account number	Text,15	000000000 000000000RP0000 T00000000
TEXTATTOP	Optional text to print at top of slip	Text,15	
ACTUAL_E	Actual amount of eligible dividends	Currency	
TAXABLE_E	Taxable amount of eligible dividends	Currency	
CREDIT_E	Dividend tax credit for eligible dividends	Currency	
CAPITALGAINS	Total capital gains	Currency	
CAPITALGAINS_E	Total capital gains eligible for deduction	Currency	
ACTUAL	Actual amount of dividends other than eligible dividends	Currency	
TAXABLE	Tax able amount of dividends other than eligible dividends	Currency	
CREDIT	Dividend tax credit for dividends other	Currency	

Heading	Description	Type, Size	Comments & Examples
	than eligible dividends		
OTHERINCOME	Other income	Currency	
FOOTNOTE1	FOOTNOTE1	Text,30	
FOOTNOTE2	FOOTNOTE2	Text,30	
FOOTNOTE3	FOOTNOTE3	Text,30	
<i>Other boxes where # is one numeral (1 to 6):</i>			
OTHERCODE#	Other code #		
OTHERAMOUNT#	Other amount for code #	Currency	
ITCCODE	Investment tax credit code	Text, 1	1,2,3,4,5,6,7
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.12 T4 & RL-1 Headings

Cell A1 must contain "T4"

Use this table to import Relevé 1 data with T4 data, [see bottom of this table](#) for Relevé 1 specific fields

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Employee last name	Text, 30	Required
FIRSTNAME	Employee first name	Text, 30	
INITIAL	Employee initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country code	Text, 3	
SIN	Social insurance number (12)	Text, 9	
PROVEMP	Province of employment (10)	Text, 2	"QC" forces creation of Relevé 1
EMPNUM	Employee number, reference number	Text, 20	
EMPCODE	Employment code (29)	Text, 2	
CPPWEEKS	Weeks eligible for CPP	Numeric, 4	2 digits + 2 decimals: 52.00 , 52.5, etc.
SLIPSTATUS	Status of slip	Text, 1	O - Original , A - Amended or C - Cancelled (R , A or D will be shown on filed Relevé 1s)
TAXYEAR	Taxation year	Numeric, 4	2020
INCOME	Employment income (14)	Currency	
CPP	CPP contributions (16)	Currency	
QPP	QPP contributions (17, B)	Currency	
CPP2	CPP2 contributions (16A)	Currency	2024 and later
QPP2	QPP2 contributions (17A)	Currency	2024 and later
EI	EI premiums (18, C)	Currency	
RPP	Reg. Pension plan contr. (20)	Currency	
TAX	Federal income tax deducted (22)	Currency	
EIEARN	EI insurable earnings (24)	Currency	EIEARN & CPPEARN will default to 0.00 if no data is imported; marked as overridden fields on the
CPPEARN	CPP pensionable earnings (26)	Currency	

Heading	Description	Type, Size	Comments & Examples
			T4 and will not be recalculated as Box 14 is modified.
CPPEXEMPT	CPP exempt (28)	Yes/ No	No
EIEXEMPT	EI exempt (28)	Yes/ No	No
PPIPEXEMPT	PPIP exempt (28)	Yes/ No	No
NOCPPADJUST	Do not adjust CPP	Yes/ No	No
NOEIADJUST	Do not adjust EI	Yes/ No	No
NOPPIPADJUST	Do not adjust PPIP	Yes/ No	No
UNION	Union dues (44)	Currency	
DENTALBENEFITS	Employer-offered dental benefits (45)	Text, 1	
CHARITABLE	Charitable donations (46)	Currency	
PENSIONNO	RPP/DPSP number (50)	Text, 7	
PENSION	Pension adjustment (52)	Currency	
PPIP	PPIP premiums (55, H)	Currency	
PPIPEARNS	PPIP earnings (56, I)	Currency	
<i>Generic boxes where # is one numeral (1 to 6):</i>			
OTHERCODE#	Other information - Box # code	Text, 2	
OTHERAMT#	Other information - Box # amount	Currency	
NETPAYOTHER	Other deductions from Net Pay	Currency	For net pay calc.
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
ADDITIONAL HEADINGS FOR Relevé 1 FIELDS			
CODEBOXOR1	Code for Box O	Text, 2	
IDNOQ	Recipient Quebec identification number	Numeric, 10	
ISBUSINESS	Recipient is business	Yes/ No	No
INCOMER1	Employment income (A)	Currency	
	Box B: See QPP in T4 section above		
	Box C: See EI in T4 section above		
RPPR1	Reg. Pension plan contr. (D)	Currency	

Heading	Description	Type, Size	Comments & Examples
TAXR1	Québec income tax deducted (E)	Currency	
UNIONR1	Union dues (F)	Currency	
QPPEARN	QPP pensionable earnings (G) Box H: See PPIP in T4 section above Box I: See PPIP in T4 section above	Currency	Must contain data
HEALTHR1	Private health insurance (J)	Currency	
TRAVELR1	Travel (K)	Currency	
OTHERTBR1	Other taxable benefits (L)	Currency	
COMMISSIONS	Employment commissions (M)	Currency	
CHARITABLER1	Charitable donations (N)	Currency	
OTHERINC	Other taxable income (O)	Currency	
INSURANCE	Multi-employer insurance (P)	Currency	
DEFERRED	Deferred salary (Q)	Currency	
INDIANINC	Exempt income for an Indian (R)	Currency	
TIPS	Tips received (S)	Currency	
TIPALLOCATED	Tips allocated (T)	Currency	
PHASEDRETIRE	Phased retirement (U)	Currency	
HOUSING	Meals and accommodation (V)	Currency	
AUTOR1	Personal use of auto (W)	Currency	
FNOTE1R1	Footnote #1	Text, 30	
FNOTE2R1	Footnote #2	Text, 30	
FNOTE3R1	Footnote #3	Text, 30	
NETPAYOTHERR1	Other deductions from Net Pay	Currency	For net pay calc.
SERIAL	Sequential (Relevé) number of paper slip	Numeric, 9	
SERIALORIGINAL	Sequential (Relevé) number of previously-filed paper slip (user-entered)	Numeric, 9	
SERIALMM	Sequential (Relevé) number of XML slip	Numeric, 9	
SERIALMMPREVIOUS	Sequential (Relevé) number of previously-filed XML slip	Numeric, 9	
TEXTATTOPR1	Optional text to print at top of slip	Text, 15	
<i>Generic boxes where ## is two numerals (01 to 04):</i>			
XBOX##	Additional Information - Box ##: Box number	Text, 7	
XAMT##	Additional Information - Box ##: Currency data	Currency	
XTXT##	Additional Information - Box ##:	Text, 20	

Heading	Description	Type, Size	Comments & Examples
	Character data		
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.13 T4A Headings

Cell A1 must contain "T4A"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Employee last name	Text, 30	Required
FIRSTNAME	Employee first name	Text, 30	
INITIAL	Employee initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country code	Text, 3	
YEAR	Year	Numeric, 4	2020
SLIPSTATUS	Status of slip	Text, 1	O - Original, A - Amended C - Cancelled
SIN	Social insurance number (12)	Numeric, 9	
RECBN	Recipient Business No. (13)	Text, 15	
RECIPIENTNO	Recipient's number (14)	Text, 20	
CORPNAME1	Recipient corporation name line 1	Text, 50	
CORPNAME2	Recipient corporation name line 2	Text, 50	
T4ADENTALCODE	Payer-offered dental benefits (15)	Text, 1	
SUPER	Pension or superannuation (16)	Currency	
LUMPSUM	Lump-sum payments (18)	Currency	
SELF	Self-employed commissions (20)	Currency	
TAX	Income tax deducted (22)	Currency	
ANNUITIES	Annuities (24)	Currency	
RETIRING	Eligible retiring allowances (26)	Currency	
RETIRINGNON	Non-eligible retiring allowances (27)	Currency	
OTHER	Other income (28)	Currency	
PATRONAGE	Patronage allocations (30)	Currency	
PAST	RPP contributions (past service)(32)	Currency	
PENSION	Pension adjustment (34)	Currency	
PENSIONNO	Pension plan reg. number (36)	Text, 7	
RESPACCU	RESP accum. income payments (40)	Currency	

Heading	Description	Type, Size	Comments & Examples
RESPED	RESP educational assist. pay'ts (42)	Currency	
CHARITABLE	Charitable donations (46)	Currency	
FEES	Fees for services (48)	Currency	
RESPPAYMENTSOTHER	RESP accumulated income payments to other (122)	Currency	
RECIPIENTPAIDHEALTHPLANS	Recipient paid premiums for private health services plans (135)	Currency	
LABOURADJUSTMENTBENEFITS	Labour adjustment benefits act and appropriation act (150)	Currency	
SUBPQUALIFIED	SUBP qualified under the Income Tax Act (152)	Currency	
CASHAWARD	Cash award or prize from payer (154)	Currency	
BANKRUPTCY	Bankruptcy settlement (156)	Currency	
UNREGPEN	Unregistered pension plan (109)	Currency	
SIPENSION	Status Indian-pension or superannuation (146)	Currency	
LUMPSUMACC	Lump-sum pymt. accrued to 12/31/71 (110)	Currency	
LUMPSUMSI	Status Indian - Lump-sum payments (148)	Currency	
LUMPSUMRPP	Lump-sum payments (RPP-not eligible) (108)	Currency	
LUMPSUMDPSP	Lump-sum payments (DPSP-not eligible) (180)	Currency	
LUMPSUMNONRES	Lump-sum pymt. (non-resident services) (102)	Currency	
LUMPSUMUNREG	Lump-sum pymt. (unreg'd pension ben.) (190)	Currency	
LUMPSUMNOTRANS	Lump-sum pymt. (no trans.) (158)	Currency	
DPSPANNUITY	Instalment or annuity pymt. under DPSP (115)	Currency	
IAACANNUITY	IAAC annuity (111)	Currency	
RETIRINGSI	Status Indian-eligible retiring allowance (142)	Currency	
RETIRINGNONSI	Status Indian-non-elig. retiring allowance (143)	Currency	
OTHERSI	Status Indian - other income (144)	Currency	
OTHERDPSP	Instalment / annuity under revoked DPSP (115)	Currency	
BOARDSITE	Board and lodging at special work sites (124)	Currency	
MEDTRAVEL	Medical travel (116)	Currency	

Heading	Description	Type, Size	Comments & Examples
LOANBENEFIT	Loan benefit under subsection 80.4(2) (117)	Currency	
RESEARCH	Research Grants (104)	Currency	
SCHOLARSHIP	Scholarships, fellowships, or bursaries (105)	Currency	
WAGELOSS	Income from wage loss plans (107)	Currency	
DEATHBENEFIT	Death benefits (106)	Currency	
MEDBENEFIT	Medical Premium benefit (118)	Currency	
DISABILITY	Disability benefits (125)	Currency	
GROUPTERMLIFE	Group Term Life Insurance Benefit (119)	Currency	
VETERANSBENEFIT	Veteran's benefits (127)	Currency	
APPRENTICESHIPINCENTIVE	Apprenticeship Incentive Grant (130)	Currency	
TAXDEFPATDIVIDENDS	Tax deferred patronage dividends (129)	Currency	
RPPPRE1990	RPP (pre-1990 past service) (126)	Currency	
REGISTEREDDISABILITY	Registered disability savings plan (131)	Currency	
WAGEEARNERPROTECTION	Wage earner protection program (132)	Currency	
VARIABLEPENSION	Variable pension benefits (133)	Currency	
TFSATAXAMOUNT	TFSA taxable amount	Currency	
PARENTSMURDEREDCHILDREN GRANT	Federal support for parents of missing or murdered children (136)	Currency	
NONCONTRIBUTORRPPPPASTSERVICE	Non contributor RPP past service pre-19990 contributions (162)	Currency	
PRPPPAYMENTSTAXABLE	PRPP payments from taxable income (194)	Currency	
PRPPPAYMENTSEXEMPT	PRPP payments from exempt income (195)	Currency	
SASKPENSIONPLANSPOUSALCONTRIBUTORIND	Saskatchewan Pension Plan spousal contributor indicator	Text, 1	
SASKPENSIONPLANSPOUSALCONTRIBUTORSIN	Saskatchewan Pension Plan contributor SIN	Numeric, 9	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.14 T4ANR Headings

Cell A1 must contain "T4ANR"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Recipient last name (type 1)	Text, 30	Required; type 1
FIRSTNAME	Recipient first name (type 1)	Text, 30	
INITIAL	Recipient initial (type 1)	Text, 1	
NAME	Recipient name, line 1 (type 3, 4 & 5)	Text, 30	Required; type 3, 4 & 5
NAME2	Recipient name, line 2 (type 3, 4 & 5)	Text, 30	Required; type 3, 4 & 5
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country	Text, 3	USA
YEAR	Taxation Year	Numeric, 4	2020
RECTYPE	Recipient Code (11)	Text, 1	1 - Individual 3 - Corporation 4- Other (eg. assoc. & trust) 5 - Gov't & etc.
SLIPSTATUS	Status of slip	Text, 1	O - Original, A - Amended or C - Cancelled
BN	Business Number (13)	Text, 15	
INCOME	Income (18)	Currency	
TRAVEL	Travel (20)	Currency	
TAX	Income tax deducted (22)	Currency	
REDUCTION	Reduction authorized (23)	Text, 1	1
SERVICESCITY	City where services rendered	Text, 32	
SERVICESPROV	Province where services rendered	Text, 2	
DAYSINCANADA	Number of days recipient was in Canada	Integer	Max. of 366
FOREIGNSIN	Foreign Social security number (14)	Text, 20	
SIN	Canadian social insurance number (12)	Numeric, 9	
PROFNAME	Professional name (16)	Text, 30	
INDUSTRYCLASSCODE	Non-resident's service industry	Text, 4	
COUNTRYRES	Country of Residence	Text, 3	USA
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	

Heading	Description	Type, Size	Comments & Examples
			One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.15 T4ARCA Headings

Cell A1 must contain "T4ARCA"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Recipient last name	Text, 30	Required
FIRSTNAME	Recipient first name	Text, 30	
INITIAL	Recipient initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country code	Text, 3	
YEAR	Tax year	Numeric, 4	20
SLIPSTATUS	Status of slip	Text, 1	O - Original, A - Amended or C - Cancelled
REFUNDEMPLOYER	Refund of employer contributions (12)	Currency	
REFUNDEMPLOYEE	Refund of employee contributions (14)	Currency	
DISTRIBUTIONS	Distributions (16)	Currency	
ELIGIBLEDISTRIBUTIONS	Distributions eligible for pension income splitting (17)	Currency	
SELLINGPRICE	Selling price of an interest in RCA(18)	Currency	
OTHER	Other amounts (20)	Currency	
INCOMETAX	Income tax deducted (22)	Currency	
SIN	Social insurance number (24)	Numeric, 9	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.16 T4PS Headings

Cell A1 must contain "T4PS"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Recipient last name	Text, 30	Required
FIRSTNAME	Recipient first name	Text, 30	
INITIAL	Recipient initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	CAN, USA, etc.
SLIPSTATUS	Status of slip	Text, 1	O - Original, A - Amended or C - Cancelled
YEAR	Year	Numeric, 4	2020
ACTUAL	Actual amount of non-eligible dividends (24)	Currency	
TAXABLE	Taxable amount of eligible dividends (25)	Currency	
CREDIT	Dividend tax credit for eligible dividends (26)	Currency	
ACTUAL_E	Actual amount of eligible dividends (30)	Currency	
TAXABLE_E	Taxable amount of eligible dividends (31)	Currency	
CREDIT_E	Dividend tax credit for eligible dividends (32)	Currency	
CAPGAINS	Capital gains for losses (34)	Currency	
OTHER	Other income (35)	Currency	
FORFEITED	Forfeited due to withdrawal (36)	Currency	
FOREIGNINCOME	Foreign non-business income (37)	Currency	
FOREIGNCAPGAINS	Foreign capital gains or losses (38)	Currency	
FOREIGNTAX	Foreign non-business tax (39)	Currency	
SPECIFIEDEMP	Specified employee? "Yes"	Text, 1	"X" = Checked
SPECIFIEDEMPNO	Specified employee? "No"	Text, 1	"X" = Checked
SIN	Canadian social insurance number (12)	Numeric, 9	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two

Heading	Description	Type, Size	Comments & Examples
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	separated by a semi-colon
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.17 T4E Headings

Cell A1 must contain "T4E"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Employee last name	Text, 30	Required
FIRSTNAME	Employee first name	Text, 30	
INITIAL	Employee initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country code	Text, 3	
YEAR	Year	Numeric, 4	
SLIPSTATUS	Status of slip	Text, 1	O - Original, A - Amended C - Cancelled
SIN	Social insurance number (12)	Numeric, 9	
RECIPIENTNO	Recipient's number	Text, 20	
REPAYMENTRATE	T4E repayment rate; percentage (7)	Numeric, 3	
TOTALBENEFITS	Total benefits paid (14)	Currency	
REGULAROTHERBENEFITS	Regular benefits paid included in Box 14 (15)	Currency	
EMPLOYMENTSUPPORT	Employment benefits and support measures included in Box 14 (17)	Currency	
TAXABLETUITION	Taxable tuition assistance (20)	Currency	
NONTAXABLETUITION	Non-taxable tuition assistance (21)	Currency	
INCOMETAX	T4E income tax deducted (22)	Currency	
QUEBECINCOMETAX	T4E Québec income tax deducted (23)	Currency	
OTHERCODE1	Other information Box 1	Numeric, 2	
OTHERAMT1	Other information Amount 1	Currency	
OTHERCODE2	Other information Box 2	Numeric, 2	
OTHERAMT2	Other information Amount 2	Currency	
OTHERCODE3	Other information Box 3	Numeric, 2	
OTHERAMT3	Other information Amount 3	Currency	

Heading	Description	Type, Size	Comments & Examples
OTHERCODE4	Other information Box 4	Numeric, 2	
OTHERAMT4	Other information Amount 4	Currency	
OTHERCODE5	Other information Box 5	Numeric, 2	
OTHERAMT5	Other information Amount 5	Currency	
OTHERCODE6	Other information Box 6	Numeric, 2	
OTHERAMT6	Other information Amount 6	Currency	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.18 T4RIF Headings

Cell A1 must contain "T4RIF"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Recipient last name	Text, 30	Required
FIRSTNAME	Recipient first name	Text, 30	
INITIAL	Recipient initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	CAN, USA, etc.
SLIPSTATUS	Status of slip	Text, 1	O - Original, A - Amended or C - Cancelled
YEAR	Year	Numeric, 4	2020
SIN	Canadian social insurance number (12)	Numeric, 9	
SPOUCESSIN	Spouse's Canadian social insurance number (32)	Numeric, 9	
TAXABLE	Taxable payments received(16)	Currency	
CONTRACT	Contract number (14)	Text, 12	
DECEASED	Amounts received at death (18)	Currency	
DEREGISTRATION	Amounts received at deregistration (20)	Currency	
OTHERINCOME	Other income or deductions (22)	Currency	
EXCESS	Excess amount (24)	Currency	
SPOUSALRRIF	"Yes" if spouse is a contributor (26)	Yes/No	
INCOMETAX	Income tax deducted (28)	Currency	
DATEDEATH	Date of annuitant's death (30)	Date	Mmm. dd, yyyy (Apr. 1, 2020)
TRANSFERS	Transfer on breakdown of marriage (35)	Currency	
ADVANCEDLIFEDEFERREDPURCHASE	Advanced Life Deferred Annuity Purchase (37)	Currency	
TAXPAID	Tax paid amount (36)	Currency	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon

Heading	Description	Type, Size	Comments & Examples
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.19 T4RSP Headings

Cell A1 must contain "T4RSP"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Recipient last name	Text, 30	Required
FIRSTNAME	Recipient first name	Text, 30	
INITIAL	Recipient initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	CAN, USA, etc.
SLIPSTATUS	Status of slip	Text, 1	O - Original, A - Amended or C - Cancelled
YEAR	Year	Numeric, 4	2020
SIN	Social insurance number (12)	Numeric, 9	
SPOUCESSIN	Spouse's social insurance number (36)	Numeric, 9	
CONTRIBUTORSPOUSE	"Yes" if spouse is a contributor (24)	Text, 1	"X" = Checked
CONTRIBUTORSPOUSENO	"No" if spouse is not a contributor (24)	Text, 1	"X" = Checked
CONTRACT	Contract number (14)	Text, 12	
ANNUITY	Annuity payments (16)	Currency	
REFUNDPREMIUMS	Refund of premiums (18)	Currency	
REFUNDEXCESS	Refund of excess contributions (20)	Currency	
COMMUTATION	Commutation payments (22)	Currency	
LLPWITHDRAWAL	LLP withdrawal (25)	Currency	
DEREGISTRATION	Amounts received at deregistration (26)	Currency	
OTHERINCOME	Other income or deductions (28)	Currency	
INCOMETAX	Income tax deducted (30)	Currency	
DEATH	Amounts received at death (34)	Currency	
HBPWITHDRAWAL	HBP withdrawal (27)	Currency	
TRANSFERS	Transfer on breakdown of marriage (35)	Currency	
ADVANCEDLIFEDEFERREDPURCHASE	Advanced Life Deferred Annuity Purchase (37)	Currency	
TAXPAID	Tax paid amount (40)	Currency	

Heading	Description	Type, Size	Comments & Examples
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.20 T5 Headings

Cell A1 must contain "T5"

Heading	Description	Type, Size	Comments & Examples
NAME1	Recipient name, line 1 (type 3, 4 & 5)	Text, 50	Required; type 3, 4 & 5
NAME2	Recipient name, line 2 (type 3, 4 & 5)	Text, 50	
LASTNAME1	First recipient last name (type 1 & 2)	Text, 30	Required; type 1 & 2
FIRSTNAME1	First recipient first name (type 1 & 2)	Text, 30	
INITIAL1	First recipient initial (type 1 & 2)	Text, 1	
LASTNAME2	Second recipient last name (type 2)	Text, 30	
FIRSTNAME2	Second recipient first name (type 2)	Text, 30	
INITIAL2	Second recipient initial (type 2)	Text, 1	
SECONDINDIVIDUAL	Indicate second entity is individual	Yes/No	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country code	Text, 3	
TAXYEAR	Taxation year	Numeric, 4	2020
REPORTCODE	Report code (21)	Text, 1	O - Original A - Amended or C - Cancelled
RECTYPE	Recipient type (23)	Text, 1	1 - Individual 2 - Joint account 3 - Corporation 4 - Assoc'n, trust, club or partnership 5 - Gov't or int'l org.
SIN	SIN/ID # or Business # (22)	Numeric, 9	
ACTUAL	Am't of non-eligible dividends (10)	Currency	
ACTUAL_E	Am't of eligible dividends (24)	Currency	
INTEREST	Interest from Cdn sources (13)	Currency	
CAPGAINS	Capital gains dividends (18)	Currency	
OTHER	Other income from Cdn sources (14)	Currency	
FORINC	Foreign income (15)	Currency	
FORTAX	Foreign tax paid (16)	Currency	
ROYALTIES	Royalties from Cdn sources (17)	Currency	

Heading	Description	Type, Size	Comments & Examples
ACCRUED	Accrued income: Annuities (19)	Currency	
RESOURCE	Resource allowance deduction (20)	Currency	
CURRENCY	Foreign currency code (27)	Text, 3	
TRANSIT	Transit (28)	Text, 10	
ACCOUNTNO	Recipient account number (29)	Text, 16	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.21 T5 & RL-3 Headings

Cell A1 must contain "T5"

Use this table to import Relevé 3 data with T5 data, [see bottom of this table](#)⁵⁰ for Relevé 3 specific fields

Heading	Description	Type, Size	Comments & Examples
NAME1	Recipient name, line 1 (type 3, 4 & 5)	Text, 50	Required; type 3, 4 & 5
NAME2	Recipient name, line 2 (type 3, 4 & 5)	Text, 50	
LASTNAME1	First recipient last name (type 1 & 2)	Text, 30	Required; type 1 & 2
FIRSTNAME1	First recipient first name (type 1 & 2)	Text, 30	
INITIAL1	First recipient initial (type 1 & 2)	Text, 1	
FIRSTINDIVIDUAL	Indicate first entity is individual (R3)	Yes/No	
LASTNAME2	Second recipient last name (type 2)	Text, 30	
FIRSTNAME2	Second recipient first name (type 2)	Text, 30	
INITIAL2	Second recipient initial (type 2)	Text, 1	
SECONDINDIVIDUAL	Indicate second entity is individual	Yes/No	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country code	Text, 3	
TAXYEAR	Taxation year	Numeric, 4	2020
REPORTCODE	Report code (21)	Text, 1	O - Original (R), A - Amended (A) or C - Cancelled (D) (R, A or D on filed Relevé 3s)
RECTYPE	Recipient type (23)	Text, 1	1 - Individual 2 - Joint account 3 - Corporation 4 - Assoc'n, trust, club or partnership 5 - Gov't or int'l org.
SIN	First recip. SIN/ID # or Business # (22)	Text, 15	
SIN2	Second recip. SIN/ID # (R3)	Text, 15	
ACTUAL	Am't of non-eligible dividends (10)	Currency	
ACTUAL_E	Am't of eligible dividends (24)	Currency	
INTEREST	Interest from Cdn sources (13, D)	Currency	

Heading	Description	Type, Size	Comments & Examples
CAPGAINS	Capital gains dividends (18, I)	Currency	
OTHER	Other income from Cdn sources (14)	Currency	
FORINC	Foreign income (15, F)	Currency	
FORTAX	Foreign tax paid (16, G)	Currency	
ROYALTIES	Royalties from Cdn sources (17, H)	Currency	
ACCRUED	Accrued income: Annuities (19, J)	Currency	
RESOURCE	Resource allowance deduction (20)	Currency	
CURRENCY	Foreign currency code (27)	Text, 3	
TRANSIT	Transit (28)	Text, 10	
ACCOUNTNO	Recipient account number (29)	Text, 16	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
ADDITIONAL HEADINGS FOR Relevé 3 FIELDS			
NEEDR3	Relevé 3 required for recipient	Yes/No	
ISINTERESTSAVINGSBONDS	Is interest from Fed./Qué. savings bonds	Yes/No	
ACCOUNTNOR3	Other ID/Recipient Number R3	Text, 16	
SERIAL	Relevé No. of paper slip	Numeric, 9	
SERIALORIGINAL	Relevé No. of previously-filed paper slip (user-entered)	Numeric, 9	
SERIALMM	Relevé No. of XML slip	Numeric, 9	
SERIALMMPREVIOUS	Relevé No. of previously-filed XML slip	Numeric, 9	
ACTUALR3	Am't of non-eligible dividends (B)	Currency	See Note 1 below
ACTUALR3_E	Am't of eligible dividends (C)	Currency	See Note 1 below
INTERESTR3	Interest from Cdn sources (D)	Currency	See Note 1 below
CAPGAINSR3	Capital gains dividends (I)	Currency	See Note 1 below
OTHERR3	Other income from Cdn sources (J)	Currency	See Note 1 below
FORINCR3	Foreign income (F)	Currency	See Note 1 below
FORTAXR3	Foreign tax paid (G)	Currency	See Note 1 below
ROYALTIESR3	Royalties from Cdn sources (H)	Currency	See Note 1 below

Heading	Description	Type, Size	Comments & Examples
ACCRUEDR3	Accrued income: Annuities (J)	Currency	See Note 1 below
TEXTATTOPR3	Optional text to print at top of slip	Text, 15	
<i>Generic boxes where ## is two numerals (01 to 04):</i>			
XBOX##	Add'l Information box ## - Box number	Text, 7	
XAMT##	Add'l information box ## - Currency data	Currency	
XTXT##	Add'l information box ## - Character data	Text, 20	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

Note 1: These fields will be ignored by the import unless the "Do not synchronize numerical information on T5/ Relevé 3 slips associated with this company" checkbox is selected on the Advanced page of the company information screen

1.22 T550 Headings

Cell A1 must contain "T550"

Heading	Description	Type, Size	Comments & Examples
SALUTATION	Salutation	Text, 5	
LASTNAME	Recipient last name	Text, 30	Required
FIRSTNAME	Recipient first name	Text, 30	
INITIAL	Recipient initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	
ISSUENAME	Issuer name	Text, 250	
SPECIMENNAME	Specimen name	Text, 250	
SPECIMENNUMBER	Specimen number	Text, 13	
CONTRACTYEAR	Contract year	Numeric, 4	
CONTRACTNUMBER	Contract number	Text, 20	
SIN	SIN	Text, 9	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.23 T5007 Headings

Cell A1 must contain "T5007"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Recipient last name	Text, 30	Required
FIRSTNAME	Recipient first name	Text, 30	
INITIAL	Recipient initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	CAN, USA, etc.
SIN	Social insurance number (12)	Numeric, 9	
SLIPSTATUS	Status of slip	Text, 1	O - Original, A - Amended or C - Cancelled
YEAR	Year	Numeric, 4	2020
WCBENEFITS	Workers' compensation benefits (10)	Currency	
SOCIALASSISTANCE	Social assistance payments or provincial or territorial supplements (11)	Currency	
MANITOBAFRACTION	Manitoba credit fraction	Numeric	Percentage: 50 = 50%
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.24 T5008 Headings

Cell A1 must contain "T5008"

Heading	Description	Type, Size	Comments & Examples
NAME1	Recipient name, line 1 (type 3 & 4)	Text, 50	Required; type 3 & 4
NAME2	Recipient name, line 2 (type 3 & 4)	Text, 50	
LASTNAME1	First recipient last name (type 1 & 2)	Text, 30	Required; type 1 & 2
FIRSTNAME1	First recipient first name (type 1 & 2)	Text, 30	
INITIAL1	First recipient initial (type 1 & 2)	Text, 1	
LASTNAME2	Second recipient last name (type 2)	Text, 30	
FIRSTNAME2	Second recipient first name (type 2)	Text, 30	
INITIAL2	Second recipient initial (type 2)	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country code	Text, 3	
SLIPSTATUS	Report code	Text, 1	O - Original, A - Amended or C - Cancelled
RECTYPE	Recipient type	Text, 1	1 - Individual 2 - Joint account 3 - Corporation 4 - Association, trust, club or partnership
SIN	First recipient SIN, ID or Business #	Text, 9	
RECIPIENTACCOUNTNUMBER	Recipient account number	Text, 12	
CURRENCY	Foreign currency	Currency	
DATE	Date	Date	Mmm. dd, yyyy (Apr. 1, 2020)
SECURITYCODE	Type code of securities	Text, 3	BON, BO1, DOB, DO1, FUT, MET, MFT, MSC, OPC, PTI, RTS, SHS, UNT, WTS
SECURITYQUANTITY	Quantity of securities	Numeric, 14	10 digits + 4 decimals
SECURITYID	Identification of securities	Text, 60	
ISIN	ISIN/CUIISP number	Text, 12	
ISININDICATOR	ISIN indicator	Numeric, 1	1 - The securities are not identified by a CUSIP or ISIN number 2 - The number provided is a

Heading	Description	Type, Size	Comments & Examples
			CUSIP number 3 - The number provided is a ISIN number
FACEAMOUNT	Face amount (dollars only)	Currency	Dollars only, no cents
BOOKVALUE	Cost or book value (dollars only)	Currency	Dollars only, no cents
PROCEEDSAMOUNT	Proceeds of disposition or settlement amount (dollars only)	Currency	Dollars only, no cents
SETTLEMENTSECURITYCODE	Type code of securities received on settlement	Text, 3	BON, BO1, DOB, DO1, FUT, MET, MFT, MSC, OPC, PTI, RTS, SHS, UNT, WTS
SETTLEMENTSECURITYQUANTITY	Quantity of securities received on settlement	Numeric, 14	10 digits + 4 decimals
SETTLEMENTSECURITYID	Identification of securities received on settlement	Text, 60	
SETTLEMENTISIN	ISIN/CUIISP settlement number	Text, 12	
SETTLEMENTISININDICATOR	ISIN/CUSIP settlement number indicator	Numeric, 1	1 - The securities are not identified by a CUSIP or ISIN number 2 - The number provided is a CUSIP number 3 - The number provided is a ISIN number
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.25 T5013 Headings

Cell A1 must contain "T5013"

Heading	Description	Type, Size	Comments & Examples
Main page fields			
NAME1	Family name or first line of business name	Text, 50	Required
NAME2	Given name or second line of business name	Text, 50	
ADDRESS1	Address line 1	Text, 30	
ADDRESS2	Address line 2	Text, 30	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	CAN, USA, etc.
TYPEOFSLIP	Type of slip	Text, 1	O – Original A – Amended C – Cancelled
UNITSOWNED	Partnership units held	Numeric	8 decimals
MEMBERCODE	Partner code (box 002, Sch 50 box 008)	Text, 1	0 – Limited partner 1 – Specified member who is not a limited partner 2 – General partner 3 – Limited partner's exempt interest 4 – Nominee or agent
COUNTRYCODE	Country code (box 003)	Text, 3	CAN, USA, etc.
RECTYPE	Recipient type (box 004)	Text, 1	1 – Individual, other than a trust 3 – Corporation 4 – Association, trust, club or partnership
PARTNERSSHARE	Partner's share, in % (box 005, Sch 50 box 107)	Numeric	8 decimals
PARTNERID	Partner's ID (box 006, Sch 50 box 101)	Text, 16	
CCA	Capital cost allowance (box 040)	Currency	
<i>Generic boxes where ## is two numerals (01 to 36):</i>			
X##TEXT2	Generic box ##: Box Number	Text, 3	
X##TEXT1	Generic box ##: Province/Country	Text, 3	
X##AMOUNT	Generic box ##: Amount	Currency	
<i>Generic descriptive information boxes where ## is two numerals (01 to 12):</i>			
E##TEXT2	Generic box ##: Box number	Text, 3	
E##TEXT1	Generic box ##: Province/Country	Text, 3	
E##TEXT3	Generic box ##: Text	Text, 25	

Heading	Description	Type, Size	Comments & Examples
Additional Headings for Schedule 50 fields::			
TYPEOFFARTNER	Type of partner (Sch 50 box 105)	Text, 1	1 – Individual 2 – Corporation 3 – Partnerships 4 – Trust 5 – Individual (non-resident) 6 – Corporation (non-resident) 7 – Partnership (non-resident) 8 – Trust (non-resident) 9 – Non-res. discretionary trust
DISPOSEDOFINTEREST	The partner has disposed of partnership interest during the fiscal period (Sch 50 box 110)	Yes/No	
INCOMEALLOCATED	Partner's share of the net income (Sch 50 box 220)	Currency	
CAPITALSTART	Cost base (Sch 50 box 300)	Currency	
COSTOFUNITSACQ	Cost of units acquired during fiscal period (Sch 50 box 310)	Currency	
PREVIOUSSHARE	Partner's share of the previous fiscal period's net income or loss (Sch 50 box 320)	Currency	
CAPITALCONTRIBUTED	Capital contribution during period (Sch 50 box 330)	Currency	
DRAWINGS	Withdrawals in the fiscal period (Sch 50 box 340)	Currency	Must be a negative number
OTHERADJUSTMENTS	Other Adjustments (Sch 50 box 350)	Currency	
PARTNERSHARENETINCOME	Partner's share of the fiscal period's net income (Sch 50 box 410)	Currency	
PARTNERSHARERESOURCEEXPENSES	Partner's share of the fiscal period's resource expenses (Sch 50 box 420)	Currency	
NONARMSLENGTHDEBT	Non-arm's length debt owing and/or benefits receivable (Sch 50 box 430)	Currency	
TEXTATTOP	Optional text to print on the slip	Text, 20	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.26 T5018 Headings

Cell A1 must contain "T5018"

Heading	Description	Type, Size	Comments & Examples
NAME	First line of Corporation or Partnership name	Text, 30	Type 3 or 4 - Required
NAME2	Second line of Corporation or Partnership name	Text, 30	Type 3 or 4
LASTNAME	Recipient last name (individual)	Text, 30	Type 1 - Required
FIRSTNAME	Recipient first name (individual)	Text, 30	Type 1
INITIAL	Recipient initial	Text, 1	Type 1
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	CAN, USA, etc.
PAYMENTS	Construction subcontractor payments (22)	Currency	
SIN	Recipient's ID number (BN or SIN) (24)	Text, 9	
SLIPSTATUS	Status of slip	Text, 1	O - Original, A - Amended or C - Cancelled
RECTYPE	Recipient type	Text, 1	1 - Individual 3 - Corporation 4 - Partnership
PARTNERSHIPID	Partnership's Filer ID	Text, 9	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.27 TFSA Headings

Cell A1 must contain "TFSA"

Heading	Description	Type, Size	Comments & Examples
CONTRACTNUMBER	Contract number	Text, 30	
SLIPSTATUS	Status of slip	Text, 1	O - Original, A - Amended or C - Cancelled
LASTNAME	Employee last name	Text, 30	Required
FIRSTNAME	Employee first name	Text, 30	
INITIAL	Employee initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country code	Text, 3	
SIN	Social insurance number (12)	Numeric, 9	
BIRTHDATE	TFSA holder birthdate	Date	Mmm. dd, yyyy (Apr. 1, 2020)
ACCOUNTCLOSEDTHISYEAR	Account closed this year, Yes	Text, 1	"X" = Checked
ACCOUNTCLOSEDTHISYEARNO	Account closed this year, No	Text, 1	"X" = Checked
CLOSEDDATE	TFSA closed date	Date	Mmm. dd, yyyy (Apr. 1, 2020)
CALENDARYEARENDFAIRMARKETVALUE	Calendar year end fair market value	Currency	
NEWACCOUNTTHISYEAR	New TFSA account this year for holder, Yes	Text, 1	"X" = Checked
NEWACCOUNTTHISYEARNO	New TFSA account this year for holder, No	Text, 1	"X" = Checked
IDENTINACTIVE	No transactions for this identity	Text, 1	"X" = Checked
TRANSACTIONDATE	Transaction date	Date	Mmm. dd, yyyy (Apr. 1, 2020)
CONTRIBUTIONAMOUNT	Contribution amount	Currency	
WITHDRAWALAMOUNT	Withdrawal amount	Currency	
FORMERSPOUSELASTNAME	Surname of former spouse	Text, 30	
FORMERSPOUSEFIRSTNAME	First name of former spouse	Text, 30	
FORMERSPOUSESIN	SIN of former spouse	Text 11	
MARRIAGEBREAKDOWNTRANSFEROUT	Marriage breakdown transfer out fair market value	Currency	

Heading	Description	Type, Size	Comments & Examples
MARRIAGEBREAKDOWNTRANSFERIN	Marriage breakdown transfer in fair market value	Currency	
ACQUISITIONOFNONQUALIFIED	Acquisition of non-qualified investment fair market value	Currency	
WITHDRAWALOFNONQUALIFIED	Withdrawal of non-qualified investment fair market value	Currency	
DEATHDATE	TFSA holder date of death	Date	Mmm. dd, yyyy (Apr. 1, 2020)
SUCCESSORHOLDER	Successor holder account, Yes	Text, 1	"X" = Checked
SUCCESSORHOLDERNO	Successor holder account, No	Text, 1	"X" = Checked
FAIRMARKETVALUEATDEATH	TFSA holder fair market value at time of death	Currency	
DECEASEDLASTNAME	Surname of deceased holder	Text, 30	
DECEASEDFIRSTNAME	First name of deceased holder	Text, 30	
DECEASEDINITIAL	Initial of deceased holder	Text, 1	
DECEASEDSIN	SIN of deceased holder	Text, 11	
DECEASEDDATE	Date of death of deceased holder	Date	Mmm. dd, yyyy (Apr. 1, 2020)
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.28 Relevé 1 Headings

Cell A1 must contain "R1"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Employee last name	Text, 30	Required
FIRSTNAME	Employee first name	Text, 30	
INITIAL	Employee initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country code	Text, 3	
SIN	Social insurance number (12)	Text, 9	
PROVEMP	Province of employment (10)	Text, 2	
EMPNUM	Employee number, reference number	Text, 20	
EMPCODE	Employment code (29)	Text, 2	
CPPWEEKS	Weeks eligible for CPP/QPP	Numeric, 4	2 digits + 2 decimals: 52.00 , 52.5, etc.
SLIPSTATUS	Status of slip	Text, 1	O - Original , A - Amended or C - Cancelled (R, A or D will be shown on filed Relevé 1s)
TAXYEAR	Taxation year	Numeric, 4	2020
UNION	Union dues (44)	Currency	
CHARITABLE	Charitable donations (46)	Currency	
PENSIONNO	RPP/DPSP number (50)	Text, 7	
PENSION	Pension adjustment (52)	Currency	
PPIP	PPIP premiums (55, H)	Currency	
PPIPEARN	PPIP earnings (56, I)	Currency	
CODEBOXOR1	Code for Box O	Text, 2	
IDNOQ	Recipient Quebec identification number	Numeric, 10	
ISBUSINESS	Recipient is business	Yes/No	No
INCOMER1	Employment income (A)	Currency	
QPP	QPP contributinos (B)	Currency	
EI	EI premiums (C)	Currency	

Heading	Description	Type, Size	Comments & Examples
RPPR1	Reg. Pension plan contr. (D)	Currency	
TAXR1	Québec income tax deducted (E)	Currency	
UNIONR1	Union dues (F)	Currency	
QPPEAR1	QPP pensionable earnings (G)	Currency	Must contain data
HEALTHR1	Private health insurance (J)	Currency	
TRAVELR1	Travel (K)	Currency	
OTHERTBR1	Other taxable benefits (L)	Currency	
COMMISSIONS	Employment commissions (M)	Currency	
CHARITABLER1	Charitable donations (N)	Currency	
OTHERINC	Other taxable income (O)	Currency	
INSURANCE	Multi-employer insurance (P)	Currency	
DEFERRED	Deferred salary (Q)	Currency	
INDIANINC	Exempt income for an Indian (R)	Currency	
TIPS	Tips received (S)	Currency	
TIPALLOCATED	Tips allocated (T)	Currency	
PHASEDRETIRE	Phased retirement (U)	Currency	
HOUSING	Meals and accommodation (V)	Currency	
AUTOR1	Personal use of auto (W)	Currency	
FNOTE1R1	Footnote #1	Text, 30	
FNOTE2R1	Footnote #2	Text, 30	
FNOTE3R1	Footnote #3	Text, 30	
NETPAYOTHERR1	Other deductions from Net Pay	Currency	For net pay calc.
SERIAL	Sequential (Relevé) number of paper slip	Numeric, 9	
SERIALORIGINAL	Sequential (Relevé) number of previously-filed paper slip (user-entered)	Numeric, 9	
SERIALMM	Sequential (Relevé) number of XML slip	Numeric, 9	
SERIALMMPREVIOUS	Sequential (Relevé) number of previously-filed XML slip	Numeric, 9	
TEXTATTOPR1	Optional text to print at top of slip	Text, 15	
<i>Generic boxes where ## is two numerals (01 to 04):</i>			
XBOX##	Additional Information - Box ##: Box number	Text, 7	
XAMT##	Additional Information - Box ##: Currency data	Currency	
XTXT##	Additional Information - Box ##: Character data	Text, 20	

CUSTOMFIELD	GUID or other unique identifier	Text, 50
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20

1.29 Relevé 2 Headings

Cell A1 must contain "R2"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Recipient last name	Text, 30	Required
FIRSTNAME	Recipient first name	Text, 30	
INITIAL	Recipient initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	CAN, USA, etc.
SOURCE1	Source of income	Text, 6	
BENEFICIARYNUM	Employer assigned number	Text, 20	
ANNUITY	Life annuity payments amount	Currency	Box A
BENEFIT	RRSP, RRIF, DPSP benefit amount	Currency	Box B
OTHERPAYMENT	Other Payment amount	Currency	Box C
REFUNDRRSPSPOUSE	Refunded RRSP amounts	Currency	Box D
DEATHBENEFIT	Value of benefit at time of death	Currency	Box E
REFUNDRRSPUNDEDUCTED	Amount of refunded excess RRSP	Currency	Box F
REVOCATION	Value of benefit before amendment	Currency	Box G
OTHERINCOME	All other income	Currency	Box H
DEDUCTION	Amount giving entitlement to deduction	Currency	Box I
TAX	Amount of Québec tax held at source	Currency	Box J
INCOMEAFTERDEATH	Income earned after death amount	Currency	Box K
LIFELONGLEARNING	Life Long Learning Plan amount	Currency	Box L
TAXPAIDAMOUNT	Tax paid amount	Currency	Box M
SIN	Social insurance number	Text, 9	
SIN2	Spouse's social insurance number	Text, 9	Box N
HOMEBUYER	Withdrawal under HBP	Currency	Box O
REPORTCODE	Status of slip	Text, 1	R - Original, A - Amended, or D - Cancelled
SERIAL	Sequential (Relevé) number of paper slip	Numeric, 9	
SERIALORIGINAL	Sequential (Relevé) number of previously-filed paper slip (user-entered)	Numeric, 9	
SERIALMM	Sequential (Relevé) number of XML slip	Numeric,	

Heading	Description	Type, Size	Comments & Examples
SERIALMMPREVIOUS	Sequential (Relevé) number of previously-filed XML slip	Numeric, 9	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
<i>Generic boxes where ## is two numerals (01 to 04):</i>			
XBOX##	Additional Information - Box ##: Box number	Text, 7	
XAMT##	Additional Information - Box ##: Currency data	Currency	
XTXT##	Additional Information - Box ##: Character data	Text, 20	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.30 Relevé 3 Headings

Cell A1 must contain "R3"

Heading	Description	Type, Size	Comments & Examples
NAME1	Recipient name, line 1 (type 3, 4 & 5)	Text, 50	Required; type 3, 4 & 5
NAME2	Recipient name, line 2 (type 3, 4 & 5)	Text, 50	
LASTNAME1	First recipient last name (type 1, 2, 6 & 7)	Text, 30	Required; type 1, 2, 6 & 7
FIRSTNAME1	First recipient first name (type 1, 2, 6 & 7)	Text, 30	
INITIAL1	First recipient initial (type 1, 2, 6 & 7)	Text, 1	
FIRSTINDIVIDUAL	Indicate first entity is individual (type 7)	Yes/No	
LASTNAME2	Second recipient last name (type 2, 6 & 7)	Text, 30	
FIRSTNAME2	Second recipient first name (type 2, 6, & 7)	Text, 30	
INITIAL2	Second recipient initial (type 2, 6 & 7)	Text, 1	
SECONDINDIVIDUAL	Indicate second entity is individual (type 2, 6 & 7)	Yes/No	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country code	Text, 3	
TAXYEAR	Taxation year	Numeric, 4	2020
REPORTCODER3	Report code (21)	Text, 1	R - Original A - Amended or D - Cancelled
RECTYPER3	Recipient type (23)	Text, 1	1 - Individual 2 - Joint account 3 - Corporation 4 - Assoc'n, trust, club or partnership 5 - Gov't or int'l org. 6 - Spouse or trust settlor of deceased person 7 - Holder of joint account other than 2
SIN	First recip. SIN/ID # or Business # (22)	Text, 15	
SIN2	Second recip. SIN/ID #	Text, 15	
ISINTERESTSAVINGSBONDS	Is interest from Fed./Qué. savings bonds	Yes/No	
ACCOUNTNOR3	Other ID/Recipient Number R3	Text, 12	
ACTUALR3	Am't of non-eligible dividends (B)	Currency	

Heading	Description	Type, Size	Comments & Examples
ACTUALR3_E	Am't of eligible dividends (C)	Currency	
INTERESTR3	Interest from Cdn sources (D)	Currency	
CAPGAINSR3	Capital gains dividends (I)	Currency	
OTHERR3	Other income from Cdn sources ()	Currency	
FORINCR3	Foreign income (F)	Currency	
FORTAXR3	Foreign tax paid (G)	Currency	
ROYALTIESR3	Royalties from Cdn sources (H)	Currency	
ACCRUEDR3	Accrued income: Annuities (J)	Currency	
CURRENCY	Foreign currency code (27)	Text, 3	
TRANSIT	Transit (28)	Text, 10	
SERIAL	Relevé No. of paper slip	Numeric, 9	
SERIALORIGINAL	Relevé No. of previously-filed paper slip (user-entered)	Numeric, 9	
SERIALMM	Relevé No. of XML slip	Numeric, 9	
SERIALMMPREVIOUS	Relevé No. of previously-filed XML slip	Numeric, 9	
TEXTATTOPR3	Optional text to print at top of slip	Text, 15	
<i>Generic boxes where ## is two numerals (01 to 04):</i>			
XBOX##	Add'l Information box ## - Box number	Text, 7	
XAMT##	Add'l information box ## - Currency data	Currency	
XTXT##	Add'l information box ## - Character data	Text, 20	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.31 Relevé 5 Headings

Cell A1 must contain "R5"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Recipient last name	Text, 30	Required
FIRSTNAME	Recipient first name	Text, 30	
INITIAL	Recipient initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country code	Text, 3	
SIN	S.I.N. of beneficiary	Numeric, 9	
YEAR	Taxation year	Numeric, 4	2020
REPORTCODE	Report code	Text, 1	R - Original A - Amended or D - Cancelled
BOXA	Social assistance payments (A)	Currency	
BOXB	Other government financial assistance (B)	Currency	
BOXC	Workers' compensation received from CNESST (C)	Currency	
BOXD	Indemnities from SAAQ (D)	Currency	
BOXE	Other income (E)	Currency	
BOXH	Total repayment of social assistance payments (H)	Currency	
BOXI	Repayments related to a year before 1998 (I)	Currency	
BOXJ	Allowance for childcare expenses (J)	Currency	
BOXK	Other financial aid (K)	Currency	
BOXM	Adjustment for income replacement indemnities (M)	Currency	
BOXOYEAR1	Adj. for indemnities for previous years (Year 1)	Numeric, 4	
BOXOAMT1	Adj. for indemnities for previous years (Amount 1)	Currency	
BOXOYEAR2	Adj. for indemnities for previous years (Year 2)	Numeric, 4	
BOXOAMT2	Adj. for indemnities for previous years	Currency	

Heading	Description	Type, Size	Comments & Examples
	(Amount 2)		
BOXOYEAR3	Adj. for indemnities for previous years (Year 3)	Numeric, 4	
BOXOAMT3	Adj. for indemnities for previous years (Amount 3)	Currency	
BOXP	Repayment of indemnities (Q)	Currency	
BOXQ	Recipient of PSS (Q)	Text, 1	O - Yes N - No
BOXR1	Recipient for 36 months (R 1)	Text, 1	O - Yes N - No
BOXS1	Claim slip (S 1)	Text, 1	O - Yes N - No
BOXT1	Start of the period of transition to work (T 1)	Date, 6	YYYYMM
BOXU1	Resumption of financial assistance (U 1)	Date, 6	YYYYMM
BOXV1	Number of months (V 1)	Numeric, 2	
BOXR2	Recipient for 36 months (R 2)	Text, 1	O - Yes N - No
BOXS2	Claim slip (S 2)	Text, 1	O - Yes N - No
BOXT2	Start of the period of transition to work (T 2)	Date, 6	YYYYMM
BOXU2	Resumption of financial assistance (U 2)	Date, 6	YYYYMM
BOXV2	Number of months (V 2)	Numeric, 2	
BOXR3	Recipient for 36 months (R 3)	Text, 1	O - Yes N - No
BOXS3	Claim slip (S 3)	Text, 2	O - Yes N - No
BOXT3	Start of the period of transition to work (T 3)	Date, 6	YYYYMM
BOXU3	Resumption of financial assistance (U 3)	Date, 6	YYYYMM
BOXV3	Number of months (V 3)	Numeric, 2	
FILENUMBER	File number or ID number of the recipient	Text, 15	
HEALTHINSNUMBER	Health insurance number of the recipient	Text, 12	
BIRTHDATE	Birthdate of recipient	Date	MMMM dd, yyyy
SEX	Sex of recipient	Text, 1	1 - Male 2 - Female
CIVILSTATUS	Civil status of recipient	Text, 1	0 - None 1 - Single 2 - Married

Heading	Description	Type, Size	Comments & Examples
			3 - Separated 4 - Divorced 5 - Widowed 6 - Religious 7 - Common-law
FILETYPE	Type of file	Text, 1	A - Administered S - Estate C - Other
ENDDATEBENEFITS	End date of benefits	Date	MMMM dd, yyyy
RECIPIENTCODE	Recipient code	Text, 1	1 - Last resort assistance 2 - Indian 3 - Housing allowance
VALUEGOODS	Value of goods	Currency	
CHILDREN0TO18	Number of children 0 to 18 years	Numeric, 2	
CHILDREN18PLUS	Number of children 18 and up	Numeric, 2	
MONTHSBENEFITSPAID	Number of months benefits were paid	Numeric, 2	
TEXTATTOP	Optional text to print on the slip	Text, 40	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
SERIAL	Current Relevé 5 number	Numeric, 9	
SERIALMM	Electronic Relevé 5 number	Numeric, 9	
SERIALMMPREVIOUS	Sequential (Relevé) number of the slip being amended	Numeric, 9	
SERIALORIGINAL	Previous Relevé 5 number	Numeric, 9	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.32 Relevé 8 Headings

Cell A1 must contain "R8"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Recipient last name	Text, 30	Required
FIRSTNAME	Recipient first name	Text, 30	
INITIAL	Recipient initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	
YEAR	Year of return	Numeric, 4	
AMOUNTFORSTUDIES	Amount for post-secondary studies	Currency	
TUITIONFEES	Tuition or examination fees	Currency	
DONATIONS	Donations	Currency	
SIN	Social Insurance Number	Text, 9	
STUDENTNUMBER	Student number	Text, 15	
INTERNALSTUDENTNUMBER	Internal student number	Text, 15	
REPORTCODE	Status of slip	Text, 1	R - Original, A - Amended, or D - Cancelled
SERIAL	Sequential (Relevé) number of paper slip	Numeric, 9	
SERIALORIGINAL	Sequential (Relevé) number of previously-filed paper slip (user-entered)	Numeric, 9	
SERIALMM	Sequential (Relevé) number of XML slip	Numeric, 9	
SERIALMMPREVIOUS	Sequential (Relevé) number of previously-filed XML slip	Numeric, 9	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	

CUSTOMFIELD	GUID or other unique identifier	Text, 50
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20

1.33 Relevé 11 Headings

Cell A1 must contain "R11"

Heading	Description	Type, Size	Comments & Examples
NAME1	Recipient name, line 1 (type 2)	Text, 30	Required; type 2
NAME2	Recipient name, line 2 (type 2)	Text, 30	
LASTNAME	Recipient last name (type 1)	Text, 30	Required; type 1
FIRSTNAME	Recipient first name (type 1)	Text, 30	
INITIAL	Recipient initial (type 1)	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	CAN, USA, etc.
YEAR	Year of return	Numeric, 4	2020
OTHERID	Identification number	Text, 10	
RECTYPE	Recipient type	Text, 1	1 - Individual 2 - Other
REPORTCODE	Status of slip	Text, 1	R - Original, A - Amended, or D - Cancelled
SIN	Social Insurance Number	Text, 9	
EXPENSESASSISTANCEA	Amount of assistance corresponding to case A	Currency	
EXPLORATIONEXPENSESCANADIAN	Canadian exploration expenses	Currency	
EXPENSESASSISTANCEB	Amount of assistance corresponding to case B	Currency	
DEVELOPMENTEXPENSESCANADIAN	Canadian development expenses	Currency	
EXPENSESASSISTANCED	Amount of assistance corresponding to case D	Currency	
EXPLORATIONEXPENSESQUEBEC	Québec exploration expenses	Currency	
EXPENSESASSISTANCEE	Amount of assistance corresponding to case E	Currency	
EXPLORATIONEXPENSESQUEBECMINING	Québec surface mining expenses	Currency	
EXPENSESASSISTANCEF	Amount of assistance corresponding to case F	Currency	

Heading	Description	Type, Size	Comments & Examples
EXPLORATIONEXPENSESNORTHERN QUEBEC	Expenses for exploration in the north	Currency	
EXPENSESSHAREISSUE	Share issue expenses	Currency	
BOXA1	Renewable and conservation expenses	Currency	
BOXA2	Québec exploration expenses not giving additional deduction	Currency	
BOXB1	Québec development expenses	Currency	
BOXB201	Flow-through shares issued after March 11, 2005	Currency	
ID359	ID number assigned to form CO-359.10	Text, 12	
DATERENUNCIATION	Date on which the renunciation takes effect	Date	Mm, dd, yyyy
SERIAL	Sequential (Relevé) number of paper slip	Numeric, 9	
SERIALORIGINAL	Sequential (Relevé) number of previously-filed paper slip (user-entered)	Numeric, 9	
SERIALMM	Sequential (Relevé) number of XML slip	Numeric, 9	
SERIALMMPREVIOUS	Sequential (Relevé) number of previously-filed XML slip	Numeric, 9	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
PDFFILENAME	Filename of slip (pdf file)	Text, 255	
EMAILSTATUS	Email delivery status	Yes/No	
ISSELECTED	Check to select this slip for special electronic filing	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.34 Relevé 15 Headings

Cell A1 must contain "R15"

NOTE: The following boxes cannot be imported but are entered on the "R15 Totals" page of the TP-600-V form: Box 14, Box 38, Box 39, Box 42, Box 70, Box 72, Box 73, Box 75 and Box 76.

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Family name or business name	Text, 30	Required
FIRSTNAME	First name or line two of business name	Text, 30	
APARTMENT	Apartment number	Text, 5	
STREETNO	Street number	Text, 9	
STREET	Street name	Text, 24	
CITY	City	Text, 24	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country code	Text, 3	
PARNTERID	Partnerships identification number	Text, 16	S.I.N. or Identification number
REPORTCODE	Status of slip	Text, 1	R - Original, A - Amended or D - Cancelled
PARTNERSSHARE	Partner's share (%) of income / loss	Numeric, 12	8 digits + 4 decimals
UNITSOWNED	Number of partnership units owned	Numeric, 8	
MEMBERCODE	Partner code (40)	Text, 1	0 - Limited partner 1 - Other specified member 2 - General partner
RECTYPE	Taxpayer code (41)	Text, 1	1 - Individual 3 - Corporation 4 - Trust or partnership
CAPITALSTART	Balance at start of fiscal period	Currency	
CAPITALCONTRIBUTED	Capital contributions during fiscal period	Currency	
OTHERADJUSTMENTS	Other adjustments	Currency	
INCOMEALLOCATED	Income / loss allocated during fiscal period	Currency	
DRAWINGS	Drawings	Currency	
BOX1	Net Canadian & foreign bus. income / loss	Currency	
BOX2	Net foreign business income / loss	Currency	
BOX3	Net Canadian & foreign rental income / loss	Currency	

Heading	Description	Type, Size	Comments & Examples
BOX4	Net foreign rental income / loss	Currency	
BOX5	Capital cost allowance	Currency	
BOX6A	Actual amount of eligible dividends	Currency	
BOX6B	Actual amount of ordinary dividends	Currency	
BOX7	Interest and other investment income from Canadian sources	Currency	
BOX8	Foreign dividends & interest	Currency	
BOX9	Patronage dividends from a corporation	Currency	
BOX10	Capital gains / losses used to calc. ded.	Currency	
BOX11	Reserves for dispositions of capital property	Currency	
BOX12	Capital gains / losses not used to calc. ded.	Currency	
BOX13	Business investment loss	Currency	
BOX15A	Carrying charges and interest expenses	Currency	
BOX15B	Dividend rental arr. compensation payments	Currency	
BOX16	Quebec income tax withheld at source	Currency	
BOX17	Foreign income tax paid on non-business income	Currency	
BOX18	Foreign income tax paid on business income	Currency	
BOX19	Donations and gifts	Currency	
BOX20	Other gifts	Currency	
BOX21A	Investment tax credit - depreciable property	Currency	
BOX21B	Investment tax credit - other property	Currency	
BOX24A	Paid up capital - share of debts	Currency	
BOX24B	Paid up capital - share of qualified property	Currency	
BOX24C	Paid up capital - share of total assets	Currency	
BOX25	R & D Expenditures	Currency	
BOX26	At-risk amount	Currency	
BOX27	Limited partnership loss	Currency	
BOX28	Canadian exploration expenses	Currency	
BOX29	Canadian development expenses	Currency	
BOX30	Canadian oil & Gas property expenses	Currency	
BOX31	Expenses related to foreign resources	Currency	
BOX32	Quebec exploration expenses	Currency	

Heading	Description	Type, Size	Comments & Examples
BOX33	Quebec surface mining or oil & gas exploration expenses	Currency	
BOX34	Exploration expenses incurred in Northern Quebec	Currency	
BOX35_28	Assistance corresponding to box 28	Currency	
BOX35_29	Assistance corresponding to box 29	Currency	
BOX35_30	Assistance corresponding to box 30	Currency	
BOX35_32	Assistance corresponding to box 32	Currency	
BOX35_33	Assistance corresponding to box 33	Currency	
BOX35_34	Assistance corresponding to box 34	Currency	
BOX43	Capital repayment	Currency	
BOX44	Dividend tax credit	Currency	
BOX45	Eligible taxable capital gains on resource property	Currency	
BOX50	Number units acquired during fiscal period	Numeric, 9	No decimals
BOX51	Cost per unit	Currency	
BOX53	Limited-recourse amount	Currency	
BOX54	At-risk adjustment	Currency	
BOX55	Other indirect adjustments	Currency	
BOX60	Canadian exploration expenses	Currency	
BOX61	Canadian development expenses	Currency	
BOX62	Quebec exploration expenses	Currency	
BOX63	Quebec surface mining or oil & gas exploration expenses	Currency	
BOX64	Exploration expenses incurred in Northern Quebec	Currency	
BOX65	Share and security issue expenses	Currency	
BOX66_60	Assistance - box 60	Currency	
BOX66_61	Assistance - box 61	Currency	
BOX66_62	Assistance - box 62	Currency	
BOX66_63	Assistance - box 63	Currency	
BOX66_64	Assistance - box 64	Currency	
BOX71	Eligible amount	Currency	
BOX74	Percentage interest, tax credit	Numeric, 16	12 digits + 4 decimals
<i>Generic boxes where ## is two numerals (01 to 28):</i>			
XBOX##	Additional Information - Box ##: Box number	Text, 7	

Heading	Description	Type, Size	Comments & Examples
XTXT##	Additional information - Box ##: Character data	Text, 20	
XAMT##	Additional information - Box ##: Currency data	Currency data	
SERIAL	Sequential (Relevé) number of paper slip	Numeric, 9	
SERIALORIGINAL	Sequential (Relevé) number of previously-filed paper slip (user-entered)	Numeric, 9	
SERIALMM	Sequential (Relevé) number of XML slip	Numeric, 9	
SERIALMMPREVIOUS	Sequential (Relevé) number of previously-filed XML slip	Numeric, 9	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.35 Relevé 16 Headings

Cell A1 must contain "R16"

Heading	Description	Type, Size	Comments, Examples and defaults
NAME1	Recipient name line 1 (type 3, 4 & 5)	Text, 30	
NAME2	Recipient name line 2 (type 3, 4 & 5)	Text, 30	
LASTNAME1	First recipient last name (type 1 & 2)	Text, 30	
FIRSTNAME1	First recipient first name (type 1 & 2)	Text, 30	
INITIAL1	First recipient initial (type 1 & 2)	Text, 1	
LASTNAME2	Second recipient last name (type 1 & 2)	Text, 30	
FIRSTNAME2	Second recipient first name (type 1 & 2)	Text, 30	
INITIAL2	Second recipient initial (type 1 & 2)	Text, 1	
ADDRESS1	Address line 1	Text, 30	
ADDRESS2	Address line 2	Text, 30	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code	Text, 10	
COUNTRY	Country	Text, 3	CAN, USA, etc.
SIN	First recipient SIN	Text, 15	
SIN2	Second recipient SIN	Text, 15	
OTHERNUMBER	NEQ or identification number of first recipient	Text, 10	
OTHERNUMBER2	NEQ or identification number of second recipient	Text, 10	
FIRSTINDIVIDUAL	Yes if first recipient is an individual; no otherwise	Yes/No	Yes
SECONDINDIVIDUAL	Yes if second recipient is an individual; no otherwise	Yes/No	Yes
REPORTCODE	Status of Slip	Text, 1	R - Original, A - Amended or D - Cancelled
RECTYPE	Beneficiary type code	Text, 1	1 - Individual 2 - Joint account 3 - Corporation 4 - Association, trust, club or partnership 5 - Government or international org. 6 - Spouse or trust settlor of spouse 7 - Holder of joint account other than 2
BENEFICIARYNUM	Beneficiary Number	Text, 20	

Heading	Description	Type, Size	Comments, Examples and defaults
YEAR	Taxation Year	Numeric, 4	2020
TEXTATTOP	Optional text to print at top of slip	Text, 15	
CAPITALGAIN	Capital gains	Currency	
SINGLEPENSION	Single pension payment	Currency	
ACTUAL_E	Actual amount of eligible dividends	Currency	
ACTUAL	Actual amount of ordinary dividends	Currency	
ENTITLEMENTPENSION	Pension payment giving entitlement to a tax credit	Currency	
FOREIGNINCOME_BUS	Foreign business income	Currency	
FOREIGNINCOME_NONBUS	Foreign non-business income	Currency	
OTHER	Other income	Currency	
ENTITLEMENTCAPITALGAIN	Capital gains giving entitlement to a deduction	Currency	
CREDIT	Dividend tax credit	Currency	
FOREIGNINCOMETAX_BUS	Foreign income tax on business income	Currency	
FOREIGNINCOMETAX_NONBUS	Foreign income tax on non- business income	Currency	
COSTBASEADJUSTMENT	Cost base adjustment of capital interest	Currency	
CONSOLIDATIONCODE	Consolidation Indicator	Text, 1	Blank, C
CURRENCYCODE	Currency Code	Text, 3	
SERIAL	Sequential (Relevé) number of paper slip	Numeric, 9	
SERIALORIGINAL	Sequential (Relevé) number of previously-filed paper slip (user-entered)	Numeric, 9	
SERIALMM	Sequential (Relevé) number of XML slip	Numeric, 9	
SERIALMMPREVIOUS	Sequential (Relevé) number of previously-filed XML slip	Numeric, 9	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
<i>Generic boxes where ## is two numerals (01 to 04):</i>			
XBOX##	Additional Information - Box ##: Box number	Text, 7	
XAMT##	Additional Information - Box ##: Currency data	Currency	
XTXT##	Additional Information - Box ##: Character data	Text, 20	

CUSTOMFIELD	GUID or other unique identifier	Text, 50
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20

1.36 Relevé 18 Headings

Cell A1 must contain "R18"

Heading	Description	Type, Size	Comments & Examples
NAME1	Beneficiary name line 1 (type 3 & 4)	Text, 50	Required; type 3 & 4
NAME2	Beneficiary name line 2 (type 3 & 4)	Text, 50	
LASTNAME1	First beneficiary last name (type 1 & 2)	Text, 30	Required; type 1 & 2
FIRSTNAME1	First beneficiary first name (type 1 & 2)	Text, 30	
INITIAL1	First beneficiary initial (type 1 & 2)	Text, 1	
LASTNAME2	Second beneficiary last name (type 1 & 2)	Text, 30	
FIRSTNAME2	Second beneficiary first name (type 1 & 2)	Text, 30	
INITIAL2	Second beneficiary initial (type 1 & 2)	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	CAN, USA, etc.
TAXYEAR	Tax year	Numeric, 4	2020
RECIPIENTNUMBER	Recipient number	Text, 20	
RECTYPE	Recipient type	Text, 1	1 - Individual 2 - Joint account 3 - Corporation 4 - Association, trust, club or partnership
REPORTCODE	Status of slip	Text, 1	R - Original, A - Amended or D - Cancelled
SIN	Beneficiary SIN	Text, 9	
SIN2	Second beneficiary SIN	Text, 9	
CURRENCY	Currency code	Text, 3	CAD, USD, EUR & etc.
DATETRANSACTION	Date of transaction	Date	Mmm. dd, yyyy (Apr. 1, 2020)
CODEOFSECURITY	Code for type of security	Text, 3	OBL, DRO, DEN, ACT, TIT, BON, OPE, UNI, MET, DIV, CON
NUMBEROFSECURITIES	Number of securities	Numeric, 16	12 digits + 4 decimals
DESCRIPTIONOFSECURITIES	Description of securities	Text, 60	

Heading	Description	Type, Size	Comments & Examples
IDNUMBER	Identification number of the values	Text, 12	
FACEVALUE	Face value	Currency	
COSTORBOOKVALUE	Cost or book value	Currency	
PROCEEDSOFDISPOSITION	Proceeds of disposition or settlement amounts	Currency	
CODEOFSECURITYRECEIVED	Code for type of security received in exchange	Text, 3	OBL, DRO, DEN, ACT, TIT, BON, OPE, UNI, MET, DIV, CON
NUMBEROFSECURITIESRECEIVED	Number of securities received in exchange	Numeric, 13	9 digits + 4 decimals
DESCRIPTIONOFSECURITIESRECEIVED	Description of securities received in exchange	Text, 60	
SERIAL	Sequential (Relevé) number of paper slip	Numeric, 9	
SERIALORIGINAL	Sequential (Relevé) number of previously-filed paper slip (user-entered)	Numeric, 9	
SERIALMM	Sequential (Relevé) number of XML slip	Numeric, 9	
SERIALMMPREVIOUS	Sequential (Relevé) number of previously-filed XML slip	Numeric, 9	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
<i>Generic boxes where ## is two numerals (01 to 04):</i>			
XBOX##	Additional Information - Box ##: Box number	Text, 7	
XAMT##	Additional Information - Box ##: Currency data	Currency	
XTXT##	Additional Information - Box ##: Character data	Text, 20	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.37 Relevé 22 Headings

Cell A1 must contain "R22"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Recipient last name	Text, 30	Required
FIRSTNAME	Recipient first name	Text, 30	
INITIAL	Recipient initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	CAN, USA, etc.
TAXYEAR	Year	Text, 1	2020
SIN	Social insurance number	Text, 15	
REFNO	Recipient's ID number	Text, 10	
VALUEMULTI	Value of coverage rec'd under multi-employer insurance plan	Currency	
VALUEPRIVT	Value of coverage received under private health services plan	Currency	
FROMDATE1	Protection periods - 1st start date	Date	Mm, dd, yyyy
TODATE1	Protection periods - 1st end date	Date	Mm, dd, yyyy
FROMDATE2	Protection periods - 2nd start date	Date	Mm, dd, yyyy
TODATE2	Protection periods - 2nd end date	Date	Mm, dd, yyyy
FROMDATE3	Protection periods - 3rd start date	Date	Mm, dd, yyyy
TODATE3	Protection periods - 3rd end date	Date	Mm, dd, yyyy
REPORTCODE	Status of slip	Text, 1	R - Original, A - Amended or D - Cancelled
SERIAL	Relevé No. of paper slip	Numeric, 9	
SERIALORIGINAL	Relevé No. of previously-filed paper slip (user-entered)	Numeric, 9	
SERIALMM	Relevé No. of XML slip	Numeric, 9	
SERIALMMPREVIOUS	Relevé No. of previously-filed XML slip	Numeric, 9	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon

Heading	Description	Type, Size	Comments & Examples
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.38 Relevé 24 Headings

Cell A1 must contain "R24"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Recipient last name	Text, 30	Required
FIRSTNAME	Recipient first name	Text, 30	
INITIAL	Recipient initial	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	CAN, USA, etc.
YEAR	Year	Text, 1	2020
SIN	Social insurance number	Text, 9	
IDCHILDCARE	Number assigned to payer	Text, 20	
LASTNAMECHILD1	Surname - child 1	Text, 30	
FIRSTNAMECHILD1	First name - child 1	Text, 30	
DATEOFBIRTH1	Date of birth - child 1	Date	Mmm, dd, yyyy
DAYSOF CARE1	Number of days of care - child 1	Numeric, 3	
WEEKSATCAMP1	Number of weeks at camp - child 1	Numeric, 2	
TOTALEXPENSES1	Total expenses paid - child 1	Currency	
EXPENSESNOTQUALIFY1	Expenses (no tax credit) - child 1	Currency	
EXPENSESQUALIFY1	Expenses (with tax credit) - child 1	Currency	
LASTNAMECHILD2	Surname - child 2	Text, 30	
FIRSTNAMECHILD2	First name - child 2	Text, 30	
DATEOFBIRTH2	Date of birth - child 2	Date	Mmm, dd, yyyy
DAYSOF CARE2	Number of days of care - child 2	Numeric, 3	
WEEKSATCAMP2	Number of weeks at camp - child 2	Numeric, 2	
TOTALEXPENSES2	Total expenses paid - child 2	Currency	
EXPENSESNOTQUALIFY2	Expenses (no tax credit) - child 2	Currency	
EXPENSESQUALIFY2	Expenses (with tax credit) - child 2	Currency	
LASTNAMECHILD3	Surname - child 3	Text, 30	
FIRSTNAMECHILD3	First name - child 3	Text, 30	

Heading	Description	Type, Size	Comments & Examples
DATEOFBIRTH3	Date of birth - child 3	Date	Mmm, dd, yyyy
DAYSOF CARE3	Number of days of care - child 3	Numeric, 3	
WEEKSATCAMP3	Number of weeks at camp - child 3	Numeric, 2	
TOTALEXPENSES3	Total expenses paid - child 3	Currency	
EXPENSESNOTQUALIFY3	Expenses (no tax credit) - child 3	Currency	
EXPENSESQUALIFY3	Expenses (with tax credit) - child 3	Currency	
REPORTCODE	Status of slip	Text, 1	R - Original, A - Amended or D - Cancelled
SERIAL	Relevé No. of paper slip	Numeric, 9	
SERIALORIGINAL	Relevé No. of previously-filed paper slip (user-entered)	Numeric, 9	
SERIALMM	Relevé No. of XML slip	Numeric, 9	
SERIALMMPREVIOUS	Relevé No. of previously-filed XML slip	Numeric, 9	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.39 Relevé 25 Headings

Cell A1 must contain "R25"

Heading	Description	Type, Size	Comments & Examples
LASTNAME1	First beneficiary last name (type 1, 2 & 6)	Text, 30	Required; type 1, 2 & 6
FIRSTNAME1	First beneficiary first name (type 1, 2 & 6)	Text, 30	
INITIAL1	First beneficiary initial (type 1, 2 & 6)	Text, 1	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	CAN, USA, etc.
BENEFICIARYNUM	Employer assigned number	Text, 20	
TRANSIT	Bank transit number	Text, 10	
REPORTCODE	Status of slip	Text, 1	R - Original, A - Amended or D - Cancelled
ACTUALDIVIDENDS	Non-Eligible Dividend amount	Currency	
ACTUALDIVIDENDS_E	Eligible Dividend amount	Currency	
CAPGAINS	Total net Capital Gains	Currency	
CAPGAINSEXEMPTION	Farm or small business capital gains	Currency	
OTHER	QPP and other amounts	Currency	
CANCELLED	Amounts cancelled	Currency	
FOREIGNTAX	Income tax paid to a foreign government	Currency	
QUEBECTAX	Québec income tax withheld	Currency	
NAMESPRINCIPAL	Principal person who established trust deed	Text, 25	
SIN	First beneficiary SIN	Text, 9	
SERIAL	Sequential (Relevé) number of paper slip	Numeric, 9	
SERIALORIGINAL	Sequential (Relevé) number of previously-filed paper slip (user-entered)	Numeric, 9	
SERIALMM	Sequential (Relevé) number of XML slip	Numeric, 9	
SERIALMMPREVIOUS	Sequential (Relevé) number of previously-filed XML slip	Numeric, 9	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two

Heading	Description	Type, Size	Comments & Examples
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	separated by a semi-colon
COMPANY.NAME	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
<i>Generic boxes where ## is two numerals (01 to 04):</i>			
XBOX##	Additional Information - Box ##: Box number	Text, 7	
XAMT#	Additional information - Box ##: Currency data	Currency	
XTXT##	Additional information - Box ##: Character data	Text, 20	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.40 Relevé 27 Headings

Cell A1 must contain "R27"

Heading	Description	Type, Size	Comments & Examples
LASTNAME1	First recipient last name (type 1 & 4)	Text, 30	Required; type 1
FIRSTNAME1	First recipient first name (type 1 & 4)	Text, 30	
INITIAL1	First recipient initial (type 1 & 4)	Text, 1	
FIRSTINDIVIDUAL	Indicate first entity is individual (type 4)	Yes/No	
LASTNAME2	Second recipient last name (type 4)	Text, 30	
FIRSTNAME2	Second recipient first name (type 4)	Text, 30	
INITIAL2	Second recipient initial (type 4)	Text, 1	
SECONDINDIVIDUAL	Indicate second entity is individual (type 4)	Yes/No	
NAME1	Recipient name, line 1 (type 2, 3, 4 & 5)	Text, 50	Required; type 2, 3, 4 & 5
NAME2	Recipient name, line 2 (type 2, 3, 4 & 5)	Text, 50	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	CAN, USA, etc.
TAXYEAR	Year	Text, 1	2020
SIN	Social insurance number	Text, 15	
SIN2	Second recipient's social insurance number	Text, 15	
RECTYPER27	Recipient type	Text, 1	1 - Individual 2 - Corporation 3 - Partnership 4 - Holder of a joint account or co-recipient of payments 5 - Consortium
NEQR27	Recipient's NEQ	Numeric, 10	
NEQ2R27	Second recipient's NEQ	Numeric, 10	
REFNO	Recipient's ID number	Numeric, 10	
REFNO2	Second recipient's ID number	Numeric, 10	
PAYMENTS	Contractual payments	Currency	

Heading	Description	Type, Size	Comments & Examples
SUBSIDIES	Subsidies	Currency	
REPORTCODER27	Status of slip	Text, 1	R - Original, A - Amended or D - Cancelled
SERIAL	Relevé No. of paper slip	Numeric, 9	
SERIALORIGINAL	Relevé No. of previously-filed paper slip (user-entered)	Numeric, 9	
SERIALMM	Relevé No. of XML slip	Numeric, 9	
SERIALMMPREVIOUS	Relevé No. of previously-filed XML slip	Numeric, 9	
TEXTATTOP	Optional text to print at top of slip	Text, 15	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.41 Relevé 31 Headings

Cell A1 must contain "R31"

Heading	Description	Type, Size	Comments & Examples
OWNERSTREETNUMBER	Owner's building number - used to calculate dwelling number	Text, 10	
DWELLINGAPARTMENT	Apartment number of dwelling	Text, 6	
DWELLINGSTREETNO	Street number of dwelling	Text, 10	
DWELLINGSTREET	Street name of dwelling	Text, 40	
DWELLINGCITY	City of dwelling	Text, 30	
DWELLINGPOSTAL	Postal code of dwelling (including space)	Text, 10	
LASTNAME	Tenant last name	Text, 30	Required
FIRSTNAME	Tenant first name	Text, 30	
ADDRESS1	Address line 1	Text, 50	
ADDRESS2	Address line 2	Text, 50	
CITY	City	Text, 28	
PROV	Province code	Text, 2	
POSTAL	Postal code (including space)	Text, 10	
COUNTRY	Country, in address	Text, 3	CAN, USA, etc.
YEAR	Year	Text, 1	2020
REPORTCODE	Status of slip	Text, 1	R - Original, A - Amended or D - Cancelled
SERIAL	Relevé No. of paper slip	Numeric, 9	
SERIALORIGINAL	Relevé No. of previously-filed paper slip (user-entered)	Numeric, 9	
SERIALMM	Relevé No. of XML slip	Numeric, 9	
SERIALMMPREVIOUS	Relevé No. of previously-filed XML slip	Numeric, 9	
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

1.42 TP64 Headings

Cell A1 must contain "TP64"

Heading	Description	Type, Size	Comments & Examples
LASTNAME	Recipient last name	Text, 30	Required
FIRSTNAME	Recipient first name	Text, 30	
SIN	Social insurance number	Text, 9	
TAXYEAR	Taxation year	Numeric, 4	2020
Q1YES	Q. 1, "Expense," Yes	Text, 1	"X" = Checked
Q1NO	Q. 1, "Expense," No	Text, 1	"X" = Checked
Q2FROM	Q. 2, "From date"	Date	Mmm. dd, yyyy (Apr. 1, 2020)
Q2TO	Q. 2, "To date"	Date	Mmm. dd, yyyy (Apr. 1, 2020)
Q3	Q. 3, "Title or position"	Text, 75	
Q4YES	Q. 4, "Remunerated by commissions," Yes	Text, 1	"X" = Checked
Q4NO	Q. 4, "Remunerated by commissions," No	Text, 1	"X" = Checked
Q4AMT	Q. 4, "Amount of remuneration"	Currency	
Q4TYPE	Q. 4, "Type of property or contract"	Text, 75	
Q5YES	Q. 5, "Kilometrage allowance," Yes	Text, 1	"X" = Checked
Q5NO	Q. 5, "Kilometrage allowance," No	Text, 1	"X" = Checked
Q5RATESPERKM	Q. 5, "Rates per km"	Currency	
Q5DISTANCE	Q. 5, "Distance travelled"	Numeric, 4	
Q5ALLOWANCE	Q. 5, "Total allowance"	Currency	
Q5AMTONR1	Q. 5, "Amount reported on Relevé 1"	Currency	
Q5TYPE	Q. 5, "Type of trips covered"	Text, 75	
Q6YES	Q. 6, "Allowance for expenses," Yes	Text, 1	"X" = Checked
Q6NO	Q. 6, "Allowance for expenses," No	Text, 1	"X" = Checked
Q6AALLOWANCE	Q. 6, "Motor vehicle allowance"	Currency	
Q6AREIMBURSEMENT	Q. 6, "Motor vehicle reimbursement"	Currency	
Q6AAMTONR1	Q. 6, "Motor vehicle amount on Relevé 1"	Currency	
Q6BALLOWANCE	Q. 6, "Travel allowance"	Currency	
Q6BREIMBURSEMENT	Q. 6, "Travel reimbursement"	Currency	
Q6BAMTONR1	Q. 6, "Travel amount on Relevé 1"	Currency	
Q6CALLOWANCE	Q. 6, "Other allowance"	Currency	
Q6CREIMBURSEMENT	Q. 6, "Other reimbursement"	Currency	

Heading	Description	Type, Size	Comments & Examples
Q6CAMTONR1	Q. 6, "Other amount on Relevé 1"	Currency	
Q6INFO	Q. 6, "Other expenses" specify	Text, 20	
Q7YES	Q. 7, "Expenses on employee's behalf," Yes	Text, 1	"X" = Checked
Q7NO	Q. 7, "Expenses on employees behalf," No	Text, 1	"X" = Checked
Q7TYPE	Q. 7, "Type of expenses paid"	Text, 75	
Q7AMT	Q. 7, "Amount of expenses paid"	Currency	
Q7AMTONR1	Q. 7, "Amount on Relevé 1"	Currency	
Q8YES	Q. 8, "Work away from office" Yes	Text, 1	"X" = Checked
Q8NO	Q. 8, "Work away from office" No	Text, 1	"X" = Checked
Q8A	Q. 8, "Percentage of hours at workplace"	Percentage	
Q8B	Q. 8, "Percentage of hours at clients' premises/on road"	Percentage	
Q8C	Q. 8, "Percentage of hours at employee's home"	Percentage	
Q9YES	Q. 9, "12 hours away from workplace municipality" Yes	Text, 1	"X" = Checked
Q9NO	Q. 9, "12 hours away from workplace municipality" No	Text, 1	"X" = Checked
Q9AREA	Q. 9, "Area where employee performed duties"	Text, 60	
Q10YES	Q. 10, "Employee supply vehicle," Yes	Text, 1	"X" = Checked
Q10NO	Q. 10, "Employee supply vehicle" No	Text, 1	"X" = Checked
Q11YES	Q. 11, "Travel expenses under contract," Yes	Text, 1	"X" = Checked
Q11NO	Q. 11, "Travel expenses under contract," No	Text, 1	"X" = Checked
Q11INFO	Q. 11, "Particulars"	Text, 75	
Q12YES	Q. 12, "Purchase supplies," Yes	Text, 1	"X" = Checked
Q12NO	Q. 12, "Purchase supplies," No	Text, 1	"X" = Checked
Q12INFO	Q. 12, "Particulars"	Text, 75	
Q13YES	Q. 13, "Pay substitute," Yes	Text, 1	"X" = Checked
Q13NO	Q. 13, "Pay substitute," No	Text, 1	"X" = Checked
Q14YES	Q. 14, "Employee office at workplace," Yes	Text, 1	"X" = Checked
Q14NO	Q. 14, "Employee office at workplace," No	Text, 1	"X" = Checked
Q15YES	Q. 15, "Employee office away from workplace," Yes	Text, 1	"X" = Checked
Q15NO	Q. 15, "Employee office away from	Text, 1	"X" = Checked

Heading	Description	Type, Size	Comments & Examples
	workplace," No		
Q15A	Q. 15, "Performed >50% duties at away office"	Text, 1	"X" = Checked
Q15B	Q. 15, "Office exclusively used to earn employment income"	Text, 1	"X" = Checked
Q16YES	Q. 16, "Other expenses not on form," Yes	Text, 1	"X" = Checked
Q16NO	Q. 16, "Other expenses not on form," No	Text, 1	"X" = Checked
Q16INFO	Q. 16, "Particulars"	Text, 75	
Q17YES	Q. 17, "Incur shareman expenses," Yes	Text, 1	"X" = Checked
Q17NO	Q. 17, "Incur shareman expenses," No	Text, 1	"X" = Checked
Q17INFO	Q. 17, "Particulars"	Text, 75	
Q18YES	Q. 18, "Employee required to maintain home office for COVID-19," Yes	Text, 1	"X" = Checked
Q18NO	Q. 18, "Employee required to maintain home office for COVID-19," No	Text, 1	"X" = Checked
Q19YES	Q. 19, "Employee pay for supplies," Yes	Text, 1	"X" = Checked
Q19NO	Q. 19, "Employee pay for supplies," No	Text, 1	"X" = Checked
Q20YES	Q. 20, "Reimburse employee for home office expenses," Yes	Text, 1	"X" = Checked
Q20NO	Q. 20, "Reimburse employee for home office expenses," No	Text, 1	"X" = Checked
Q20aYES	Q. 20a, "Amounts reimbursed included in box A of RL-1," Yes	Text, 1	"X" = Checked
Q20aNO	Q. 20a, "Amounts reimbursed included in box A of RL-1," No	Text, 1	"X" = Checked
EMAILADDRESS	Recipient email address	Text, 255	One email address, or two separated by a semi-colon
OKTOEMAILSLIP	Permission granted to email slip	Yes/No	
COMPANY.NAME1	Company associated with slip	Text, 35	
COMPANY.COMPANYTAG	Tag associated with company name	Text, 10	
SLIPTAG	Subset tag	Text, 10	
CUSTOMFIELD	GUID or other unique identifier	Text, 50	
CUSTOMPASSWORD	Password for recipient PDF slip	Text, 20	

