

WELLAND HYDRO-ELECTRIC SYSTEM CORP.

P.O. Box 280 950 East Main Street, Welland, Ontario L3B 5P6 Telephone 905-732-1381 Fax 905-732-0123

October 25, 2007

Delivered by Courier and E-file

Ms. Kirsten Walli Board Secretary Ontario Energy Board P.O. Box 2319, 27th Floor 2300 Yonge Street Toronto, ON M4P 1E4

Dear Ms. Walli:

Re:

Welland Hydro-Electric System Corp.

Application to Amend 2007 Distribution Rates

(Recovery of 2007 PILs Expense) Board File No. EB-2007-0663

Welland Hydro-Electric System Corp. previously filed an electronic copy (Welland_IRR_20070928) of responses to questions filed by the School Board Coalition and Ontario Energy Board technical staff. This file contains a copy of Welland Hydro-Electric System Corp.'s 2005 tax return which was neither signed nor dated (see page 64). Please find enclosed copies (2) of a dated and signed version of this page.

An electronic copy (Welland_IRR_SUPP_20071025) containing all documents has been filed using the OEB's E-filing services.

Yours very truly,

Wayne Armstrong
Director of Finance

905-732-1381 Ext 234

cc: School Energy Coalition

- Summary of tax and credits	
Federal tax	
Part I tax payable from page 7	
Part I.3 tax payable from Schedule 33, 34, or 35	
Part II surtax payable from Schedule 46	
Part IV tax payable from Schedule 3	
Part VI tax payable from Schedule 38	
· ·	727
Part XIV tax payable from Schedule 20	728
	Total federal tax 690
Add provincial or territorial tax:	
Provincial or territorial jurisdiction 750 Ontario	
(if more than one jurisdiction, enter "multiple" and complete Schedule 5)	
Net provincial or territorial tax payable (except Quebec, Ontario, and Alberta) . 760
Provincial tax on large corporations (New Brunswick and Nova Scotia)	765
Deduct other and the	Total tax payable 770 690 A
Deduct other credits:	780
Investment tax credit refund from Schedule 31	
Dividend refund from page 6	
Federal capital gains refund from Schedule 18	
Federal qualifying environmental trust tax credit refund	
Canadian film or video production tax credit refund (Form T1131)	
Film or video production services tax credit refund (Form T1177)	000
Tax withheld at source	800
Total payments on which tax has been withheld 801	no.
Allowable refund for non-resident-owned investment corporations from Schedule 26	
Provincial and territorial capital gains refund from Schedule 18	808
Tax to think out a first a do the first a firs	
	credits 890 690 ► 690 B
Refund code 894 1 Overpayment	Balance (line A minus line B)
Direct deposit request	If the result is negative, you have an overpayment.
To have the corporation's refund deposited directly into the corporation's	If the result is positive, you have an overpayment.
bank account at a financial institution in Canada, or to change banking	Enter the amount on whichever line applies.
information you already gave us, complete the information below:	Generally, we do not charge or refund a difference
Start Change information 910	of \$2 or less.
Branch number	Balance unpaid
914 918	Enclosed payment 898
Institution number Account number	
If the corporation is a Canadian-controlled private corporation throughout the taxation year, does it qualify for the one-month extension of the date the balance of tax is due?	
does it quality for the one-month extension of the date the balance of tax is due	1100 1100
Certification	
I, 950 PEEVER 951 ROSS	954 PRESIDENT
Last name First name	Position, office, or rank
am an authorized signing officer of the corporation. I certify that I have examined this return, in	ncluding accompanying schedules and statements, and that
the information given on this return is, to the best of my knowledge, correct and complete. The taxation year is consistent with that of the previous year except as specifically disclosed in a s	ither certify that the method of calculating income for this fatement attached to this return
	956 (905) 732-1381
955 2006/06/27 Date (yyyy/mm/dd) Signature of the/authorized signing officer of the	
Is the contact person the same as the authorized signing officer? If No, complete the information below	
Name	Telephone number
Language of correspondence – Langue de correspondance	
990 Indicate the language in which you would like to receive correspondence. 1 English / Anglais X 2 Français / French Indiquer la langue de correspondance de votre choix:	