

«bnRegistration»

«charityName»

«fiscalPeriodEnding»

**Registered Charity Information Return Protected B** when completed

## Section A: Identification

* To help you fill out this form, refer to Guide T4033, Completing the Registered Charity Information Return. It can be found at **canada.ca/cra-forms**.

**Note:** Even if a charity is inactive, an information return must be filed to maintain its registered status.

## Complete the following:

1. Charity name:

«charityName»

1. Return for fiscal period ending:
2. BN/registration number:

«fiscalPeriodEnding»

1. Web address (if applicable):

«bnRegistration»

«webAddress»

Year

Month Day

«col\_1510»

A1 Was the charity in a subordinate position to a head body? ..... .. .................................................................

**If yes**, give the name and BN/registration number of the organization.

1510

«a1\_name»

«a1\_bnRegistration»

BN (9 digits, 2 letters, 4 digits. Example: 123456789RR0001)

Name:

«col\_1570»

A2 Has the charity wound-up, dissolved, or terminated operations? .................................................................

A3 Is the charity designated as a public foundation or private foundation? ..........................................................

1570

«col\_1600»

1600

**If yes**, you **must** complete Schedule 1, Foundations. To confirm the charity’s designation, go to the CRA’s List of charities and refer to the charity’s detail page.

## Section B: Directors/trustees and like officials

B1 **All** charities must complete Form T1235, Directors/Trustees and Like Officials Worksheet. Only the **public** information section of the worksheet is available to the public. Charities subject to the Ontario Corporations Act must also complete Form RC232, Corporations Information Act Annual Return for Ontario Not-for-Profit Corporations.

**Note:** If you would like these individuals to have the authority to communicate with the CRA on behalf of your charity, their name must also appear as an owner for your Business Number (BN). For more information, go to **canada.ca/charities-giving**, select "Operating a registered charity," then "Making a change to your organization" and see "Change director."

## Section C: Programs and general information

«col\_1800»

C1 Was the charity active during the fiscal period? .....................................................................................

**If no,** explain why in the "Ongoing programs" space below at C2.

1800

C2 Describe all **ongoing** and **new** charitable programs the charity carried on during this fiscal period to further its purpose(s) (as defined in its governing documents). "Programs" includes all of the charitable activities that the charity carries out on its own through employees or volunteers as well as through qualified donees and intermediaries. The charity may also use this space to describe the contributions of its volunteers in carrying out its activities, for example, number of volunteers and/or hours. **Do not** include the names of employees or volunteers. Grant-making charities should describe the types of organizations they support. **Do not** describe fundraising activities in this space.

## Do not attach additional sheets of paper or annual reports.

|  |
| --- |
| Ongoing programs:  «C2\_OngoingProg» |
|  |
|  |
| New programs:  «C2\_NewProg» |
|  |
|  |
|  |
|  |

T3010 (21) e (Ce formulaire est disponible en français.)

**Registered charities may make gifts to qualified donees. Qualified donees are other registered Canadian charities, as well as certain other organizations described in the Income Tax Act.**

«col\_2000»

C3 Did the charity make gifts or transfer funds to qualified donees or other organizations? . . . ...................................

2000

**Important:** If **yes**, you **must** complete Form T1236, Qualified donees worksheet/Amounts provided to other organizations.

C4 Did the charity carry on, fund, or provide any resources through employees, volunteers, agents, joint ventures,

«col\_2100»

contractors, or any other individuals, intermediaries, entities, or means (other than qualified donees) for any activity/ program/project outside Canada? ...................................................................................................

**Important:** If **yes**, you **must** complete Schedule 2, Activities outside Canada.

2100

C5 Public policy dialogue and development activities This question has been removed.

C6 If the charity carried on fundraising activities or engaged third parties to carry on fundraising activities on its behalf, select all fundraising methods that it used during the fiscal period:

«col\_2620»

«col\_2570»

«col\_2500»

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 2500  «col\_2510» | Advertisements/print/radio/  TV commercials | 2570  «col\_2575» | Sales | 2620  «col\_2630» | Telephone/TV solicitations |
| 2510  «col\_2530» | Auctions | 2575  «col\_2580» | Internet | 2630  «col\_2640» | Tournament/sporting events |
| 2530  «col\_2540» | Collection plate/boxes | 2580  «col\_2590» | Mail campaigns | 2640  «col\_2650» | Cause-related marketing |
| 2540  « col\_2550» | Door-to-door solicitation | 2590 | Planned-giving programs | 2650 | Other  «C6\_2660\_txt» |

2660 Specify:

|  |  |  |  |
| --- | --- | --- | --- |
| 2550 | Draws/lotteries | 2600 | Targeted corporate |
| 2560 | Fundraising dinners/galas/concerts | 2610 | donations/sponsorships  Targeted contacts |

«col\_2600»

«col\_2610»

«col\_2560»

«col\_2700»

C7 Did the charity pay external fundraisers? ...........................................................................................

**If yes**, you **must** complete the following lines, and complete Schedule 4, Confidential data*,* Table 1.

2700

«C7\_5450\_txt»

* 1. Enter the gross revenue collected by the fundraisers on behalf of the charity. ............................................. $ (b) Enter the amounts paid to and/or retained by the fundraisers. ............................................................... $

«C7\_5460\_txt»

5450

5460

(c) Select the method of payment to the fundraiser:

«col\_2770»

«col\_2750»

«col\_2730»

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 2730  «col\_2740» | Commissions | 2750  «col\_2760» | Finder's fee | 2770  «col\_2780» | Honoraria |
| 2740 | Bonuses | 2760 | Set fee for services | 2780 | Other |
|  |  | 2790 | Specify: |  |  |

«col\_2800»

(d) Did the fundraiser issue tax receipts on behalf of the charity? ...............................................................

2800

C8 Did the charity compensate any of its directors/trustees or like officials or persons not at arm's length from the

«col\_3200»

|  |  |  |
| --- | --- | --- |
| 3200 |  |  |
| 3400 |  |  |
| 3900 |  |  |

charity for services provided during the fiscal period (other than reimbursement for expenses)? ............................

C9 Did the charity incur any expenses for compensation of employees during the fiscal period? ...............................

«col\_3400»

**Important:** If **yes**, you **must** complete Schedule 3, Compensation.

C10

Did the charity receive any donations or gifts of any kind valued at $10,000 or more from any donor that

«col\_3900»

was **not** resident in Canada and was **not** any of the following: ..................................................................

* a Canadian citizen, nor
* employed in Canada, nor
* carrying on a business in Canada, nor
* a person having disposed of taxable Canadian property?

**Important:** If **yes**, you **must** complete Schedule 4, Confidential data, Table 2, for each donation of $10,000 or more.

«col\_4000»

C11 Did the charity receive any non-cash gifts for which it issued tax receipts? . .. ........ ..........................................

|  |  |  |
| --- | --- | --- |
| 4000 |  |  |
| 5800 |  |  |
| 5810 |  |  |
| 5820 |  |  |
| 5830 |  |  |

**Important:** If **yes**, you **must** complete Schedule 5, Non-cash gifts.

«col\_5800»

C12

C13

C14

C15

Did the charity acquire a non-qualifying security?..................................................................................

«col\_5810»

Did the charity allow any of its donors to use any of its property? (except for permissible uses).............................

«col\_5820»

Did the charity issue any of its tax receipts for donations on behalf of another organization? ................................

«col\_5830»

Did the charity have direct partnership holdings at any time during the fiscal period?.........................................

## Section D: Financial information

Fill out either Section D or Schedule 6, Detailed financial information.

If **any** of the following applies to the charity, complete Schedule 6 instead of Section D:

1. The charity's revenue exceeds $100,000.
2. The amount of all property (for example, investments, rental properties) not used in charitable activities was more than $25,000.
3. The charity had permission to accumulate funds during this fiscal period.

**Show all amounts to the nearest single Canadian dollar. Do not enter "See attached financial statements." All relevant fields must be filled out.**

«col\_4020»

D1 Was the financial information reported below prepared on an accrual or cash basis? ........................................

4020

## D2 Summary of financial position:

Using the charity's own financial statements, enter the following:

Did the charity own land and/or buildings? .........................................................................................

**Total assets (including land and buildings)** .....................................................................................

**Total liabilities** ........................................................................................................................

Did the charity borrow from, loan to, or invest assets with any non-arm's length persons?...................................

«col\_4050»

4050

«col\_4200»

«col\_4350»

«col\_4400»

4200

4350

4400

$

$

D3 **Revenue:**

Did the charity issue tax receipts for gifts? .........................................................................................

**If yes**, enter the total eligible amount of all gifts for which the charity has issued or will issue tax receipts .................

4490

«col\_4490»

4500 $

«col\_4500»

Total amount of 10 year gifts received ......................................................

4505 $

Total amount received from other registered charities ............................................................................

Total other gifts received for which a tax receipt was **not** issued by the charity

(excluding amounts at lines 4575 and 4630) .......................................................................................

Did the charity receive any revenue from any level of government in Canada?................... .............................

**If yes**, total amount received .........................................................................................................

4510

4530

4565

4570

$

«col\_4510»

$

«col\_4530»

«col\_4565»

$

«col\_4570»

4571

«col\_4571»

Total tax-receipted revenue from all sources outside of Canada

4571 $

(government and non-government)..........................................................

|  |  |  |
| --- | --- | --- |
| 4575 | | $ |
| 4630 |  | $ |
| 4640 |  | $ |
| 4650 |  | $ |
| 4700 |  | $ |
|  |  |  |
| 4860 |  | $ |
| 4810 |  | $ |
| 4920 |  | $ |
| 4950 |  | $ |

Total **non** tax-receipted revenue from all sources outside of Canada (government and non-government) .................

«col\_4630»

«col\_4575»

Total **non** tax-receipted revenue from fundraising .................................................................................

«col\_4640»

Total revenue from sale of goods and services (except to any level of government in Canada) .............................

«col\_4650»

Other revenue not already included in the amounts above .......................................................................

«col\_4700»

**Total revenue (add lines 4500, 4510 to 4570, and 4575 to 4650)**.............................................................

D4 **Expenditures:**

«col\_4860»

Professional and consulting fees ....................................................................................................

«col\_4810»

Travel and vehicle expenses .........................................................................................................

«col\_4920»

All other expenditures not already included in the amounts above (excluding gifts to qualified donees) ....................

«4950»

Total expenditures (excluding gifts to qualified donees) **(add lines 4860, 4810, and 4920)** .................................

Of the amount at line 4950:

«col\_5000»

5000

5010

(a) Total expenditures on charitable activities ......................................... $

«col\_5010»

(b) Total expenditures on management and administration .......................... $

«col\_5050»

5050

5100

Total amount of gifts made to all qualified donees .................................................................................

«col\_5100»

$

$

**Total expenditures (add lines 4950 and 5050)** ..................................................................................

## Section E: Certification

This return **must** be signed by a person who has authority to sign on behalf of the charity. **It is a serious offence under the Income Tax Act to provide false or deceptive information.**

I certify that the information given on this annual return and any attachment is, to the best of my knowledge, correct, complete, and current.

|  |  |  |
| --- | --- | --- |
| Name (print):  «secEphone»  «e\_position»  «e\_signature»  «e\_name» | | Signature: |
| Position in charity: | Date:  «secEDate» | Phone number: |

## Section F: Confidential data

F1 Enter the physical address of the charity and the address in Canada for the charity's books and records. Post office box numbers and rural routes are not sufficient.

|  |  |  |
| --- | --- | --- |
|  | **Physical address of the charity** | **Address for the charity's books and records** |
| Complete street address | «f1\_phyAddCharity» | «f1\_addCharityBooks» |
| City | «f1\_charityCity» | «f1\_charityBooksCity» |
| Province or territory and postal code  «f1\_phyProv» |  | «f1\_booksProv» |

F2 Name and address of individual who completed this return.

|  |  |
| --- | --- |
| Name:  «f2\_name» | |
| Company name (if applicable):  «f2\_compName» | |
| Complete street address:  «f2\_streetAddr» | |
| City, province or territory, and postal code:  «f2\_city» | |
| Phone number:  «f2\_phone» | Is this the same individual who certified in Section E above?  «f2\_isInSecE» |

## Privacy statement

Personal information is collected under the authority of the Income Tax Act and is used to establish and validate the identity and contact information of directors, trustees, officers, like officials, and authorized representatives of the organization. This information will also be used as a basis for the indirect collection of additional personal information from other internal and external sources, which includes personal tax information, and relevant financial and biographical information. Personal information will be used to assess the risk of registration with respect to the obligations and requirements as outlined in the Act and the common law. The social insurance number (SIN) is collected under subsection 237 of the Act and is used for identification purposes.

The Canada Revenue Agency (CRA) will make the information on this annual information return available to the public on the Charities Directorate website, except for information identified as confidential. Personal information may also be disclosed under information-sharing agreements and in accordance with section 241 of the Act. Incomplete or inaccurate information may result in compliance measures including revocation of registered status.

Personal information is described in personal information bank CRA PPU 200 and is protected under the Privacy Act. Individuals have a right of protection, access to and correction or notation of their personal information. You are entitled to complain to the Privacy Commissioner of Canada regarding our handling of your information.

**Notification to directors and like officials**: The CRA strongly encourages the organization to voluntarily inform its directors and like officials that it has collected and disclosed their personal information to the CRA.

I confirm that I have read the Privacy statement above.

«privacyStatement»

## Checklist

A charity's complete annual information return includes:

* Form T3010, Registered Charity Information Return, and all applicable schedules
* a copy of the charity's financial statements
* Form T1235, Directors/Trustees and Like Officials Worksheet
* Form RC232, Corporations Information Act Annual Return for Ontario Not-for-Profit Corporations (if applicable)
* Form T1236, Qualified donees worksheet/Amounts provided to other organizations (if applicable)
* Form T2081, Excess Corporate Holdings Worksheet for Private Foundations (if applicable) If financial statements are not included, the charity's **registration may be revoked**.

**Foundations Schedule 1**

1 Did the foundation acquire control of a corporation?.... . . .........................................................................

«col\_100»

|  |  |  |
| --- | --- | --- |
| 100 |  |  |
| 110 |  |  |
| 120 |  |  |
| 130 |  |  |

2 Did the foundation incur any debts other than for current operating expenses, purchasing or selling investments,

«col\_110»

or in administering charitable activities?.............................................................................................

## For private foundations only:

3 Did the foundation hold any shares, rights to acquire shares, or debts owing to it that meet the definition of a

«col\_120»

non-qualified investment? .............................................................................................................

4 Did the foundation own more than 2% of any class of shares of a corporation at any time during the fiscal period? ......

«col\_130»

**If yes**, you must complete and attach Form T2081, Excess Corporate Holdings Worksheet for Private Foundations.

**Activities outside Canada Schedule 2**

**Important:** If you complete this section, you **must** answer **yes** to question C4.

«col\_200»

**For more information go to canada.ca/charities-giving and see Guidance CG-002, Canadian registered charities carrying out activities outside Canada.**

1 Total expenditures on activities/programs/projects carried on outside Canada, excluding gifts to qualified donees .......

2 Were any of the charity’s financial resources spent on programs outside of Canada under any kind of an arrangement including a contract, agency agreement, or joint venture to any other individual or organization

(excluding gifts to qualified donees)? ................................................................................................

200 $

210

«col\_210»

**If yes,** provide details of the amount reported in question 1 on line 200, that the charity transferred to these individuals or organizations in the following table:

|  |  |  |
| --- | --- | --- |
| **Name of individual/organization** | **Country code where the activities were carried out**  **(see list at the end of Schedule 2)** | **Amount ($)**  Show amounts to the nearest Canadian dollar |
| «schedule2\_name\_1» | «schedule2\_cc\_1» | «schedule2\_amount\_1» |
| «schedule2\_name\_2» | «schedule2\_cc\_2» | «schedule2\_amount\_2» |
| «schedule2\_name\_3» | «schedule2\_cc\_3» | «schedule2\_amount\_3» |

**Important:** If you entered information in the table above, you **must** answer **yes** in line 210.

3 Using the table below, enter the countries outside Canada where the charity itself carried on programs or devoted any of its resources.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| «schedule2\_3\_1» | «schedule2\_3\_2» | «schedule2\_3\_3» | «schedule2\_3\_4» | «schedule2\_3\_5» |
| «schedule2\_3\_6» |  | «schedule2\_3\_8» | «schedule2\_3\_9» | «schedule2\_3\_10» |

«col\_220»

4 Were any projects undertaken outside Canada funded by Global Affairs Canada .............................................

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 220 |  |  |  |  |
| 230 | $ |  |  |  |
| 240 |  |  |  |  |
| 250 |  |  |  |  |
| 260 |  |  |  |  |

**If yes**, what was the total amount the charity spent under this arrangement? ..................................................

«col\_240»

«col\_230»

5 Were any of the charity's activities outside of Canada carried out by employees of the charity?.............................

«col\_250»

6 Were any of the charity's activities outside of Canada carried out by volunteers of the charity? .............................

7 Did the charity export goods as part of its charitable activities? ..................................................................

«col\_260»

**If yes**, list the items exported, their destination, the country code, and their value.

|  |  |  |  |
| --- | --- | --- | --- |
| **Item exported**  «schedule2\_7\_item\_1» | **Destination (city/region)**  «schedule2\_7\_dest\_1» | **Country code**  «schedule2\_7\_countryCode\_1» | **Value (CAN $)**  «schedule2\_7\_value\_1» |
| «schedule2\_7\_item\_2» |  | «schedule2\_7\_countryCode\_2» | «schedule2\_7\_value\_2» |
|  | «schedule2\_7\_dest\_2» |  |  |
| «schedule2\_7\_item\_3» | «schedule2\_7\_dest\_3» | «schedule2\_7\_countryCode\_3» | «schedule2\_7\_value\_3» |
| «schedule2\_7\_item\_4» | «schedule2\_7\_dest\_4» | «schedule2\_7\_countryCode\_4» | «schedule2\_7\_value\_4» |

# Country codes

AF-Afghanistan AL-Albania

DZ-Algeria AO-Angola AR-Argentina AM-Armenia AZ-Azerbaijan

BD-Bangladesh BY-Belarus

BT-Bhutan BO-Bolivia

BA-Bosnia and Herzegovina BW-Botswana

BR-Brazil

BN-Brunei Darussalam BG-Bulgaria

BI-Burundi KH-Cambodia

CM-Cameroon

CF-Central African Republic TD-Chad

CL-Chile CN-China

CO-Colombia KM-Comoros

CD-Democratic Republic of Congo CG-Republic of Congo

CR-Costa Rica CI-Côte d’Ivoire HR-Croatia

CU-Cuba CY-Cyprus DK-Denmark

DO-Dominican Republic EC-Ecuador

EG-Egypt

SV-El Salvador ET-Ethiopia FR-France

GA-Gabon GM-Gambia GE-Georgia DE-Germany GH-Ghana

GT-Guatemala GY-Guyana HT-Haiti

HN-Honduras IN-India

ID-Indonesia IR-Iran

IQ-Iraq IL-Israel

PS-Israeli Occupied Territories IT-Italy

JM-Jamaica JP-Japan JO-Jordan

KZ-Kazakhstan KE-Kenya

KP-North Korea KR-South Korea KW-Kuwait

KG-Kyrgyzstan LA-Laos

LB-Lebanon LR-Liberia

MK-Macedonia MG-Madagascar MY-Malaysia

ML-Mali

MU-Mauritius MX-Mexico MN-Mongolia

ME-Montenegro MZ-Mozambique

MM-Myanmar (Burma) NA-Namibia

NL-Netherlands NI-Nicaragua NE-Niger

NG-Nigeria OM-Oman PK-Pakistan PA-Panama PE-Peru

PH-Philippines PL-Poland

QA-Qatar RE-Réunion

RO-Romania RU-Russia RW-Rwanda

SA-Saudi Arabia RS-Serbia

SL-Sierra Leone SG-Singapore SO-Somalia

ES-Spain

LK-Sri Lanka SD-Sudan

SY-Syrian Arab Republic TJ-Tajikistan

TZ-United Republic of Tanzania TH-Thailand

TL-Timor-Leste TR-Turkey

UG-Uganda UA-Ukraine

GB-United Kingdom

US-United States of America UY-Uruguay

UZ-Uzbekistan VE-Venezuela VN-Vietnam YE-Yemen

ZM-Zambia ZW-Zimbabwe

## Use the following codes for countries not listed above:

QS-Other countries in Africa

QR-Other countries in Asia and Oceania

QM-Other countries in Central and South America QP-Other countries in Europe

QO-Other countries in the Middle East QN-Other countries in North America

**Compensation Schedule 3**

**Important:** If you complete this section, you **must** answer **yes** to question C9.

1 (a) Enter the **number** of permanent, full-time, compensated positions in the fiscal period. This number should represent the number of positions the charity had including both managerial positions and others, and should not include independent contractors. **Do not** enter a dollar amount. ...................................................

(b) For the **ten (10)** highest compensated, permanent, full-time positions enter the **number of positions** that are within each of the following annual compensation categories. **Do not** tick the boxes, use numbers.

«col\_305»

«col\_315»

«col\_310»

«col\_300»

300

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 305  «col\_320» |  | $1 – $39,999 | 310  «col\_325» |  | $40,000 – $79,999 | 315 | «col\_330» | $80,000 – $119,999 |
| 320 |  | $120,000 – $159,999 | 325 |  | $160,000 – $199,999 | 330 |  | $200,000 – $249,999 |
| 335  «col\_335» |  | $250,000 – $299,999 | 340  «col\_340» |  | $300,000 – $349,999 | 345  «col\_345» |  | $350,000 and over |

«col\_370»

2 (a) Enter the **number** of part-time or part-year (for example, seasonal) employees the charity employed during

the fiscal period. ...............................................................................................................

(b) Total expenditure on compensation for part-time or part-year employees in the fiscal period. ..........................

3 Total expenditure on all compensation in the fiscal period. ......................................................................

370

380 $

«col\_380»

390 $

«col\_390»

**Confidential data Schedule 4**

**Important:** If you complete this section, you **must** answer **yes** to question C10.

## The information in this schedule is for the CRA's use and may be shared as permitted by law (for example, with certain other government departments and agencies).

1. **Information about external fundraisers**

Enter the name(s) and arm's length status of each external fundraiser.

|  |  |
| --- | --- |
| **Name (confidential)**  «schedule4\_name\_1» | **At arm's length? Yes/No**  **(confidential)**  «schedule4\_atArms\_1» |
| «schedule4\_name\_2» | «schedule4\_atArms\_2» |
|  |  |

## Information about donors not resident in Canada

Complete this schedule to report any gift of any kind valued at $10,000 or more received from any donor that was **not** resident in Canada and was **not**

any of the following:

* a Canadian citizen, nor
* employed in Canada, nor
* carrying on business in Canada, nor
* a person having disposed of taxable Canadian property.

Enter the name of each donor and the value of the gift in the table below. Select whether the donor was an organization (for example a business, corporate entity, charity, non-profit organization), a government or an individual.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Type of donor (confidential)** | | |  |
| **Name (confidential)**  «schedule4\_donor\_name\_1» | **Organization** | **Government** | **Individual** | **Value (CAN $)** |
| «schedule4\_donor\_name\_2» |  |  | «schedule4\_donor\_value\_1» |  |
| «schedule4\_donor\_name\_3» |  |  | «schedule4\_donor\_value\_2» |  |
|  |  |  |  | «schedule4\_donor\_value\_3» |

**Non-cash gifts Schedule 5**

**Important:** If you complete this section, you **must** answer **yes** to question C11.

1 Select all types of non-cash gifts received for which a tax receipt was issued:

«col\_525»

«col\_500»

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 500 | Artwork/wine/jewellery | 525 | Ecological properties | 550  «col\_550» | Publicly traded securities/ |
| «col\_505» |  | «col\_530» |  |  | commodities/mutual funds |
| 505 | Building materials | 530 | Life insurance policies | 555  «col\_560»  «col\_555» | Books |
| 510  «col\_515»  «col\_510» | Clothing/furniture/food | 535  «col\_540»  «col\_535» | Medical equipment/supplies | 560 | Other |
| 515 | Vehicles | 540 | Privately-held securities | 565 | Specify:  «col\_565» |
| 520  «col\_520» | Cultural properties | 545  «col\_545» | Machinery/equipment/ computers/software |  | «col\_580» |

2 Enter the total amount of tax-receipted non-cash gifts ............................................................................

580 $

**Detailed financial information Schedule 6**

Fill out this schedule if any of the following applies to the charity:

1. The charity's revenue exceeded $100,000.
2. The amount of all property (for example, investments, rental properties) not used in charitable activities was more than $25,000.
3. The charity had permission to accumulate funds during this fiscal period.

«col\_4020»

Was the financial information reported below prepared on an accrual or cash basis?. . . ............................................

4020

# Statement of financial position

**Show all amounts to the nearest single Canadian dollar. Do not enter "see attached financial statements." All relevant fields must be filled out.**

«col\_4300»

«col\_4100»

«col\_4120»

«col\_4110»

## Assets:

|  |  |  |
| --- | --- | --- |
| 4100  4110  4120  4130 | $ Accounts payable and accrued liabilities ....  $ Deferred revenue ...............................  $ Amounts owing to non-arm's length persons  $ Other liabilities .................................. | |
| 4140 | $ | **Total liabilities (add lines 4300 to 4330)**... |
| 4150 | $ |  |
| 4155 | $ |  |
| 4160 | $ |  |
| 4165 | $ |  |
| 4166 | $ | **Amount included in lines 4150, 4155,** |
| 4170 | $ **4160, 4165 and 4170 not used in**  **charitable activities** ........................... | |

Cash, bank accounts, and short-term investments Amounts receivable from non-arm's length persons Amounts receivable from all others ..................

«col\_4130»

Investments in non-arm's length persons ...........

«col\_4140»

Long-term investments ................................

«col\_4150»

Inventories ..............................................

«col\_4155»

Land and buildings in Canada ........................

«col\_4160»

Other capital assets in Canada .......................

«col\_4165»

Capital assets outside Canada .......................

«col\_4166»

Accumulated amortization of capital assets .........

«col\_4170»

Other assets ............................................

«col\_4180»

$

## Liabilities:

|  |  |
| --- | --- |
| 4300 | $  «col\_4310» |
| 4310 | $ |
| 4320 | $  «col\_4330»  «col\_4320» |
| 4330 | $  «col\_4350» |
| 4350 | $ |

«col\_4250»

4250

$

10 year gifts .........

4180 $

«col\_4200»

**Total assets (add lines 4100 to 4170)** .............

4200

# Statement of operations

## Revenue:

Total eligible amount of all gifts for which the charity has issued or will issue tax receipts ...............................................

«col\_5610»

5610

4505

Total eligible amount of tax-receipted tuition fees ......................................................... $

«col\_4505»

Total amount of 10 year gifts received ..................................................................... $

Total amount received from other registered charities ........................................................................................

Total other gifts received for which a tax receipt was **not** issued by the charity (excluding amounts at lines 4575 and 4630).......

«col\_4540»

Total revenue received from federal government..............................................................................................

«col\_4550»

Total revenue received from provincial/territorial governments ..............................................................................

«col\_4560»

Total revenue received from municipal/regional governments ...............................................................................

4571

«col\_4571»

4500 $

«col\_4500»

«col\_4580»

«col\_4530»

«col\_4510»

Total tax-receipted revenue from all sources outside of Canada (government and

4571 $

non-government) .............................................................................................

«col\_4575»

|  |  |  |
| --- | --- | --- |
| 4510 | $ |  |
| 4530 | $ |  |
| 4540 | $ |  |
| 4550 | $ |  |
| 4560 | $ |  |
|  |  |  |
| 4575 | $ |  |
| 4580 | $ |  |
|  |  |  |
| 4600 | $ |  |
| 4610 | $ |  |
| 4620 | $ |  |
| 4630 | $ |  |
| 4640 | $ |  |
| 4650 | $ |  |

Total **non** tax-receipted revenue from all sources outside Canada (government and non-government) ...............................

Total interest and investment income received or earned ....................................................................................

«col\_4600»

«col\_4590»

**Gross proceeds** from disposition of assets ...............................................................

$

4590 $

**Net proceeds** from disposition of assets (show a negative amount with brackets) .......................................................

Gross income received from rental of land and/or buildings .................................................................................

Total **non** tax-receipted revenues received for memberships, dues and association fees ...............................................

Total **non** tax-receipted revenue from fundraising ............................................................................................

Total revenue from sale of goods and services (except to any level of government in Canada) ........................................

Other revenue not already included in the amounts above...................................................................................

«col\_4655»

Specify type(s) of revenue included in the amount reported at 4650 4655

**Total revenue (add lines 4500, 4510 to 4560, 4575, 4580, and 4600 to 4650)** .........................................................

«col\_4610»

«col\_4620»

«col\_4630»

«col\_4640»

«col\_4650»

4700

«col\_4700»

## Expenditures:

«col\_4800»

|  |  |
| --- | --- |
| 4800 | $ |
| 4810 | $ |
| 4820 | $ |
| 4830 | $ |
| 4840 | $ |
| 4850 | $ |
| 4860 | $ |
| 4870 | $ |
| 4880 | $ |
| 4890 | $ |
| 4891 | $ |
| 4900 | $ |
| 4910 | $ |
| 4920 | $ |
|  |  |
| 4950 | $ |

Advertising and promotion .......................................................................................................................

«col\_4810»

Travel and vehicle expenses.....................................................................................................................

«col\_4820»

Interest and bank charges........................................................................................................................

«col\_4830»

Licences, memberships, and dues ..............................................................................................................

Office supplies and expenses....................................................................................................................

«col\_4840»

Occupancy costs ..................................................................................................................................

«col\_4860»

«col\_4900»

«col\_4920»

«col\_4850»

Professional and consulting fees ................................................................................................................

«col\_4870»

Education and training for staff and volunteers ................................................................................................

«col\_4880»

Total expenditure on all compensation (enter the amount reported at line 390 in Schedule 3, if applicable) ..........................

«col\_4890»

Fair market value of all donated goods used in charitable activities ........................................................................

Purchased supplies and assets .................................................................................................................

«col\_4891»

Amortization of capitalized assets ...............................................................................................................

Research grants and scholarships as part of charitable activities ...........................................................................

«col\_4910»

All other expenditures not included in the amounts above (excluding gifts to qualified donees).........................................

«col\_4930»

Specify type(s) of expenditures included in the amount

reported at 4920 ...........................................................

4930

«col\_4950»

Total expenditures before gifts to qualified donees **(add lines 4800 to 4920)** .............................................................

Of the amounts at lines 4950:

«col\_5000»

|  |  |
| --- | --- |
| 5000 | $ |
| 5010 | $ |
| 5020 | $ |
| 5040 | $ |

(a) Total expenditures on charitable activities...........................................................

«col\_5010»

* 1. Total expenditures on management and administration ...........................................

«col\_5020»

(c) Total expenditures on fundraising ....................................................................

«col\_5040»

(d) Total other expenditures included in line 4950 ......................................................

«col\_5050»

$

$

5050

5100

Total amount of gifts made to all qualified donees ............................................................................................

«col\_5100»

**Total expenditures (add lines 4950 and 5050)** ..............................................................................................

# Other financial information

## Permission to accumulate property:

Only registered charities that have written permission to accumulate should complete this section.

«col\_5500»

5500

5510

* Enter the amount accumulated for the fiscal period, including income earned on accumulated funds ............................... $

«col\_5510»

* Enter the amount disbursed for the fiscal period for the specified purpose.............................................................. $

«col\_5750»

## Permission to reduce disbursement quota:

If the charity has received approval to make a reduction to its disbursement quota, enter the amount for the fiscal period .........

5750 $

## Property not used in charitable activities:

Enter the average value of property not used for charitable activities or administration during:

«col\_5900»

5900

5910

* The 24 months before the **beginning** of the fiscal period ................................................................................. $

«col\_5910»

* The 24 months before the **end** of the fiscal period ......................................................................................... $