

Tx1022



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21 2009-07-31 845528827 RR 0001 3039386

REGISTERED CHARITY INFORMATION RETURN

Section A: Identification

- Guide T4033B, Completing the Registered Charity Information Return is available at www.cra.gc.ca/E/pub/tg/t4033b/README.html
The Privacy Act protects all personal information given on this form...

Remember: Even if the charity goes through an inactive period, you must continue to file information returns to maintain your registered status.

If you did not receive a barcode label to affix to the return, please provide the following:

1. Charity's name:

CHIMP FOUNDATION

2. Return for fiscal period ending:

2009/07/31

3. BN/registration number:

84552 8827 RR 0001

4. Web address (if applicable)

A1 Was the charity in a subordinate position to a parent organization? 1510 Yes No

If yes, please provide the name and BN/registration number of the organization.

Table with 2 columns: Name, BN (if applicable) RR

A2 Has the charity wound-up, dissolved, or terminated operations? 1570 Yes No

A3 All charities are designated as one of the following: a charitable organization, a public foundation, or a private foundation. Is your organization designated as a public foundation or private foundation? 1600 Yes No

(Refer to the Form TF725 Registered Charity Basic Information sheet (BIS) to confirm. This form is included in the return package.)

If yes, you must complete and attach Schedule 1, Foundations, to your return.

Section B: Directors/trustees and like officials

B1 The charity is required to provide certain information for all members of its board of directors/trustees for the complete fiscal period. Only the public information section on the worksheet is available to the public.

Section C: Programs and general information

C1 Was the charity active during the fiscal period? If "No" explain why in the "Ongoing programs" space provided at C2 1800 Yes No

C2 In the space provided, describe all ongoing and new charitable programs the charity carried on to further its charitable purpose(s) (as defined in its governing documents) this fiscal period.

Ongoing programs: It did not receive any funds to enable it to make gifts to Qualified Donees
New programs:

Received By / Reçu Par
Records Operations Section /
Opérations et Services à la gestion des dossiers / Unité des organismes de bienfaisances

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*.

C3 Did the charity make gifts or transfer funds to qualified donees or other organizations? **2000** Yes No

If **yes**, you must complete and attach Form T1236(09), *Qualified Donees Worksheet/Amounts Provided to Other Organizations*, to your return.

C4 Did the charity carry on, fund, or provide any resources through employees, volunteers, agents, joint ventures, contractors, or any other individuals, intermediaries, entities, or means (other than qualified donees) for any activity/program/project outside Canada? **2100** Yes No

If **yes**, you must complete and attach Schedule 2, *Activities Outside Canada*, to your return.

A registered charity may pursue political activities to retain, oppose, or change the law, policy, or decision of any level of government inside or outside Canada provided the activities are non-partisan, related to its charitable purposes, and limited in extent.

C5 (a) Did the charity carry on any political activities during the fiscal period? **2400** Yes No

(b) Enter the total amount spent by the charity on these activities **5030**\$

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

2500 <input type="checkbox"/>	Advertisements/print/radio/TV commercials	2570 <input type="checkbox"/>	Fundraising sales (e.g., cookies)	2620 <input type="checkbox"/>	Telephone/TV solicitations
2510 <input type="checkbox"/>	Auctions	2575 <input type="checkbox"/>	Internet	2630 <input type="checkbox"/>	Tournament/sporting events
2530 <input type="checkbox"/>	Collection plate/boxes	2580 <input type="checkbox"/>	Mail campaigns	2640 <input type="checkbox"/>	Cause-related marketing
2540 <input type="checkbox"/>	Door-to-door solicitation	2590 <input type="checkbox"/>	Planned-giving programs	2650 <input type="checkbox"/>	Other
2550 <input type="checkbox"/>	Draws/lotteries	2600 <input type="checkbox"/>	Targeted corporate donations/sponsorships	2660 <input type="checkbox"/>	Specify: _____
2560 <input type="checkbox"/>	Fundraising dinners/galas/concerts	2610 <input type="checkbox"/>	Targeted contacts		

C7 Did the charity pay external fundraisers? **2700** Yes No

If **yes**, you must answer the following questions and complete Question 1 – Information about Fundraisers on Schedule 4 – *Confidential Data*.

(a) Enter the gross revenue collected by the fundraisers on behalf of the charity. **5450**\$

(b) Enter the amounts paid to and/or retained by the fundraisers. **5460**\$

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

2730 <input type="checkbox"/>	Commissions	2750 <input type="checkbox"/>	Finder's fees	2770 <input type="checkbox"/>	Honoraria
2740 <input type="checkbox"/>	Bonuses	2760 <input type="checkbox"/>	Set fee for services	2780 <input type="checkbox"/>	Other
				2790 <input type="checkbox"/>	Specify: _____

(d) Did the fundraiser issue tax receipts on behalf of the charity? **2800** Yes No

C8 Did the charity compensate any of its directors/trustees or like officials or persons not at arm's length from the charity for services provided during the fiscal period (Other than reimbursement for out-of-pocket expenses)? **3200** Yes No

C9 Did the charity incur any expenses for compensation of employees during the fiscal period? **3400** Yes No

If **yes**, you must complete and attach Schedule 3, *Compensation* to your return.

C10 Did the charity receive any donations or gifts of any kind valued at \$10,000 or more from any donor that was **not** resident in Canada and was **not** any of the following: **3900** Yes No

- A Canadian citizen, nor
- Employed in Canada, nor
- Carrying on a business in Canada, nor
- A person having disposed of taxable Canadian property?

If **yes**, you must complete Question 2 – Information about Donors Not Resident in Canada on Schedule 4 – *Confidential Data* for each donation of \$10,000 or more. See *Key Terms and Definitions* for more information.

C11 Did the charity receive any non-cash gifts (gifts-in-kind) for which it issued tax receipts? **4000** Yes No

If **yes**, you must complete and attach Schedule 5, *Non-Cash Gifts* to your return.

C12 Did the charity acquire a non-qualifying security? **5800** Yes No

C13 Did the charity allow a donor to use any of the charity's property during the fiscal period? (except for permissible uses) **5810** Yes No

C14 Did the charity issue any of its tax receipts for donations on behalf of another organization? **5820** Yes No

Section D: Financial information

If **any** of the following applies to your charity, proceed to Schedule 6, *Detailed Financial Information*, and **do not** complete Section D below. If **none** of the following applies, complete Section D.

- a) The charity's revenue exceeds \$100,000.
- b) The amount of all assets (e.g., investments, rental properties) not used in charitable programs exceeds \$25,000.
- c) The charity currently has permission to accumulate funds during this fiscal period.
- d) The charity has spent or transferred enduring property during this fiscal period.

See Key Terms and Definitions for a definition of terms used.

Please show all figures to the nearest single dollar.

D1 Was the financial information reported below prepared on an accrual or cash basis? **4020** Accrual Cash

D2 Summary of financial position:

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

Does the charity own land and/or buildings? **4050** Yes No

Total assets (including land and buildings) **4200** \$

Total liabilities **4350** \$

Did the charity borrow from, loan to, or invest assets with any non-arm's length parties? **4400** Yes No

D3 Revenue:

Did the charity issue tax receipts for donations? **4490** Yes No

If **yes**, what is the total eligible amount of all donations for which the charity issued tax receipts (except enduring property) **4500** \$ 0

Total amount received from other charities (excluding specified gifts and enduring property) **4510** \$ 0

What is the total amount for all other donations received for which a tax receipt was **not** issued by the charity? (excluding amounts at lines 4575 and 4630) **4530** \$

Did the charity receive any revenue from any level of Canadian government? **4565** Yes No

If **yes**, total amount received **4570** \$

Total non tax-receipted amounts from all sources outside Canada (government and non-government) **4575** \$

Total non tax-receipted amounts from fundraising **4630** \$ 0

Total revenue from sale of goods and services (except to any level of Canadian government) **4640** \$

Other amounts not already included in the amounts above **4650** \$

Total revenue (Add lines 4500 through 4650) **4700** \$ 0

D4 Expenditures:

What was the charity's total expenditure on professional and consulting fees? **4860** \$

What was the charity's total expenditure on travel and vehicles? **4810** \$

All other expenditures not already included in the amounts above **4920** \$

Total expenditures (excluding gifts to qualified donees) (Add lines 4860+4810+4920) **4950** \$

Of the total amount at line 4950:

a) How much did the charity spend on charitable programs? **5000** \$ 0

b) How much did the charity spend on management and administration? **5010** \$

Total amount of gifts (excluding specified gifts) made to all qualified donees **5050** \$ 0

Total amount of specified gifts made to qualified donees **5070** \$

Total expenditures (Add lines 4950 and 5050 + 5070) **5100** \$ 0

Section E: Certification

This return **must** be signed by a director/trustee or like official of the registered charity 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 form, the basic information sheet, and any attachment is, to the best of my knowledge, correct, complete, and current.

Name (please print): Blake Bromley	Signature	[Redacted]
Position in charity: Director	Date:	Telephone No.:

Section F: Confidential data

F1 Provide 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
Number, street, apt. no., or lot and concession no.	[Redacted]	[Redacted]
City	[Redacted]	[Redacted]
Province or territory and postal code	[Redacted]	[Redacted]

F2 Name and address of individual who completed this return.

[Redacted]

T3010B Registered Charity Information Return checklist

- Have you confirmed that all charity information included in the Form TF725, *Registered Charity Basic Information* sheet (BIS) is correct?
 - If any changes are required to any of the information displayed on the BIS, make the changes **directly** on the BIS.
- Have you attached Form TF725, *Registered Charity Basic Information* sheet (BIS)?
- Has the charity made any amendments to its governing documents during the fiscal period?
 - **If yes**, have you sent us an official copy of the amended governing documents in a separate envelope?
- Have you completed Schedule 1, *Foundations*, if required?
- Have you attached Form T1235(09), *Directors/Trustees and Like Officials Worksheet*?
- Have you attached Form T1236(09), *Qualified Donees Worksheet/Amounts Provided to Other Organizations*, if required?
- Have you completed Schedule 2, *Activities Outside Canada*, if required?
- Have you completed Schedule 3, *Compensation*, if required?
- Have you completed Schedule 4, *Confidential Data*, if required?
- Have you completed Schedule 5, *Non-Cash Gifts*, if required?
- Have you completed Schedule 6, *Detailed Financial Information*, if required?
- Have you attached a copy of the charity's financial statements?

Foundations

Schedule 1

- 1** Did the foundation acquire control of a corporation in the fiscal period? **100** Yes No
- 2** Did the foundation incur any debts at any time during the fiscal period other than for current operating expenses, purchasing or selling investments, or in administering charitable programs? **110** Yes No

For private foundations only:

- 3** At any time during the fiscal period, did the foundation hold any shares, rights to acquire shares, or debts owing to it that meet the definition of a non-qualified investment? **120** Yes No
- 4** Did the foundation own more than 2% of any class of shares of a corporation at any time during this fiscal period? **130** Yes No

If yes, you must complete and attach *Form T2081, Excess Corporate Holdings Worksheet*, to your return. (Note: Only private foundations will have this worksheet included in their return package.)

Activities Outside Canada

Schedule 2

For more information about carrying on programs outside Canada see the Charities Directorate website at www.cra.gc.ca/charities

- 1** What were total expenditures on activities/programs/projects carried on outside Canada during the fiscal period, excluding gifts to qualified donees? **200** \$
- 2** Were any of the charity's resources provided for programs outside Canada under any kind of an arrangement including a contract, agency agreement, or joint venture to any other individual or entity (excluding gifts to qualified donees)? **210** Yes No

If yes, enter the amounts of the total reported on line 200 transferred to these individuals/organizations as required in the following table.

Name of individual/organization	Using the list on the reverse, identify country code where activities were carried on.	Amount (\$) Please show amounts to the nearest single dollar.

- 3** Using the list on the reverse, identify the countries where the charity itself carried on programs or provided any of its resources. Enter the appropriate country codes in the following spaces.

--	--	--	--

- 4** Are any projects undertaken outside Canada funded by the Canadian International Development Agency (CIDA)? **220** Yes No
- If yes, what was the total amount of funds expended under this arrangement? **230** \$

- 5** Were any programs carried on outside Canada carried out by employees? **240** Yes No
- 6** Were any programs carried on outside Canada carried out by volunteers of the charity? **250** Yes No
- 7** Is the charity exporting goods as part of its charitable programs? **260** Yes No

If yes, list the items being exported, their value, their destination (city/region) and country code.

Item	Value	Destination (city/region)	Country code

COUNTRY CODES

Americas-Central and South

AR-Argentina
 BO-Bolivia
 BR-Brazil
 CL-Chile
 CO-Columbia
 CR-Costa Rica
 CU-Cuba
 DO-Dominican Republic
 EC-Ecuador
 SV-El Salvador
 GT-Guatemala
 GY-Guyana
 HT-Haiti
 HN-Honduras
 JM-Jamaica
 MX-Mexico
 NI-Nicaragua
 PA-Panama
 PE-Peru
 UY-Uruguay
 VE-Venezuela
 QM-Other

Americas-North

US-United States of America
 QN-Other

Middle East

IR-Iran
 IQ-Iraq

IL-Israel
 PS-Israeli Occupied Territories
 JO-Jordan
 KW-Kuwait
 LB-Lebanon
 OM-Oman
 QA-Qatar
 SA-Saudi Arabia
 SY-Syrian Arab Republic
 YE-Yemen
 QO-Other

Europe

AL- Albania
 AM-Armenia
 BA-Bosnia and Herzegovina
 BY-Belarus
 BG-Bulgaria
 DK-Denmark
 ES-Spain
 FR-France
 GE-Georgia
 DE-Germany
 GB-United Kingdom
 HR-Croatia
 IT-Italy
 CY-Cyprus
 MK-Macedonia
 ME-Montenegro
 NL-Netherlands
 PL-Poland
 RO-Romania

RU-Russia
 RS-Serbia
 TR-Turkey
 UA-Ukraine
 QP-Other

Asia and Oceania

AF- Afghanistan
 AZ-Azerbaijan
 BD-Bangladesh
 BT-Bhutan
 KH-Cambodia
 CN-China
 IN-India
 ID-Indonesia
 KZ-Kazakhstan
 KG-Kyrgyzstan
 LA-Laos
 LK-Sri Lanka
 MY-Malaysia
 MN-Mongolia
 MM-Myanmar (Burma)
 KP-North Korea
 KR-South Korea
 PK-Pakistan
 PH-Philippines
 SG-Singapore
 TH-Thailand
 TJ-Tajikistan
 TL-Timor-Leste
 UZ-Uzbekistan
 VN-Vietnam
 QR-Other

Africa

DZ-Algeria
 AO-Angola
 BW-Botswana
 CM-Cameroon
 CF-Central African Republic
 TD-Chad
 CG-Republic of Congo
 CD- Democratic Republic of Congo
 EG-Egypt
 ET-Ethiopia
 GA-Gabon
 GM-Gambia
 GH-Ghana
 NA-Namibia
 KE-Kenya
 LR-Liberia
 MG-Madagascar
 NE-Niger
 NG-Nigeria
 RW-Rwanda
 SL-Sierra Leone
 SO-Somalia
 SD-Sudan
 UG-Uganda
 ZM-Zambia
 ZW-Zimbabwe
 QS-Other

Compensation

Schedule 3

- 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.) **300**
- (b) For the **ten (10)** highest compensated, permanent, full-time positions enter the **number** falling within each of the following annual compensation categories.
- | | | | | | |
|------------|-----------------------|------------|-----------------------|------------|-----------------------|
| 305 | \$1 – \$39, 999 | 310 | \$40,000 – \$79,999 | 315 | \$80,000 – \$119,999 |
| 320 | \$120,000 – \$159,999 | 325 | \$160,000 – \$199,999 | 330 | \$200,000 – \$249,999 |
| 335 | \$250,000 – \$299,999 | 340 | \$300,000 – \$349,999 | 345 | \$350,000 and over |
- 2** (a) Enter the **number** of part-time or part-year (for example, seasonal) employees the charity employed during the fiscal period **370**
- (b) What was the total expenditure on compensation for part-time or part-year employees in the fiscal period? **380\$**
- 3** What was the charity's total expenditure on all compensation in the fiscal period? **390\$**

The information in this confidential data schedule is for the CRA's use but may be shared as permitted by law (e.g. with certain other government departments and agencies).

1. Information about Fundraisers

Please provide the name(s) and arm's length status of external fundraiser(s).

Name	At arm's length? Yes/No

2. Information about Donors Not Resident in Canada

This schedule must be completed to report any donation of \$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

Provide the name of the donor and the value of the donation in the chart below. You must also indicate whether the donor was an organization (for example a business, corporate entity, charity, non-profit organization), a government or an individual by placing a check mark in the appropriate box.

Name	Amount	Organization	Government	Individual

Non-Cash Gifts

Schedule 5

1 Identify all types of non-cash gifts (gifts-in-kind) received for which a tax-receipt was issued:

- | | | |
|---|--|---|
| <input type="checkbox"/> 500 Artwork/wine/jewellery | <input type="checkbox"/> 525 Ecological properties | <input type="checkbox"/> 550 Publicly traded securities/mutual funds |
| <input type="checkbox"/> 505 Building materials | <input type="checkbox"/> 530 Life insurance policies | <input type="checkbox"/> 555 Books (literature, comics) |
| <input type="checkbox"/> 510 Clothing/furniture/food | <input type="checkbox"/> 535 Medical equipment/supplies | <input type="checkbox"/> 560 Other |
| <input type="checkbox"/> 515 Vehicles | <input type="checkbox"/> 540 Privately-held securities | <input type="checkbox"/> 565 Specify: _____ |
| <input type="checkbox"/> 520 Cultural properties | <input type="checkbox"/> 545 Machinery/equipment (including computers and software) | |

2 Indicate the total eligible amount of tax receipted non-cash gifts **580**\$

Detailed Financial Information

Schedule 6

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

4020 Accrual Cash

Statement of financial position

Please show figures to the nearest single dollar. See the Key Terms and Definitions for a definition of the terms used.

Assets:

Cash, bank accounts, and short-term investments	4100\$
Amounts receivable from non-arm's length parties	4110\$
Amounts receivable from all others	4120\$
Investments in non-arm's length parties	4130\$
Long-term investments	4140\$
Inventories	4150\$
Land and buildings in Canada	4155\$
Other capital assets in Canada	4160\$
Capital assets outside Canada	4165\$
Accumulated amortization of capital assets	4166\$
Other assets	4170\$
Total assets (add lines 4100 to 4170)	4200\$

Liabilities:

Accounts payable and accrued liabilities	4300\$
Deferred revenue	4310\$
Amounts owing to non-arm's length parties	4320\$
Other liabilities	4330\$
Total liabilities (add lines 4300 to 4330)	4350\$

Amount included in lines 4150, 4155, 4160,
4165 and 4170 not used in charitable
programs **4250\$**

Statement of operations

Revenue:

Total eligible amount of all gifts for which the charity issued tax receipts	4500\$
For all tax-receipted gifts received during the fiscal period please provide:	
Total eligible amount of tax-receipted tuition fees	5610\$
Total eligible amount of tax-receipted enduring property	5640\$
Total amount received from other registered charities (excluding specified gifts and enduring property)	4510\$
Total specified gifts from other registered charities	4520\$
Total enduring property from other registered charities	4525\$
Total other gifts received for which a tax receipt was not issued by the charity	4530\$
Total revenue received from federal government	4540\$
Total revenue received from provincial/territorial governments	4550\$
Total revenue received from municipal/regional governments	4560\$
Total revenue received from all sources outside Canada	4575\$
Total interest and investment income received or earned	4580\$
Gross proceeds from disposition of assets	4590\$
Net proceeds from disposition of assets (show a negative amount with brackets)	4600\$
Gross income received from rental of land and/or buildings	4610\$
Non tax-receipted revenues received for memberships, dues, and association fees	4620\$
Total non tax-receipted revenue from fundraising	4630\$
Total revenue from sale of goods and services (except to government)	4640\$
Other revenue not already included in the amounts above	4650\$
Specify type(s) of revenue included in the amount reported at 4650 (e.g., dividends)	4655
Total revenue (add line 4500, 4510 to 4580, and 4600 to 4650)	4700\$

Expenditures:

Advertising and promotion	4800\$
Travel and vehicle expenses	4810\$
Interest and bank charges	4820\$
Licences, memberships, and dues	4830\$
Office supplies and expenses	4840\$
Occupancy costs	4850\$
Professional and consulting fees	4860\$
Education and training for staff and volunteers	4870\$
Total expenditure on all compensation (enter the amount reported at line 390 in Schedule 3 if applicable)	4880\$
Fair market value of all donated good used in charitable programs	4890\$
Total cost of all purchased supplies and assets	4891\$

Amortization of capitalized assets	4900	\$
Total expenditure for research grants and scholarships as part of charitable programs	4910	\$
Other expenditures not included in the amounts above	4920	\$
Specify type(s) of expenditures included in the amount reported at 4920	4930	
Total expenditures before gifts to qualified donees (add lines 4800 to 4920)	4950	\$

Lines 5000 to 5030 represent a breakdown of the expenditures on lines 4800 to 4920. The total of lines 5000 to 5030 should equal line 4950.

Total expenditures on charitable programs	5000	\$
Total expenditures on management and administration	5010	\$
Total expenditures on fundraising	5020	\$
Total expenditures on political activities, inside or outside Canada	5030	\$
Total other expenditures included in line 4950	5040	\$
Total amount of gifts (excluding enduring property and specified gifts) made to all qualified donees	5050	\$
Total amount of enduring property transferred to qualified donees (excluding specified gifts of enduring property)	5060	\$
Total amount of specified gifts made to qualified donees (including specified gifts of enduring property)	5070	\$
Total expenditures (add amount from line 4950 and the amounts from lines 5050, 5060, and 5070)	5100	\$

Other financial information

Permission to accumulate property: Only registered charities that have written permission to accumulate should complete this question.

• Enter the amount accumulated for the fiscal period, including income earned on accumulated funds	5500	\$	0
• Enter the amount disbursed for the fiscal period for the specified purpose we have permitted	5510	\$	0
• Enter the amount deemed to be a tax-receipted gift for the fiscal period	5520	\$	0

Enduring property and the capital gains pool

From the amount reported at line 4950, what is the fair market value of all enduring property spent during the fiscal period? 5710 \$

Enter the capital gains from the disposition of enduring property in the fiscal period. Do not enter an amount reflecting a capital loss or a negative amount in this field. 5720 \$

Is the charity claiming an amount that is less than the maximum capital gains reduction? 5730 Yes No

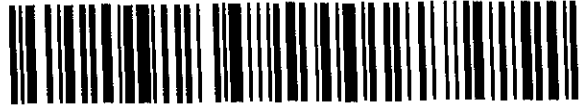
If yes, enter the amount from line 11 of Form T1259, *Capital Gains and Disbursement Quota Worksheet* 5740 \$

If the charity has received approval from the Charities Directorate to make a special reduction to its disbursement quota, enter the amount for the fiscal period 5750 \$ 0

Property not used in charitable activities

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

• The 24 months before the beginning of the fiscal period	5900	\$
• The 24 months before the end of the fiscal period	5910	\$



Directors/Trustees and Like Officials Worksheet

Enter the prescribed information for each director/trustee and like official of the Agency makes the public information section on this worksheet available to the confidential data, may be shared as permitted by law (e.g. with certain other government departments and agencies). See the reverse of this form for an explanation of terms used.

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Total Number of Directors/Trustees and Like Officials:

Public information			Confidential Data		
Last name:	First name:	Initial:			
Salas-Sanchez	Alexander				
Director/Trustee/Like Officials Term ▶					
Start Date:	End Date:				
2008/08/06					
Position:					
Director	At arm's length with other Directors, etc.?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Last name:	First name:	Initial:			
Bromley	Blake				
Director/Trustee/Like Officials Term ▶					
Start Date:	End Date:				
2008/11/06					
Position:					
Director	At arm's length with other Directors, etc.?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Last name:	First name:	Initial:			
Glazerna	John				
Director/Trustee/Like Officials Term ▶					
Start Date:	End Date:				
2008/11/06					
Position:					
Director	At arm's length with other Directors, etc.?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Last name:	First name:	Initial:	Home address – Street number and name:		
Director/Trustee/Like Officials Term ▶			City: Prov/Terr: Postal code:		
Start Date:	End Date:		Telephone number: Date of Birth		
			() - (mandatory for identification):		
Position:					
At arm's length with other Directors, etc.?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Last name:	First name:	Initial:	Home address – Street number and name:		
Director/Trustee/Like Officials Term ▶			City: Prov/Terr: Postal code:		
Start Date:	End Date:		Telephone number: Date of Birth		
			() - (mandatory for identification):		
Position:					
At arm's length with other Directors, etc.?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Last name:	First name:	Initial:	Home address – Street number and name:		
Director/Trustee/Like Officials Term ▶			City: Prov/Terr: Postal code:		
Start Date:	End Date:		Telephone number: Date of Birth		
			() - (mandatory for identification):		
Position:					
At arm's length with other Directors, etc.?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Last name:	First name:	Initial:	Home address – Street number and name:		
Director/Trustee/Like Officials Term ▶			City: Prov/Terr: Postal code:		
Start Date:	End Date:		Telephone number: Date of Birth		
			() - (mandatory for identification):		
Position:					
At arm's length with other Directors, etc.?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Last name:	First name:	Initial:	Home address – Street number and name:		
Director/Trustee/Like Officials Term ▶			City: Prov/Terr: Postal code:		
Start Date:	End Date:		Telephone number: Date of Birth		
			() - (mandatory for identification):		
Position:					
At arm's length with other Directors, etc.?	<input type="checkbox"/> Yes <input type="checkbox"/> No				

Chimp Foundation

BALANCE SHEET as at July 31, 2009 (Unaudited)

ASSETS

TOTAL ASSETS \$ 0.00

LIABILITIES

TOTAL LIABILITIES \$ 0.00

STATEMENT OF CHANGES IN SURPLUS

Balance at Beginning of Period	\$ 0.00	
Increase during period	<u>0.00</u>	
Surplus at End of Period		<u>0.00</u>

TOTAL LIABILITIES and SURPLUS \$ 0.00

Approved by:

 _____

Chimp Foundation

STATEMENT OF RECEIPTS AND DISBURSEMENTS

for the period ended July 31, 2009

(Unaudited)

Receipts

Total Receipts \$ 0.00

Disbursements

0.00

Total Disbursements

SURPLUS

Increase (Decrease) during Period

\$ 0.00