



You must give us complete information for each director/trustee and like official who, at any time during the fiscal period of this return, was a member of the charity's board of directors/trustees. Directors/trustees and like officials are persons who govern a registered charity. See the reverse for information on filling out this form.

Total number of directors/trustees and like officials:

Place bar code label here

Public information	Confidential data
Last name: Nalugwa First name: Victoria Initial:	
Term ▶ Start date (Y/M/D): 2 0 1 3 0 7 3 1 End date (Y/M/D):	
Position: Director At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Last name: Britton First name: Sheila Initial:	
Term ▶ Start date (Y/M/D): 2 0 2 0 0 9 2 2 End date (Y/M/D):	
Position: Director At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Last name: Hammond First name: Lois Initial:	
Term ▶ Start date (Y/M/D): 2 0 2 0 0 9 3 0 End date (Y/M/D):	
Position: Director At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Last name: Brandmayr First name: Leslie Initial:	
Term ▶ Start date (Y/M/D): 2 0 1 1 0 3 3 0 End date (Y/M/D): 2 0 2 0 0 9 2 2	
Position: Director At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Last name: Richardson First name: Christopher Initial:	
Term ▶ Start date (Y/M/D): 2 0 0 4 0 4 1 5 End date (Y/M/D): 2 0 2 0 0 9 2 2	
Position: Director At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Last name: First name: Initial:	Residential address - Street number and name:
Term ▶ Start date (Y/M/D): End date (Y/M/D):	City: Prov/Terr: Postal code:
Position: At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone number: Date of birth (Y/M/D):
Last name: First name: Initial:	Residential address - Street number and name:
Term ▶ Start date (Y/M/D): End date (Y/M/D):	City: Prov/Terr: Postal code:
Position: At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone number: Date of birth (Y/M/D):
Last name: First name: Initial:	Residential address - Street number and name:
Term ▶ Start date (Y/M/D): End date (Y/M/D):	City: Prov/Terr: Postal code:
Position: At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone number: Date of birth (Y/M/D):



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:

Association for the Advancement of Scholarship

2. Return for fiscal period ending:

Year	Month	Day
2020	04	30

3. BN/registration number:

88741 7806 RR 0001

4. Web address (if applicable):

A1 Was the charity in a subordinate position to a head body? Yes No
If yes, give the name and BN/registration number of the organization.

Name:	BN (9 digits, 2 letters, 4 digits. Example: 123456789RR0001)
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A2 Has the charity wound-up, dissolved, or terminated operations? Yes No

A3 Is the charity designated as a public foundation or private foundation? Yes No

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.

Section C: Programs and general information

C1 Was the charity active during the fiscal period? Yes No
If no, explain why in the "Ongoing programs" space below at C2.

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:
We provided services for post-secondary education administration and improving the delivery and capacity of post-secondary education and awarded scholarships to selected recipients

New programs:



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.

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Complete the following:

1. Charity name:

Association for the Advancement of Scholarship

2. Return for fiscal period ending:

Year	Month	Day
2020	04	30

3. BN/registration number:

88741 7806 RR 0001

4. Web address (if applicable):

A1 Was the charity in a subordinate position to a head body? 1510 Yes No
If yes, give the name and BN/registration number of the organization.

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

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

A3 Is the charity designated as a public foundation or private foundation? 1600 Yes No
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

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Do not attach additional sheets of paper or annual reports.

Ongoing programs:
We provided services for post-secondary education administration and improving the delivery and capacity of post-secondary education and awarded scholarships to selected recipients

New programs:

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 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, 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 Schedule 2, Activities outside Canada.

C5 Public policy dialogue and development activities

A registered charity may carry on public policy dialogue and development activities in furtherance of its stated charitable purposes but must never directly or indirectly support or oppose a political party or a candidate for public office. For more information, see Guidance CG-027, Public policy dialogue and development activities by charities.

(a) Did the charity carry on public policy dialogue and development activities during the fiscal period? **2400** Yes No
 If yes, you must complete Schedule 7, Public policy dialogue and development activities.

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:

- | | | |
|--|--|---|
| 2500 <input type="checkbox"/> Advertisements/print/radio/TV commercials | 2570 <input type="checkbox"/> Sales | 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 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 complete the following lines, and complete Schedule 4, Confidential data, Table 1.

(a) Enter the gross revenue collected by the fundraisers on behalf of the charity **5450** \$ _____ 0
 (b) Enter the amounts paid to and/or retained by the fundraisers **5460** \$ _____ 0

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

- | | | |
|--|---|--|
| 2730 <input type="checkbox"/> Commissions | 2750 <input type="checkbox"/> Finder's fee | 2770 <input type="checkbox"/> Honoraria |
| 2740 <input type="checkbox"/> Bonuses | 2760 <input type="checkbox"/> Set fee for services | 2780 <input type="checkbox"/> Other |
| 2790 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 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 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 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 Schedule 4, Confidential data, Table 2, for each donation of \$10,000 or more.

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- C11** Did the charity receive any non-cash gifts for which it issued tax receipts? **4000** Yes No
If yes, you must complete Schedule 5, Non-cash gifts.
- C12** Did the charity acquire a non-qualifying security? **5800** Yes No
- C13** Did the charity allow any of its donors to use any of its property? (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
- C15** Did the charity have direct partnership holdings at any time during the fiscal period? **5830** Yes No

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:
 (a) The charity's revenue exceeds \$100,000.
 (b) The amount of all property (for example, investments, rental properties) not used in charitable activities was more than \$25,000.
 (c) 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.

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, enter the following:

- Did the charity own land and/or buildings? **4050** Yes No
- Total assets (including land and buildings) **4200** \$ _____ 0
- Total liabilities **4350** \$ _____ 0
- Did the charity borrow from, loan to, or invest assets with any non-arm's length persons? **4400** Yes No

D3 Revenue:

- Did the charity issue tax receipts for gifts? **4490** Yes No
- If yes, enter the total eligible amount of all gifts for which the charity has issued or will issue tax receipts **4500** \$ _____ 0
- Total amount of 10 year gifts received **4505** \$ _____ 0
- Total amount received from other registered charities **4510** \$ _____ 0
- Total other gifts received for which a tax receipt was not issued by the charity (excluding amounts at lines 4575 and 4630) **4530** \$ _____ 0
- Did the charity receive any revenue from any level of government in Canada? **4565** Yes No
- If yes, total amount received **4570** \$ _____ 0
- Total tax-receipted revenue from all sources outside of Canada (government and non-government) **4571** \$ _____ 0
- Total non tax-receipted revenue from all sources outside of Canada (government and non-government) **4575** \$ _____ 0
- Total non tax-receipted revenue from fundraising **4630** \$ _____ 0
- Total revenue from sale of goods and services (except to any level of government in Canada) **4640** \$ _____ 0
- Other revenue not already included in the amounts above **4650** \$ _____ 0
- Total revenue (add lines 4500, 4510 to 4570, and 4575 to 4650) **4700** \$ _____ 0

D4 Expenditures:

- Professional and consulting fees **4860** \$ _____ 0
- Travel and vehicle expenses **4810** \$ _____ 0
- All other expenditures not already included in the amounts above (excluding gifts to qualified donees) **4920** \$ _____ 0
- Total expenditures (excluding gifts to qualified donees) (add lines 4860, 4810, and 4920) **4950** \$ _____ 0
- Of the amount at line 4950:
- (a) Total expenditures on charitable activities **5000** \$ _____ 0
- (b) Total expenditures on management and administration **5010** \$ _____ 0
- Total amount of gifts made to all qualified donees **5050** \$ _____ 0
- Total expenditures (add lines 4950 and 5050) **5100** \$ _____ 0

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): Victoria Nalugwa	[Redacted]
Position in charity: Director	[Redacted]

Section F: Confidential data

[Redacted]

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.

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.

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Foundations **Schedule 1**

- 1** Did the foundation acquire control of a corporation? **100** Yes No
- 2** Did the foundation incur any debts other than for current operating expenses, purchasing or selling investments, or in administering charitable activities? **110** Yes No
- 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 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 the fiscal period? **130** Yes No
 If yes, you must complete and attach Form T2081, Excess Corporate Holdings Worksheet for Private Foundations.

Activities outside Canada **Schedule 2**

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 **200** \$ _____ 0
- 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)? **210** Yes No
- 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

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

VN				

- 4** Were any projects undertaken outside Canada funded by Global Affairs Canada **220** Yes No
 If yes, what was the total amount the charity spent under this arrangement? **230** \$ _____ 0
- 5** Were any of the charity's activities outside of Canada carried out by employees of the charity? **240** Yes No
- 6** Were any of the charity's activities outside of Canada carried out by volunteers of the charity? **250** Yes No
- 7** Did the charity export goods as part of its charitable activities? **260** Yes No
 If yes, list the items exported, their destination, the country code, and their value.

Item exported	Destination (city/region)	Country code	Value (CAN \$)

Country codes

AF-Afghanistan	CU-Cuba	KP-North Korea	RO-Romania
AL-Albania	CY-Cyprus	KR-South Korea	RU-Russia
DZ-Algeria	DK-Denmark	KW-Kuwait	RW-Rwanda
AO-Angola	DO-Dominican Republic	KG-Kyrgyzstan	SA-Saudi Arabia
AR-Argentina	EC-Ecuador	LA-Laos	RS-Serbia
AM-Armenia	EG-Egypt	LB-Lebanon	SL-Sierra Leone
AZ-Azerbaijan	SV-El Salvador	LR-Liberia	SG-Singapore
BD-Bangladesh	ET-Ethiopia	MK-Macedonia	SO-Somalia
BY-Belarus	FR-France	MG-Madagascar	ES-Spain
BT-Bhutan	GA-Gabon	MY-Malaysia	LK-Sri Lanka
BO-Bolivia	GM-Gambia	ML-Mali	SD-Sudan
BA-Bosnia and Herzegovina	GE-Georgia	MU-Mauritius	SY-Syrian Arab Republic
BW-Botswana	DE-Germany	MX-Mexico	TJ-Tajikistan
BR-Brazil	GH-Ghana	MN-Mongolia	TZ-United Republic of Tanzania
BN-Brunei Darussalam	GT-Guatemala	ME-Montenegro	TH-Thailand
BG-Bulgaria	GY-Guyana	MZ-Mozambique	TL-Timor-Leste
BI-Burundi	HT-Haiti	MM-Myanmar (Burma)	TR-Turkey
KH-Cambodia	HN-Honduras	NA-Namibia	UG-Uganda
CM-Cameroon	IN-India	NL-Netherlands	UA-Ukraine
CF-Central African Republic	ID-Indonesia	NI-Nicaragua	GB-United Kingdom
TD-Chad	IR-Iran	NE-Niger	US-United States of America
CL-Chile	IQ-Iraq	NG-Nigeria	UY-Uruguay
CN-China	IL-Israel	OM-Oman	UZ-Uzbekistan
CO-Colombia	PS-Israeli Occupied Territories	PK-Pakistan	VE-Venezuela
KM-Comoros	IT-Italy	PA-Panama	VN-Vietnam
CD-Democratic Republic of Congo	JM-Jamaica	PE-Peru	YE-Yemen
CG-Republic of Congo	JP-Japan	PH-Philippines	ZM-Zambia
CR-Costa Rica	JO-Jordan	PL-Poland	ZW-Zimbabwe
CI-Côte d'Ivoire	KZ-Kazakhstan	QA-Qatar	
HR-Croatia	KE-Kenya	RE-Réunion	

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

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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. Do not enter a dollar amount. **300**

(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.

305 <input type="text" value="0"/> \$1 - \$39,999	310 <input type="text" value="0"/> \$40,000 - \$79,999	315 <input type="text" value="0"/> \$80,000 - \$119,999
320 <input type="text" value="0"/> \$120,000 - \$159,999	325 <input type="text" value="0"/> \$160,000 - \$199,999	330 <input type="text" value="0"/> \$200,000 - \$249,999
335 <input type="text" value="0"/> \$250,000 - \$299,999	340 <input type="text" value="0"/> \$300,000 - \$349,999	345 <input type="text" value="0"/> \$350,000 and over

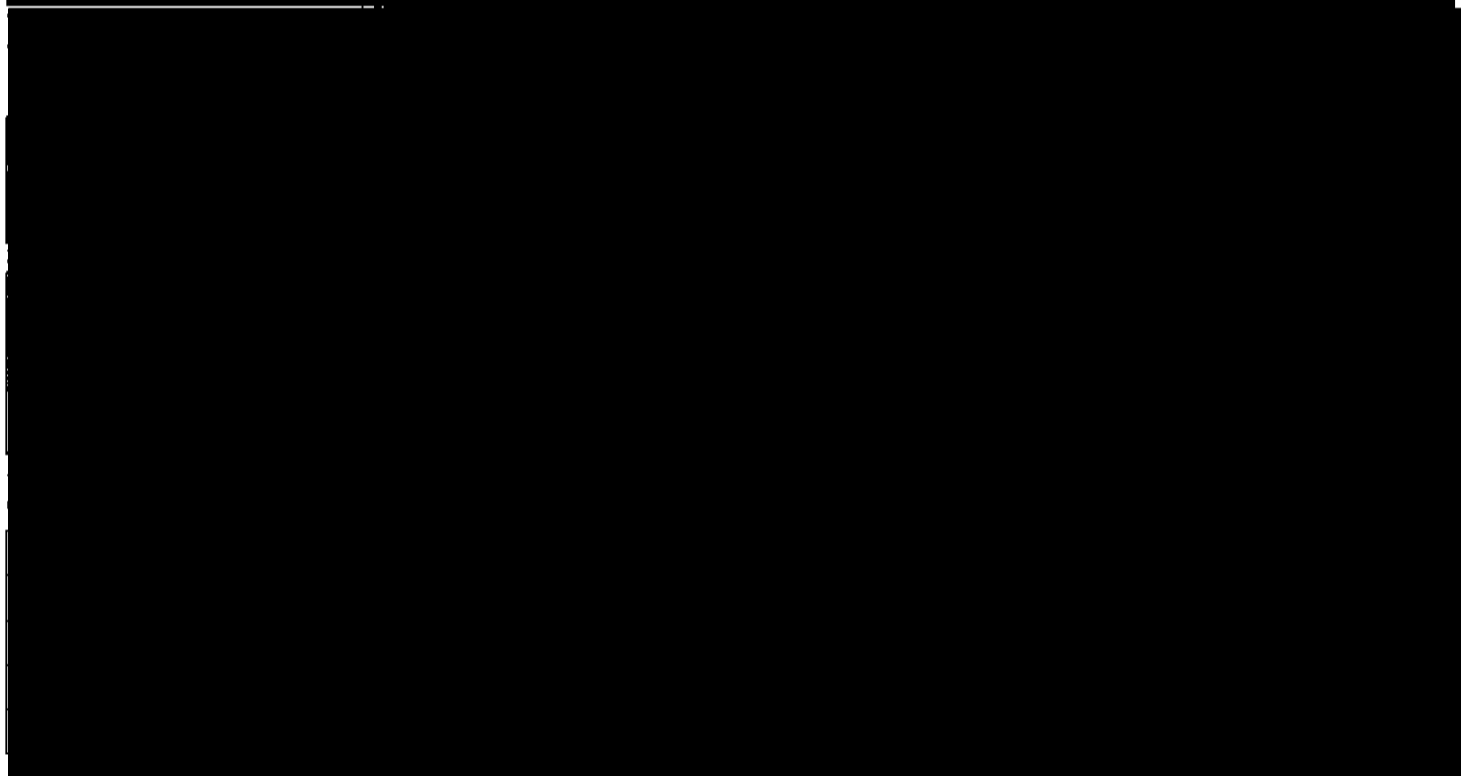
2 (a) Enter the number of part-time or part-year (for example, seasonal) employees the charity employed during the fiscal period. **370**

(b) Total expenditure on compensation for part-time or part-year employees in the fiscal period. **380** \$

3 Total expenditure on all compensation in the fiscal period. **390** \$

Confidential data

Schedule 4



Non-cash gifts

Schedule 5

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

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

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:

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

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

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.

Assets:

Cash, bank accounts, and short-term investments	4100	\$	15,239
Amounts receivable from non-arm's length persons	4110	\$	0
Amounts receivable from all others	4120	\$	9
Investments in non-arm's length persons	4130	\$	0
Long-term investments	4140	\$	0
Inventories	4150	\$	0
Land and buildings in Canada	4155	\$	930,000
Other capital assets in Canada	4160	\$	0
Capital assets outside Canada	4165	\$	0
Accumulated amortization of capital assets	4166	\$	0
Other assets	4170	\$	2,000,000
10 year gifts	4180	\$	0
Total assets (add lines 4100 to 4170)	4200	\$	2,945,248

Liabilities:

Accounts payable and accrued liabilities	4300	\$	235,939
Deferred revenue	4310	\$	0
Amounts owing to non-arm's length persons	4320	\$	0
Other liabilities	4330	\$	0
Total liabilities (add lines 4300 to 4330)	4350	\$	235,939
Amount included in lines 4150, 4155, 4160, 4165 and 4170 not used in charitable activities	4250	\$	0

Statement of operations

Revenue:

Total eligible amount of all gifts for which the charity has issued or will issue tax receipts	4500	\$	0
Total eligible amount of tax-receipted tuition fees	4510	\$	0
Total amount of 10 year gifts received	4505	\$	0
Total amount received from other registered charities	4510	\$	5,000
Total other gifts received for which a tax receipt was not issued by the charity (excluding amounts at lines 4575 and 4630)	4530	\$	0
Total revenue received from federal government	4540	\$	0
Total revenue received from provincial/territorial governments	4550	\$	0
Total revenue received from municipal/regional governments	4560	\$	0
Total tax-receipted revenue from all sources outside of Canada (government and non-government)	4571	\$	0
Total non tax-receipted revenue from all sources outside Canada (government and non-government)	4575	\$	0
Total interest and investment income received or earned	4580	\$	0
Gross proceeds from disposition of assets	4590	\$	0
Net proceeds from disposition of assets (show a negative amount with brackets)	4600	\$	0
Gross income received from rental of land and/or buildings	4610	\$	0
Total non tax-receipted revenues received for memberships, dues and association fees	4620	\$	0
Total non tax-receipted revenue from fundraising	4630	\$	0
Total revenue from sale of goods and services (except to any level of government in Canada)	4640	\$	0
Other revenue not already included in the amounts above	4650	\$	0
Specify type(s) of revenue included in the amount reported at 4650	4655		
Total revenue (add lines 4600, 4610 to 4660, 4575, 4580, and 4600 to 4650)	4700	\$	5,000

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Expenditures:

Advertising and promotion	4800	\$	0
Travel and vehicle expenses	4810	\$	0
Interest and bank charges	4820	\$	193
Licences, memberships, and dues	4830	\$	0
Office supplies and expenses	4840	\$	0
Occupancy costs	4850	\$	0
Professional and consulting fees	4860	\$	386
Education and training for staff and volunteers	4870	\$	0
Total expenditure on all compensation (enter the amount reported at line 390 in Schedule 3, if applicable)	4880	\$	0
Fair market value of all donated goods used in charitable activities	4890	\$	0
Purchased supplies and assets	4891	\$	0
Amortization of capitalized assets	4900	\$	0
Research grants and scholarships as part of charitable activities	4910	\$	125,640
All other expenditures not included in the amounts above (excluding gifts to qualified donees)	4920	\$	5,538
Specify type(s) of expenditures included in the amount reported at 4920	4930	Property tax and insurance	
Total expenditures before gifts to qualified donees (add lines 4800 to 4920)	4950	\$	131,757

Of the amounts at lines 4950:

(a) Total expenditures on charitable activities	5000	\$	125,640
(b) Total expenditures on management and administration	5010	\$	6,117
(c) Total expenditures on fundraising	5020	\$	0
(d) Total other expenditures included in line 4950	5040	\$	0
Total amount of gifts made to all qualified donees	5050	\$	5,000
Total expenditures (add lines 4950 and 5050)	5100	\$	136,757

Other financial information

Permission to accumulate property:

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

• 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	5510	\$	0

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	\$	0
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Property not used in charitable activities:

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

• The 24 months before the beginning of the fiscal period	5900	\$	3,017,282
• The 24 months before the end of the fiscal period	5910	\$	2,844,866

Public policy dialogue and development activities

Schedule 7

A registered charity may carry on public policy dialogue and development activities in furtherance of its stated charitable purposes but must never directly or indirectly support or oppose a political party or a candidate for public office. For more information, see Guidance CG-027, Public policy dialogue and development activities by charities.

1 Describe the charity's public policy dialogue and development activities, and explain how these relate to its charitable purposes.

[Empty response box]

Qualified donees worksheet / Amounts provided to other organizations

Registered charities can make gifts to qualified donees. Enter the required information for gifts made to each qualified donee or other organization. See the reverse for information on filling out this form.

Charity name: Association for the Advancement of Scholarship	BN: (9 digits, 2 letters, 4 digits. Example: 123456789RR0001) 88741 7806 RR 0001
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Total number of qualified donees/other organizations:

Name of organization: University of Lethbridge		Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
BN/Registration number: 11927 9248 RR 0001	City and Prov/Terr: Lethbridge	AB	Country: CAN
Amount of non-cash gifts	\$	Total amount of gifts	\$ 5,000
Name of organization:		Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
BN/Registration number:	City and Prov/Terr:	Country:	
Amount of non-cash gifts	\$	Total amount of gifts	\$
Name of organization:		Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number:	City and Prov/Terr:	Country:	
Amount of non-cash gifts	\$	Total amount of gifts	\$
Name of organization:		Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number:	City and Prov/Terr:	Country:	
Amount of non-cash gifts	\$	Total amount of gifts	\$
Name of organization:		Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number:	City and Prov/Terr:	Country:	
Amount of non-cash gifts	\$	Total amount of gifts	\$
Name of organization:		Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number:	City and Prov/Terr:	Country:	
Amount of non-cash gifts	\$	Total amount of gifts	\$



You must give us complete information for each director/trustee and like official who, at any time during the fiscal period of this return, was a member of the charity's board of directors/trustees. Directors/trustees and like officials are persons who govern a registered charity. See the reverse for information on filling out this form.

Total number of directors/trustees and like officials:

Place bar code label here

Public information	Confidential data
Last name: Nalugwa First name: Victoria Initial:	
Term ▶ Start date (Y/M/D): 2 0 1 3 0 7 3 1 End date (Y/M/D):	
Position: Director At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Last name: Britton First name: Sheila Initial:	
Term ▶ Start date (Y/M/D): 2 0 2 0 0 9 2 2 End date (Y/M/D):	
Position: Director At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Last name: Hammond First name: Lois Initial:	
Term ▶ Start date (Y/M/D): 2 0 2 0 0 9 3 0 End date (Y/M/D):	
Position: Director At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Last name: Brandmayr First name: Leslie Initial:	
Term ▶ Start date (Y/M/D): 2 0 1 1 0 3 3 0 End date (Y/M/D): 2 0 2 0 0 9 2 2	
Position: Director At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Last name: Richardson First name: Christopher Initial:	
Term ▶ Start date (Y/M/D): 2 0 0 4 0 4 1 5 End date (Y/M/D): 2 0 2 0 0 9 2 2	
Position: Director At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Last name: First name: Initial:	Residential address - Street number and name:
Term ▶ Start date (Y/M/D): End date (Y/M/D):	City: Prov/Terr: Postal code:
Position: At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone number: Date of birth (Y/M/D):
Last name: First name: Initial:	Residential address - Street number and name:
Term ▶ Start date (Y/M/D): End date (Y/M/D):	City: Prov/Terr: Postal code:
Position: At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone number: Date of birth (Y/M/D):
Last name: First name: Initial:	Residential address - Street number and name:
Term ▶ Start date (Y/M/D): End date (Y/M/D):	City: Prov/Terr: Postal code:
Position: At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone number: Date of birth (Y/M/D):