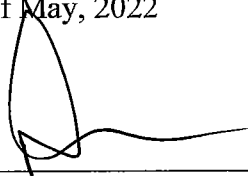


This is Exhibit "K" referred to in the affidavit of
Vivian Krause sworn before me at Vancouver, B.C.
this 20th day of May, 2022

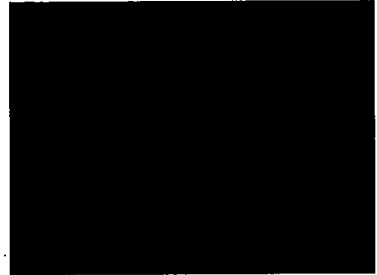


A Commissioner for taking Affidavits within British Columbia



Canada
Corporations Act

Loi sur les
corporations canadiennes



C A N A D A

SUPPLEMENTARY LETTERS PATENT

issued to

ELYSIUM FOUNDATION

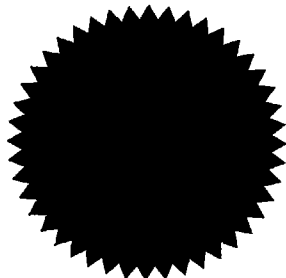
The Minister of Industry by virtue of the powers vested in him by the *Canada Corporations Act*, does hereby change the name of the Corporation from ELYSIUM FOUNDATION to IMLADRIS FOUNDATION as provided in the Special Resolution of the said Corporation, a copy of which is annexed hereto to form part of these presents.

Date of Supplementary Letters Patent - September 4, 2012

GIVEN under the seal of office of the Minister of Industry.

for the Minister of Industry

File Number: 442117-5



Canada



With the exception of the information to be provided in Part 6 of this application, the Canada Customs and Revenue Agency is permitted to make all of this form (including any attachments) available to the public if the application is approved and the organization becomes registered. The Canada Customs and Revenue Agency is also allowed to provide copies of the registration letter, including any conditions and warnings contained therein. If registration is denied, however, all of the information you provide remains confidential.

Please read the instructions in the companion publication *Registering a Charity for Income Tax Purposes*. You will need the information in the guide to complete this form properly. To help you, the numbers for the questions on the form correspond with the numbers in Section II of the guide. Terms printed in bold on the form are defined in the Glossary on page 4 of *Registering a Charity for Income Tax Purposes* or are explained in the information that is provided in the guide for each question.

It is important to complete this form carefully. The Charities Directorate needs accurate information to evaluate an application properly. When a question is not relevant to the organization's situation, check box N/A (not applicable), or indicate N/A in the space provided. If the required information and documents are not included, we may return the application without reviewing it.

It is a serious offence under the *Income Tax Act* to provide information which is known to be false or deceptive.

Part 1 – Identification of applicant

| | | | |
|--|---|---|---|
| Q1 Current legal name of the organization | | Received By / Reçu Par | |
| Elysium Foundation | | Records operations / Section / Charities unit | |
| Q2 Current operational or trade name | | <input checked="" type="checkbox"/> N/A | |
| Q3 Previous names – List any other names under which the organization has operated. | | <input checked="" type="checkbox"/> N/A | |
| Indicate the organization's business number (BN) accounts if any have been assigned. | | <input checked="" type="checkbox"/> N/A | |
| <input type="text" value="RC"/> | <input type="text" value="RM"/> | | |
| <input type="text" value="RP"/> | <input type="text" value="RT"/> | | |
| Q5 Mailing address | | | |
| 1500 West Georgia Street, Suite 1555 Box 62 <small>(number, street, room, floor or suite no., R.R.)</small> | | | |
| Vancouver <small>(city or town)</small> | | BC <small>(province)</small> | V6G 2Z6 <small>(postal code)</small> |
| (604) 683-7006 <small>(phone number)</small> | (604) 683-5676 <small>(fax number)</small> | | |
| Q6 Previous contact | | | |
| | | | |

Do not use this area

| | |
|--|--|
| Business Number (BN): 84790 06106-1000 | Reference number: 3030588 |
| Submission number: 3099361 | Effective date of registration: 15/68 <input type="checkbox"/> N/A |



Part 1 – Identification of applicant (cont'd)

Q7 Re-registration

i) Has this organization ever been registered before, under either its current name or a different name?
 Yes No (go to Q8)

ii) Under what name was the organization previously registered?

iii) BN or registration number of the organization at the time its charitable registration was revoked: _____

iv) Date of revocation: yyyy/mm/dd _____

v) Reasons for revocation: _____

Part 2 – List of applicant's directors or trustees

Q8 Name and position of directors, trustees or other similar officials on the applicant's governing body

| | Name | Position within the organization |
|-----|----------------------------|----------------------------------|
| i |) <u>Blake Bromley</u> | <u>Director</u> |
| ii |) <u>Leslie Brandlmayr</u> | <u>Director</u> |
| iii |) <u>Victoria Nalugwa</u> | <u>Director</u> |
| |) _____ | _____ |

Part 3 – Organizational structure of applicant

Q9 Internal divisions of Canadian registered charities

Is the organization a branch, section, parish, congregation, or other **internal division** of a Canadian registered charity (the parent organization)?
 Yes (complete i to iii below and then go to Q11) No (go to Q10)

i) Legal name of parent organization:

ii) Business Number of parent organization:

iii) Letter of Good Standing (see page 13 of the guide) Included

Q10 Governing document

Is the organization incorporated?

Yes (go to Q10A, Q10A.1 and Q10C) No (go to Q10B and Q10C)

A Incorporated (Attach a clear copy of the entire set of incorporating documents, as well as a copy of all amendments).

A.1 Certificate of good standing or its equivalent (see page 13 of the guide)

Included N/A

B Not incorporated

Indicate below the type of governing documents the organization has and attach a clear copy, along with a copy of all amendments.

The constitution or trust deed and amendments, should be signed and dated by three current directors or trustees.

constitution trust deed will other (specify) _____

C By-laws

In addition to its constituting documents, has the organization created by-laws to govern other internal matters?

Yes (Attach a clear copy of the document and all amendments. This document, as well as all amendments must bear an effective date and be signed and dated by two directors or trustees)

No (go to Q11)

Q11 Ownership

Does the organization currently own any real property (i.e., land or buildings) or does it have any future plans to own real property?

Yes No (go to Q12)

If yes, identify any current property and title-holding arrangements, as well as proposed title-holding arrangements for future property.

Q12 Designation

i) Has the organization been formed for the purpose of giving more than 50% of its income to **qualified donees** (e.g., other registered charities)?

Yes No (go to Q12ii)

ii) Are 50% or more of the **directors/trustees** names in Q.8 above not at **arm's length** with any of the other **directors/trustees**?

Yes No (go to Q12iii)

If yes, identify the relationships that exist among the directors/trustees.

iii) Has the organization received, or will it receive, more than 50% of its funds or assets from one source, or from a group of persons who are not at **arm's length** with each other?

Yes No (go to Q13)

If yes, identify the source of the funds or assets and any relationships among donors.

Q13A Activities

Describe below the organization's programs and activities in detail (i.e., the ones by which it claims to benefit the community-fundraising activities should be recorded in Q15 and Q16). In describing the activities, show how the organization intends to achieve each of the objectives listed in its governing document. Indicate as well where the organization will be carrying on each of its activities and who the intended beneficiaries are. If the organization maintains a web site, please provide the address.

The Foundation intends to operate as a private charitable foundation. It is not known how much funding it will receive; but it will distribute funds to registered charities and "qualified donees" in compliance with its disbursement quota. It has not determined which charities will benefit but they will be "qualified donees" under the Income Tax Act so that the Foundation can operate within the guidelines and disbursement requirements set out for private foundations. The Foundation does not intend to carry out charitable activities itself.

Q13A Activities (cont'd)



Q13B Please attach minutes of meetings, newspaper cuttings, videos, fund-raising materials, pamphlets, brochure, or other items which illustrate its work and purposes.
If you would like any of this information to be made available to the public, you should clearly label the materials accordingly.

Q14 Political activities

A Does the organization intend to undertake any **political activities** (e.g., letter-writing campaigns, public rallies, meetings with elected officials) to achieve its purposes?

Yes **No (go to Q15)**

B If yes, describe these activities in detail.

C How do these activities help to achieve the organization's purposes?



D Give the approximate percentage of the organization's total human, financial, and physical resources that it will devote to its political activities.

_____ 0 % Human resources
 _____ 0 % Financial resources
 _____ 0 % Physical resources

Q15 Occasional fund-raising

Does the organization intend to have occasional fund-raising events, such as auctions, concerts, or bingos?

Yes No (go to Q16)

If yes, briefly describe these events, indicate how many times a year the organization will hold each event, and estimate the percentage of the people involved who will be volunteers.

Q16 Regular fund-raising

Does the organization intend to develop a program for soliciting donations (e.g., through an ongoing mail campaign)? Or will it sell goods on a regular basis (e.g., videos or used clothing)? Or does the organization plan to raise funds through regular events such as weekly bingos, or charge fees on a regular basis for its services (e.g., tuition or counselling)?

Yes No (go to Q17)

If yes, provide details about any donor development program, describe the kinds of goods and services that the organization intends to sell or provide on a continuing basis, and estimate the percentage of the people involved in these regular fund-raising activities who will be volunteers.

Part 5 – Financial information

Q17

Next complete fiscal period: 2007/05/01 to 2008/04/30

In the following section, you have to develop a proposed budget or estimate of receipts and disbursements and a list of anticipated assets and liabilities for the organization's next complete fiscal period. **All applicants (both those already operating and those not yet open) must complete this section.** Organizations which have been in operation for over a year must also attach financial statements (see question 23).

Proposed Budget for the next complete fiscal period

Receipts and disbursements

A. Receipts

Indicate the total (gross) dollar amounts or N/A (Record amounts **once** only)

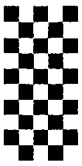
| | | | |
|---|-----|---------------|---|
| Gifts from individuals | 001 | <u>25,000</u> | <input type="checkbox"/> N/A |
| Gifts from corporations and businesses (provide name if known) | 002 | <u>0</u> | <input checked="" type="checkbox"/> N/A |
| Gifts from other registered charities (provide name if known) | 003 | <u>0</u> | <input checked="" type="checkbox"/> N/A |
| Fundraising activities carried on by the organization itself not already included above. | 004 | <u>0</u> | <input checked="" type="checkbox"/> N/A |
| Fundraising activities carried on through other organizations not already included above. Copies of any proposed or existing contracts should be attached. | 005 | <u>0</u> | <input checked="" type="checkbox"/> N/A |
| Government grants or contracts | 006 | <u>0</u> | <input checked="" type="checkbox"/> N/A |
| Describe receipts from any other sources of income not already included above. | 007 | <u>0</u> | <input checked="" type="checkbox"/> N/A |
| Total estimated receipts from all sources (Add lines 001-007) | 012 | <u>25,000</u> | <input type="checkbox"/> N/A |

Part 5 – Financial information (cont'd)

B. Disbursements

| | | | |
|---|-----|--------------|---|
| Charitable programs Please identify program and approximate amount) | 013 | <u>0</u> | <input checked="" type="checkbox"/> N/A |
| Gifts to qualified donees (identify recipient, and registration number where applicable) | 014 | <u>0</u> | <input checked="" type="checkbox"/> N/A |
| Fundraising activities carried on by the organization itself | 015 | <u>0</u> | <input checked="" type="checkbox"/> N/A |
| Fundraising activities carried on by other organizations on the charity's behalf (provide name of fundraising organization) | 016 | <u>0</u> | <input checked="" type="checkbox"/> N/A |
| Management and administration | | | |
| Remuneration and benefits not already included | 017 | <u>0</u> | <input checked="" type="checkbox"/> N/A |
| Accounting and legal services | 018 | <u>0</u> | <input checked="" type="checkbox"/> N/A |
| Occupancy costs not already included | 019 | <u>0</u> | <input checked="" type="checkbox"/> N/A |
| Supplies and equipment not already included | 020 | <u>0</u> | <input checked="" type="checkbox"/> N/A |
| Printing, publications not already included (describe) | 021 | <u>0</u> | <input checked="" type="checkbox"/> N/A |
| Social events not already included (describe) | 022 | <u>0</u> | <input checked="" type="checkbox"/> N/A |
| Other disbursements (describe) Incorporation and set up costs | 023 | <u>7,500</u> | <input type="checkbox"/> N/A |
| Total estimated disbursements (Add lines 013 to 023) | 029 | <u>7,500</u> | <input type="checkbox"/> N/A |

001 see next page for clients request



[Redacted]

[Redacted]

[Redacted]



[Redacted]

Work item - 15168 - 140
is
Sub=3172195
310

[Redacted]

DATE January 7, 2008

TO Laurie Vechter

COMPANY Charities Directorate

FAX NO. 613-952-6020

FROM [Redacted]

RE: Elysium Foundation

FILE NO. Your File No. 3036588

OF PAGES 1

[Redacted]

This facsimile may be privileged and confidential. Any use of this facsimile by an unintended recipient is prohibited. If you have received this facsimile in error, please call us immediately and return the original message, uncopied, to us by mail.

MESSAGE:

Attention: Laurie Vechter

As discussed, we confirm that Elysium Foundation plans to gift out \$20,000 to qualified donees in its first year of operation.

[Redacted]

[Redacted]

[Redacted]

Part 5 – Financial information (cont'd)

C. Foreign disbursements

Will any of the organization's disbursements accounted for in Part B above be used for programs outside Canada?

Yes **No (go to Q17D)**

If list the locations and the amounts to be spent in each location.

| Location | Amount |
|----------|--------|
| | 0 |

Assets and liabilities

D. Assets

| | | |
|---|-------------------------|---|
| Cash on hand or in bank accounts | 030 _____ 0 | <input checked="" type="checkbox"/> N/A |
| Investments (e.g., bonds, stocks, guaranteed term deposits) | 031 _____ 17,500 | <input type="checkbox"/> N/A |
| Fixed assets (specify – e.g., equipment, land, buildings, vehicles, inventory) | | |
| | 032 _____ 0 | <input checked="" type="checkbox"/> N/A |
| Total assets (Add lines 030-032) | 035 _____ 17,500 | |

Part 5 – Financial information (cont'd)

E. Liabilities

Mortgages, loans, and notes payable (specify)

_____ **036** _____ 0 N/A

Other amounts payable (specify)

_____ **037** _____ 0 N/A

Total liabilities **040** _____ 0
(Add lines 036 and 037)

Q18 Financial transactions with directors/trustees, founders, etc.

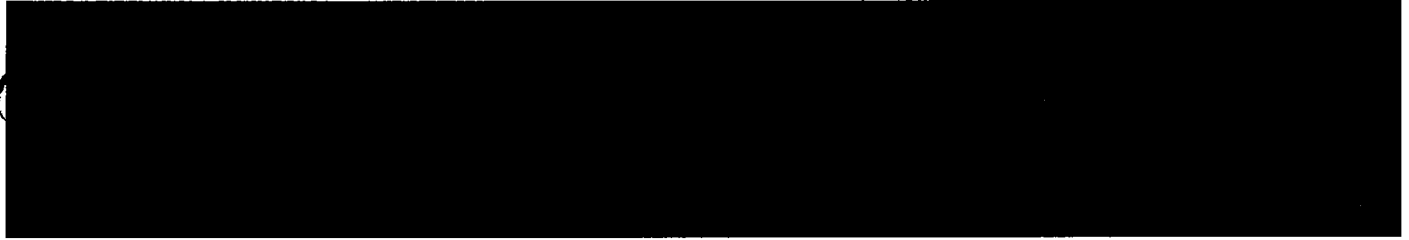
Has the organization entered into (or does it propose to enter into) financial, real estate, or other transactions with a director/trustee, founder, member, employee, or with anyone or any organization related to these people?

Yes **No (go to Q19)**

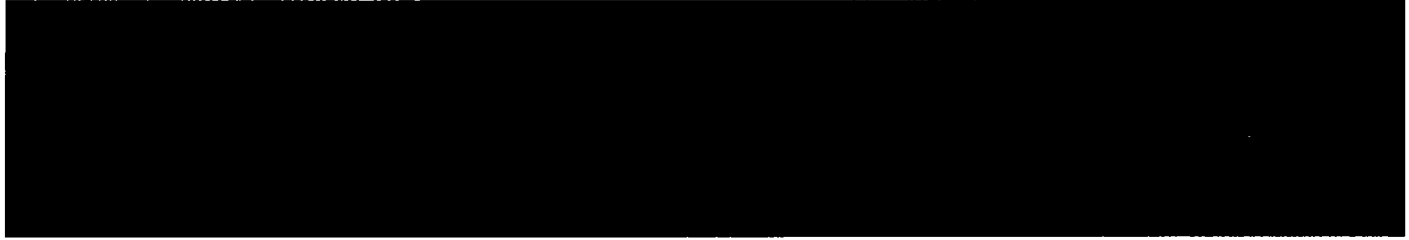
If yes, provide details.

No financial transactions with the organization's members or directors are presently contemplated. However, it is likely that at some point the organization will receive financial support from some or all of its directors or members, as well as from persons and corporations related to its directors and members.

Q19 Business address or physical location of organization



Q20 Physical location of books and records



Q21 Authorized Representative/Contact Person



Q22 Confidential information about directors/trustees

Director/Trustee () Name: Blake Bromley

Complete home address:



Director/Trustee ii) Name: Leslie Brandmayr

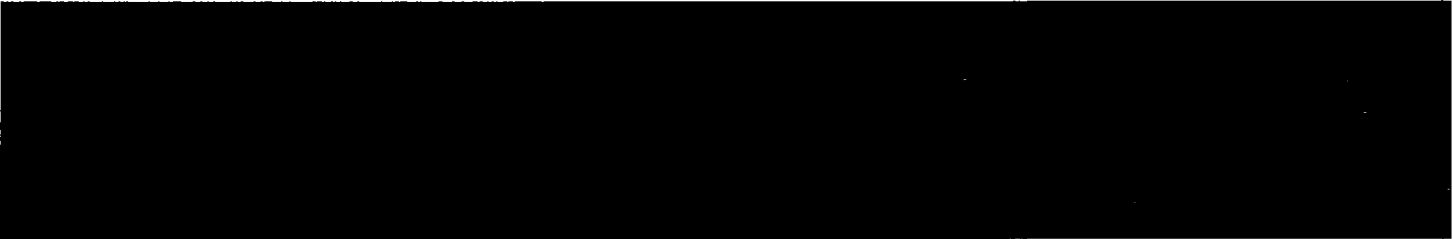
143

Complete home address:



Director/Trustee iii) Name: Victoria Nalugwa

Complete home address:



Q23 Financial statements

If the organization has been operating for over a year, attach a separate copy of its most recent **financial statements**.

Included N/A

Enclosure checklist



Have you included:

- the parent organization's certificate, if applicable (see Q9)?
- a copy of the governing document accompanied, if applicable, by a copy of all amendments (see Q10A)? If the organization is not incorporated, remember to have a copy of a constitution or trust deed signed by three current directors/trustees (see Q10B).
- a certificate of good standing, if applicable (see Q10A.1)?
- a copy of the by-laws, if any (see Q10C)?
- a detailed account of activities (see Q13A)?
- a copy of minutes, newspaper cuttings, pamphlets, fund-raising materials, etc. (see Q13B)?
- a copy of the latest financial statements, if applicable (see Q23)?

CERTIFICATION

(to be completed by two persons authorized to sign on behalf of the organization)

I certify that the information given on this form and in all attached documentation is, to the best of my knowledge, correct and complete.

| | | |
|-------------------------------------|--|---|
| Signature | 1.  | 2.  |
| Name (please print) | Blake Bromley | Leslie Brandimayr |
| Position within organization | Director | Director |
| Date signed | 2007/07/07 | 2007/07/07 |