

H.S.E.F. Renaissance Academy

BALANCE SHEET as at November 30

ASSETS	2021	2020
Current		
Bank account	\$ 28,169.76	28,241.76
cash account	4.64	4.64
Investments - shares	0.00	0.00
Note receivable	0.00	0.00
Unrealised G/L	0.00	0.00
GST Receivable	0.00	0.00
<u>TOTAL ASSETS</u>	<u>\$ 28,174.40</u>	<u>\$ 28,246.40</u>
LIABILITIES		
Current		
Accounts Payable	\$ <u>0.00</u>	\$ <u>0.00</u>
<u>TOTAL LIABILITIES</u>	<u>0.00</u>	<u>\$ 0.00</u>

STATEMENT OF CHANGES IN SURPLUS

Balance at Beginning of Period	\$ 28,246.40	\$ 28,318.40
Increase in Surplus during period	<u>(72.00)</u>	<u>(72.00)</u>
Surplus at End of Period	\$ 28,174.40	\$ 28,246.40
TOTAL LIABILITIES AND SURPLUS	\$ 28,174.40	\$ 28,246.40

Approved by:



H.S.E.F. Renaissance Academy

STATEMENT OF RECEIPTS AND DISBURSEMENTS for the period ended November 30

RECEIPTS	2021	2020
Receipted Donations - not receipted	\$ 0.00	\$ 0.00
Receipted Donations - GIK	0.00	0.00
Interest/Dividend Income	0.00	0.00
Realised (loss) gain on investments	0.00	0.00
Unrealised gain on Investments	<u>0.00</u>	<u>0.00</u>
TOTAL RECEIPTS	\$ 0.00	\$ 0.00
 DISBURSEMENTS		
Charitable Programs - Gifts to Qualified Donees	\$ 0.00	\$ 0.00
Bank fees; Interest expense	72.00	72.00
Investment losses	0.00	0.00
Office and miscellaneous	0.00	0.00
Professional Fees	<u>0.00</u>	<u>0.00</u>
TOTAL DISBURSEMENTS	\$ 72.00	\$ 72.00
 SURPLUS		
Increase (Decrease) in Surplus during Period	<u>\$ (72.00)</u>	<u>\$ (72.00)</u>

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: 3

Place bar code label here

Public information:	Confidential data
Last name: Caunt First name: Matthew Initial: _____ Term ▶ Start date (Y/M/D): 2 0 1 1 1 1 0 2 End date (Y/M/D): _____ Position: Director At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	[REDACTED]
Last name: Nathoo First name: Azim Initial: _____ Term ▶ Start date (Y/M/D): 2 0 1 1 1 1 0 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: Brandimayr First name: Leslie Initial: _____ Term ▶ Start date (Y/M/D): 2 0 1 6 0 6 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: _____ First name: _____ Initial: _____ Term ▶ Start date (Y/M/D): _____ End date (Y/M/D): _____ Position: _____ At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No	Residential address – Street number and name: _____ City: _____ Prov/Terr: _____ Postal code: _____ Phone number: _____ Date of birth (Y/M/D): _____
Last name: _____ First name: _____ Initial: _____ Term ▶ Start date (Y/M/D): _____ End date (Y/M/D): _____ Position: _____ At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No	Residential address – Street number and name: _____ City: _____ Prov/Terr: _____ Postal code: _____ Phone number: _____ Date of birth (Y/M/D): _____
Last name: _____ First name: _____ Initial: _____ Term ▶ Start date (Y/M/D): _____ End date (Y/M/D): _____ Position: _____ At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No	Residential address – Street number and name: _____ City: _____ Prov/Terr: _____ Postal code: _____ Phone number: _____ Date of birth (Y/M/D): _____
Last name: _____ First name: _____ Initial: _____ Term ▶ Start date (Y/M/D): _____ End date (Y/M/D): _____ Position: _____ At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No	Residential address – Street number and name: _____ City: _____ Prov/Terr: _____ Postal code: _____ Phone number: _____ Date of birth (Y/M/D): _____
Last name: _____ First name: _____ Initial: _____ Term ▶ Start date (Y/M/D): _____ End date (Y/M/D): _____ Position: _____ At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No	Residential address – Street number and name: _____ City: _____ Prov/Terr: _____ Postal code: _____ Phone number: _____ Date of birth (Y/M/D): _____
Last name: _____ First name: _____ Initial: _____ Term ▶ Start date (Y/M/D): _____ End date (Y/M/D): _____ Position: _____ At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No	Residential address – Street number and name: _____ City: _____ Prov/Terr: _____ Postal code: _____ Phone number: _____ Date of birth (Y/M/D): _____

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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, the basic information sheet, and any attachment is, to the best of my knowledge, correct, complete, and current.

Name (print):

AZIM NATHOO

Position in charity:

Director

Section F: Confidential data**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 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
- Form TF725, Registered Charity Basic Information Sheet
- a copy of the charity's financial statements
- Form T1236, Directors/Trustees and Like Officials Worksheet
- Form RC232-WS, Director/Officer Worksheet and Ontario Corporations Information Act Annual Return, or Form RC232, Ontario Corporations Information Act Annual Return (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.