



Section A. Identification

- To complete this form, you must file a Charity Information Return.
- The Privacy Act protects personal information.
- Except for yes/no questions, leave it blank.



18 2005-01-31 892420746 RR 0001 1084177

Please attach a bar code label here before you mail this return. If you have a label, enter:

1. Fiscal Period End 2005/01/31  
Year Month Day

2. BN/registration number 89242 0746 RR 0001  
RC-04-806

A1 Has the charity made any changes to its governing documents (e.g., letters patent, articles of incorporation, constitution, trust, or by-laws) that it has not previously reported? (If yes, see the guide.) 1500  Yes  No

A2 Was the charity an internal division regulated by the governing documents of another charity (i.e., it had no governing documents establishing its independent existence)? If yes, what is the name and BN/registration number of the other charity? 1510  Yes  No

BN/registration number (##### ####RR####) RR

Charity linked to a provincial, national, or international organization? If yes, what is the name of this organization and its BN/registration number (if applicable). 1540  Yes  No

BN/registration number (##### ####RR####) RR

Charity wound-up, dissolved, or terminated operations? (If yes, see the guide.) 1570  Yes  No

Charity amalgamated, merged, or consolidated with another organization? (If yes, see the guide.) 1580  Yes  No

Directors/Trustees and Like Officials

Attach a list with the last name, first name, and initial of each director/trustee and like official and their date of birth, home address (including street number, street name, city, and postal code), telephone number, position in the charity, and if they are at arm's length. Only the person's name, position in the charity, and their arm's length status will be made public. All other information will be kept confidential. Use the worksheet included in the guide or a sheet with the same information in the same format. Attach this information to this return. See the guide for an explanation of the term arm's length.

Did you complete the list required above? 1700  Yes  No

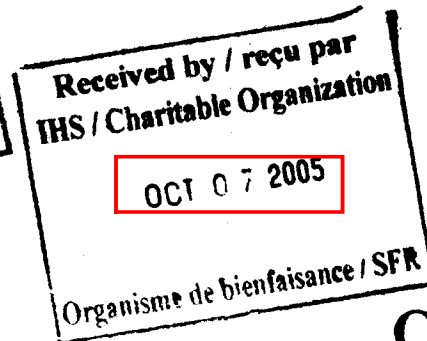
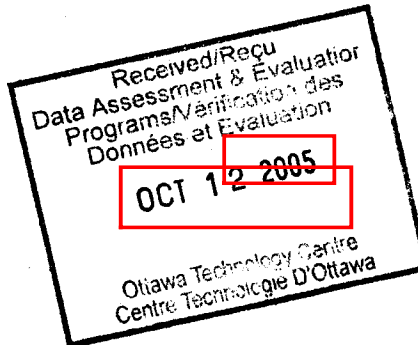
Programs and General Information

Was the charity inactive during the fiscal period? If yes, please explain why in the "Ongoing programs" section. 1800  Yes  No

Describe the programs carried out by the charity during the fiscal period. Give detailed information so a reader can clearly see what the charity actually did to fulfill its mandate. Describe the charity's ongoing programs and new programs in the spaces provided. Do not attach additional sheets of paper or annual reports. Do not include a description of fundraising activities in this section. Charities should describe the types of organizations they support. Please number each program. (See the guide for instructions on how to describe your programs.)

Ongoing programs
New programs

C3 For programs carried on in Canada, check the appropriate box to show where the programs were carried on.  
 2000  A single rural, city, or metropolitan area    2010  Provincially or territorially    2020  In more than one province or territory



- C4** Did the charity carry on programs, directly or indirectly, **outside Canada**? 2100  Yes  No  
 If yes, were any carried out:
- by employees or volunteers of the charity? 2110  Yes  No
  - under agency agreement, contract, joint-venture, or similar arrangements? 2120  Yes  No
  - through gifts to qualified donees? 2130  Yes  No
  - by other means? 2140  Yes  No

**C5** For programs the charity managed directly, outside of Canada, list the countries or regions where programs were carried on. Do not include countries or regions where programs were managed by a qualified donee.


**C6** Did the charity issue scholarships, bursaries, awards, prizes, or honoraria to an individual during the fiscal period? 2300  Yes  No

**C7** A charity may pursue political activities that are non-partisan, related to its charitable purposes, and limited in extent. During the fiscal period, did the charity carry out political activities or provide assistance to another organization to carry out political activities? (See the guide for information on political activities.) 2400  Yes  No

**C8** If the charity carried on fundraising activities, check all fundraising methods that it used during the fiscal period.

- |  |   |   |
|--|---|---|
| <b>2500</b> <input type="checkbox"/> Advertisements/posters/flyers/radio or TV commercials | <b>2560</b> <input type="checkbox"/> Fundraising dinners/galas/concerts           | <b>2620</b> <input type="checkbox"/> Telephone solicitations          |
| <b>2510</b> <input type="checkbox"/> Auctions  | <b>2570</b> <input type="checkbox"/> Fundraising sales (e.g., cookies, chocolate) | <b>2630</b> <input type="checkbox"/> Tournaments/sporting events      |
| <b>2520</b> <input type="checkbox"/> Bingo/casino nights                                   | <b>2580</b> <input type="checkbox"/> Mail campaigns                               | <b>2640</b> <input type="checkbox"/> Walk-a-thons/bike-a-thons (etc.) |
| <b>2530</b> <input type="checkbox"/> Collection plates/boxes                               | <b>2590</b> <input type="checkbox"/> Planned-giving programs                      | <b>2650</b> <input type="checkbox"/> Other                            |
| <b>2540</b> <input type="checkbox"/> Door-to-door solicitation                             | <b>2600</b> <input type="checkbox"/> Targeted corporate donations/sponsorships    | <b>2660</b> <input type="checkbox"/> Specify: _____                   |
| <b>2550</b> <input type="checkbox"/> Draws/lotteries                                       | <b>2610</b> <input type="checkbox"/> Targeted contacts                            |   |

**C9** Did the charity use incentive-based compensation (e.g., bonuses, commissions, finder's fees, honoraria) for fundraisers? 2700  Yes  No

If yes, were these incentives paid to:

- contracted fundraisers? 2710  Yes  No
- staff or volunteers? 2720  Yes  No

**C10** Did the charity charge fees for, or otherwise receive regular revenue from goods, services, or the use of the charity's assets? 2800  Yes  No

**C11** Did the charity make gifts to qualified donees? 2900  Yes  No

If yes, you **must** attach a list with the name of each qualified donee and its location, BN/registration number, the total amount of the gift for the fiscal period, the amount, if any, of specified gifts, and whether or not it is an associated charity. List the qualified donees in the order of the total amount of the gifts made, starting with the largest. Use the worksheet included in the guide or a sheet with the same information in the same format and attach it to this return.

**C12** If the charity received non-cash gifts (gifts in kind) for which it issued tax receipts, check all the types of gifts that apply.

- |  |   |  |
|--|---|--|
| <b>3000</b> <input type="checkbox"/> Artwork/wine/jewellery  | <b>3040</b> <input type="checkbox"/> Cultural property                                  | <b>3080</b> <input type="checkbox"/> Publicly-traded securities/mutual funds |
| <b>3010</b> <input type="checkbox"/> Building materials      | <b>3050</b> <input type="checkbox"/> Ecological property                                | <b>3090</b> <input type="checkbox"/> Privately-held securities               |
| <b>3020</b> <input type="checkbox"/> Clothing/furniture/food | <b>3060</b> <input type="checkbox"/> Machinery/equipment (including computers/software) | <b>3100</b> <input type="checkbox"/> Other                                   |
| <b>3030</b> <input type="checkbox"/> Vehicles                | <b>3070</b> <input type="checkbox"/> Hedge funds/life insurance policies                | <b>3110</b> <input type="checkbox"/> Specify: _____                          |

## Section D – Compensation

**Note:** Compensation includes all forms of remuneration (e.g., salaries, fees, and honoraria) and benefits (e.g., personal use of a car or office space).

**D1** On average, how many permanent, full-time, compensated positions did the charity have in the fiscal period? 3600

**D2** For the five highest compensated positions indicate the number of positions in each of the following annual compensation categories. Include only those positions that are permanent, full-time positions.

**3700**  \$1–\$39,999    **3710**  \$40,000–\$79,999    **3720**  \$80,000–\$119,999    **3730**  \$120,000 and over

**D3** On average, how many part-time or part-year employees did the charity employ in the fiscal period? 3800

**D4** What was the total expenditure on compensation for part-time or part-year employees in the fiscal period? 3850 \$

**D5** Did the charity compensate any of its directors/trustees or like officials, during the fiscal period? 3900  Yes  No

**D6** Except for compensation, did the charity, directly or indirectly, transfer any part of its income or assets to individuals or organizations not at arm's length to the charity? 3950  Yes  No

**Section E – Financial Information**

- E1** Please attach a copy of the charity's financial statements to this return 4000  Attached  
**E2** May we make the attached financial statements available to the public? 4010  Yes  No  
**E3** Was the financial information reported below prepared on an accrual or cash basis? 4020  Accrual  Cash  
**E4** Please show figures to the nearest single dollar. Do not show cents. See the guide for an explanation of the terms.

<b>Assets</b>		<b>Liabilities</b>	
Cash, bank accounts, and short-term investments	4100	Accounts payable and accrued liabilities	4300
Amounts receivable from non-arm's length parties	4110	Deferred revenue	4310
Amounts receivable from all others	4120	Amounts owing to non-arm's length parties	4320
Investments in non-arm's length parties	4130	Other liabilities	4330
Long-term investments	4140	<b>Total liabilities (add lines 4300 to 4330)</b>	<b>4350</b>
Inventories	4150		
Capital assets	4160		
Other assets	4170	Amount included in lines 4150, 4160, and	
<b>Total assets (add lines 4100 to 4170)</b>	<b>4200</b>	4170 not used in charitable programs	<b>4250</b>

**E5** Please show figures to the nearest single dollar. Do not show cents. See the guide for an explanation of the terms.

<b>Revenue</b>	
Total tax-receipted gifts	4500
Total gifts received from other registered charities	4510
Total specified gifts included in line 4510	4520
Total other gifts	4530
Revenue from federal government	4540
Revenue from provincial/territorial governments	4550
Revenue from municipal/regional governments	4560
<b>Total revenue from government (add lines 4540, 4550, and 4560)</b>	<b>4570</b>
Interest and investment income	4580
Proceeds from disposition of assets	gross 4590 net 4600
Rental income (land and buildings)	4610
Memberships, dues, and association fees (non tax-receipted)	4620
Total revenue from fundraising	4630
Total revenue from sale of goods and services (except to government)	4640
Other revenue	4650
<b>Total revenue (add lines 4500, 4510, 4530, 4570, 4580, and 4600 to 4650)</b>	<b>4700</b>
<b>Expenditures (Enter all expenditures, whether or not on charitable programs)</b>	
Advertising and promotion	4800
Travel and vehicle	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
Salaries, wages, benefits, and honoraria	4880
Donated and purchased supplies and assets expensed for the fiscal period	4890
Amortization of capitalized assets	4990
Research grants and scholarships as part of charitable programs	4910
Other expenditures	4920
<b>Total expenditures before gifts to qualified donees (add lines 4800 to 4920)</b>	<b>4950</b>
Total charitable programs expenditures included in line 4950	5000
Total management and administration expenditures included in line 4950	5010
Total fundraising expenditures included in line 4950	5020
Total political activity expenditures included in line 4950	5030
Total other activity expenditures included in line 4950	5040
Total gifts to qualified donees	5050
<b>Total expenditures (add lines 4950 and 5050)</b>	<b>5100</b>

We will calculate your disbursement quota based on the information you provide on this return.  
 If you want to do your own calculation, see the disbursement quota worksheet in the guide.





**Directors/Trustees Worksheet**

Provide the last name, first name, and initial for each director/trustee and like official (provide province or territory and postal code), position in the charity, whether or not they are a director/trustee at year end, and their date of birth. Only the "Public Information" section of the worksheet is made available to the public. The "Confidential information" section is for CCRA's use only and remains confidential. See the guide for an explanation of the term arm's length.

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Public information			Confidential information		
Last name:	First name:	Initial:	Street number and name:	City:	
Bromley	Blake		2791 Waterloo Street	Vancouver	
Position in charity:	Director/Trustee at year end?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Province or territory:	Postal code:	Telephone number:
Director			BC	V6R 3J1	
	Arm's length:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Date of birth:	1951/01/24 (604) 683-7033	
Last name:	First name:	Initial:	Street number and name:	City:	
Brandmayr	Leslie	H.	5012 Watling Street	Burnaby	
Position in charity:	Director/Trustee at year end?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Province or territory:	Postal code:	Telephone number:
Director			BC	V5J 1W7	
	Arm's length:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Date of birth:	1954/12/06 (604) 683-7006	
Last name:	First name:	Initial:	Street number and name:	City:	
Lushington	Pamela	J	12699 115A Avenue	Surrey	
Position in charity:	Director/Trustee at year end?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Province or territory:	Postal code:	Telephone number:
Director			BC	V3V 3P9	
	Arm's length:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Date of birth:	1956/04/18 ( ) -	
Last name:	First name:	Initial:	Street number and name:	City:	
Position in charity:	Director/Trustee at year end?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Province or territory:	Postal code:	Telephone number:
	Arm's length:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date of birth:	( ) -	
Last name:	First name:	Initial:	Street number and name:	City:	
Position in charity:	Director/Trustee at year end?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Province or territory:	Postal code:	Telephone number:
	Arm's length:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date of birth:	( ) -	
Last name:	First name:	Initial:	Street number and name:	City:	
Position in charity:	Director/Trustee at year end?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Province or territory:	Postal code:	Telephone number:
	Arm's length:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date of birth:	( ) -	
Last name:	First name:	Initial:	Street number and name:	City:	
Position in charity:	Director/Trustee at year end?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Province or territory:	Postal code:	Telephone number:
	Arm's length:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date of birth:	( ) -	
Last name:	First name:	Initial:	Street number and name:	City:	
Position in charity:	Director/Trustee at year end?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Province or territory:	Postal code:	Telephone number:
	Arm's length:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date of birth:	( ) -	
Last name:	First name:	Initial:	Street number and name:	City:	
Position in charity:	Director/Trustee at year end?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Province or territory:	Postal code:	Telephone number:
	Arm's length:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date of birth:	( ) -	