



Section A - Identification

- To complete this form, you must file an Information Return, T4033
The Privacy Act protects information bank.
Except for yes/no questions



19/24 89242 0746 RR 0001 2007-01-31 1084177

Please attach a bar code label here before you mail this return. If no label, enter:

Fiscal Period Ending 2007/01/31 Year Month Day

Registration number 89242 0746 RR 0001 RC-07-806

A1 Has the charity made any changes to its governing documents during the fiscal period (e.g., letters patent, articles of incorporation, constitution, trust, or by-laws)? (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 of its own independent existence)? If yes, what is the name and BN/registration number of the other charity? 1510 Yes No

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

Is the charity linked in a subordinate way to a provincial, national, or international organization? If yes, what is the name of this organization? BN/registration number (if applicable)? 1540 Yes No

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

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

Has the 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, home address (including street number, street name, city, territory, and postal code), position in the charity, whether or not they were a director/trustee at the end of the fiscal period, telephone number, if different from all other members of the governing board and their date of birth. Only the Public information section on the worksheet is to be filed. The Confidential information section is for the CCRA's use only and remains confidential. Use the worksheet included in the guide to enter the same information in the same format to enter this information, and attach it to this return. See the guide for an explanation of the term arm's length. Attach the list required above? 1700 Yes No

Programs and General Information

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

Describe the charity's ongoing programs and new programs during the fiscal period. Give detailed information so a reader can clearly understand what the charity carried out to fulfill its mandate. Describe the charity's ongoing programs and new programs in the spaces provided below. Do not attach additional annual reports. Do not include a description of fundraising activities in this section. Grant-making charities should describe the types of support. Please number each program. (See the guide for instructions on how to describe your programs.)

Table with 2 columns: Programs, Description. Header: Programs. Row 1: 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

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

**E2** 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	<b>4100</b> 257,772	Accounts payable and accrued liabilities	<b>4300</b>
Amounts receivable from non-arm's length parties	<b>4110</b>	Deferred revenue	<b>4310</b>
Amounts receivable from all others	<b>4120</b>	Amounts owing to non-arm's length parties	<b>4320</b>
Investments in non-arm's length parties	<b>4130</b>	Other liabilities	<b>4330</b>
Long-term investments	<b>4140</b>	<b>Total liabilities (add lines 4300 to 4330)</b>	<b>4350</b>
Inventories	<b>4150</b>		
Capital assets (at cost or fair market value)	<b>4160</b>		
Other assets	<b>4170</b>	Amount included in lines 4150, 4160, and 4170 not used in charitable programs	<b>4250</b>
<b>Total assets (add lines 4100 to 4170)</b>	<b>4200</b> 257,772		

**E3** 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 eligible amount of tax-receipted gifts	<b>4500</b>
Total amount received from other registered charities	<b>4510</b>
Total specified gifts included in line 4510	<b>4520</b>
Total enduring property included in line 4510 (See the guide.)	<b>4525</b>
Total other gifts	<b>4530</b>
Revenue from federal government	<b>4540</b>
Revenue from provincial/territorial governments	<b>4550</b>
Revenue from municipal/regional governments	<b>4560</b>
Total revenue from government (add lines 4540, 4550, and 4560)	<b>4570</b>
Interest and investment income	<b>4580</b>
Proceeds from disposition of assets gross	<b>4590</b>
net	<b>4600</b>
Rental income (land and buildings)	<b>4610</b>
Memberships, dues, and association fees (non tax-receipted)	<b>4620</b>
Total revenue from fundraising	<b>4630</b>
Total revenue from sale of goods and services (except to government)	<b>4640</b>
Other revenue	<b>4650</b>
<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	<b>4800</b>
Travel and vehicle	<b>4810</b>
Interest and bank charges	<b>4820</b>
Licences, memberships, and dues	<b>4830</b>
Office supplies and expenses	<b>4840</b>
Occupancy costs	<b>4850</b>
Professional and consulting fees	<b>4860</b>
Education and training for staff and volunteers	<b>4870</b>
Salaries, wages, benefits, and honoraria	<b>4880</b>
Donated and purchased supplies and assets expensed for the fiscal period	<b>4890</b>
Amortization of capitalized assets	<b>4900</b>
Research grants and scholarships as part of charitable programs	<b>4910</b>
Other expenditures	<b>4920</b>
<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	<b>5000</b>
Total management and administration expenditures included in line 4950	<b>5010</b>
Total fundraising expenditures included in line 4950	<b>5020</b>
Total political activity expenditures included in line 4950	<b>5030</b>
Total other expenditures included in line 4950	<b>5040</b>
Total gifts to qualified donees excluding enduring property	<b>5050</b>
Total enduring property transferred to qualified donees (See the guide.)	<b>5060</b>
Total specified gifts to qualified donees (See the guide.)	<b>5070</b>
<b>Total expenditures (add lines 4950, 5050, 5060 and 5070)</b>	<b>5100</b>

### Section F – Other Required Information

**F1** What were the total expenditures on programs **outside** Canada during the fiscal period, excluding gifts to qualified donees? 5400 \$

**F2** If the charity retained contracted fundraiser(s), enter:

a. the gross revenues collected by the fundraiser(s) on behalf of the charity 5450 \$

b. the amounts paid to and/or retained by the fundraiser(s) 5460 \$

c. the net fundraising revenue received by the charity (line 5450 minus line 5460) 5470 \$

**F3** If the charity has written permission to accumulate property, enter:

• the amount accumulated for the fiscal period, including income earned for the fiscal period on previously accumulated funds 5500 \$

• the amount disbursed for the fiscal period for the specified purpose we have granted permission for 5510 \$

• the amount deemed to be a tax-receipted gift for the fiscal period 5520 \$

**F4** Of the tax-receipted gifts received by the charity for the fiscal period, enter:

• the total eligible amount of tax-receipted non-cash gifts (gifts in kind) 5600 \$

• the total eligible amount of tax-receipted tuition fees 5610 \$

• the total eligible amount of tax-receipted enduring property 5640 \$

**F5** Enter the amount, if any, of enduring property spent in the fiscal period. (See the guide.) 5710 \$

**F6** Enter the capital gains from the disposition of enduring property in the fiscal period. (See the guide.) 5720 \$

**F7** Is the charity claiming an amount that is less than the maximum capital gains reduction? (See the guide.) 5730  Yes  No

If yes, enter the amount from line 11 of form T1259. (See the guide.) 5740 \$

**F8** If the charity is taking a special reduction, which we have approved, to its disbursement quota, enter the special reduction amount for the fiscal period. 5750 \$

**F9** Did the charity acquire a non-qualifying security or allow a donor to use any of the charity's property under the circumstances described in the guide during the fiscal period? 5800  Yes  No

**F10** Indicate the average value of property **not** used for charitable activities or administration during:

• the 24 months before the **beginning** of the fiscal period 5900 \$ 125,000

• the 24 months before the **end** of the fiscal period 5910 \$ 253,886

### Section G – For Foundations Only

**Note:** See the guide for an explanation of the terms and requirements of this section.

**G1** In the fiscal period, did the foundation acquire control of a share-capital or for-profit corporation? 6000  Yes  No

**G2** Did the foundation incur debts at any time during the fiscal period other than for current operating expenses, in purchasing or selling investments, or in administering charitable programs? 6100  Yes  No

**G3 For private foundations only:** At any time during the fiscal period, did the foundation hold any shares, rights to acquire such shares, or debts owing to it that meet the definition of a non-qualified investment? 6150  Yes  No

### Section H – Certification

**H1** To be completed by a director/trustee or like official 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 attachments is, to the best of my knowledge, correct, complete, and current.

Name (please print) E G Bromley Position in charity DIRECTOR

Signature [Signature] Date signed 2007/11/15

### Section I – Confidential Data

**1** Physical location (address) of the charity (Do not use rural route or post office box numbers.)

Number, street, apt. no., or lot and concession no. 1500 West Georgia Street, Suite 1555 Box 62

City Vancouver

Province or territory and postal code BC Postal code: V6G 2Z6

**2** Location of the charity's books and records

Number, street, apt. no., or lot and concession no. 1500 West Georgia Street, Suite 1555 Box 62

City Vancouver

Province or territory and postal code BC Postal code: V6G 2Z6

**3** Name and address of the person who completed this return

Name Pam Lushington

Firm name (if applicable) Benefic Compliance & Administrative Services Inc.

Number, street, apt. no., R.R. no., or P.O. box no. 1500 West Georgia Street, Suite 1555 Box 62

City Vancouver

Province or territory and postal code British Columbia Postal code: V6G 2Z6

Phone number (604)683-7006 Fax number (604)683-5676



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Directors/Trustees Worksheet

Provide the last name, first name, and initial for each director/trustee (provide province or territory and postal code), position in the charity, whether or not they are at arm's length from all other directors/trustees, telephone number, whether or not they are at arm's length from all other directors/trustees.

Only the "Public information" section of the worksheet is made available to the public. For CCRA's use only and remains confidential. See the guide for an explanation of the term arm's length.

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Province or territory:	Postal code:	Telephone number:
Director			BC	V6R 3J1	
	Arm's length:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date of birth:	1951/01/24 (604) 683-7033	
Last name:	First name:	Initial:	Street number and name:	City:	
Brandlmayr	Leslie	H.	5012 Watling Street	Burnaby	
Position in charity:	Director/Trustee at year end?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Province or territory:	Postal code:	Telephone number:
Director			BC	V5J 1W7	
	Arm's length:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date of birth:	1954/12/06 (604) 438-9994	
Last name:	First name:	Initial:	Street number and name:	City:	
Lushington	Pamela	J	35 Oxford Street	Hamilton	
Position in charity:	Director/Trustee at year end?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Province or territory:	Postal code:	Telephone number:
Director			ON	L8R 2W5	
	Arm's length:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date of birth:	1956/04/18 (905) 528-5596	
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:	( ) -	