

docs Sub # 3008804

APPLICATION TO REGISTER A CHARITY UNDER THE INCOME TAX

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
LOYALTY FOUNDATION

Q2 Current operational or trade name
 N/A

Q3 Previous names – List any other names under which the organization has operated.
 N/A

Q4 Business Number (BN)
Indicate the organization's business number (BN) accounts if any have been assigned. N/A

RC	RM
RP	RT

Q5 Mailing address
Suite 790 - 1500 West Georgia Street
(number, street, room, floor or suite no., R.R.)
Vancouver BC V6G 2Z6
(city or town) (province) (postal code)
(604) 683-7006 (604) 683-5676
(phone number) (fax number) (E-mail address)

Q6 Previous contact
Did the organization formerly apply to be registered as a charity, or has it previously written to the Charities Directorate on any other matter?
 Yes No (go to Q7)
File # 3022853
If yes, provide any reference number the Directorate used in its reply. BN#: 899172803 RL0001

Do not use this area	
Business Number (BN)	Reference number
Submission number	Effective date of registration <input checked="" type="checkbox"/> N/A

Part 3 – Organizational structure of applicant (cont'd)

Q10 Governing document

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.

Should be given to qualified donees in order to activate

Part 4 - Information about the activities of the applicant

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 objects 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 public charitable foundation. It will distribute funds to "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 public foundations. The Foundation does not intend to carry out charitable activities itself.

Part 4 – Information about the activities of the applicant (cont'd)

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.

_____ % Human resources
_____ % Financial resources
_____ % 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

Complete fiscal period:

2	0	0	2	1	2	0	1	to	2	0	0	3	1	1	3	0
Year			Month			Day			Year			Month			Day	

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 operating) 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 \$25,000 N/A

Gifts from corporations and businesses (provide name if known) 002 _____ N/A

Gifts from other registered charities (provide name if known) 003 \$25,000 N/A

Fundraising activities carried on by the organization itself not already included above. 004 _____ N/A

Fundraising activities carried on through other organizations not already included above. Copies of any proposed or existing contracts should be attached. 005 _____ N/A

Attached N/A

Government grants or contracts 006 _____ N/A

Describe receipts from any other sources of income not already included above 007 _____ N/A

Total estimated receipts from all sources (Add lines 001-007) 012 \$50,000 N/A

Part 5 – Financial information (cont'd)

Disbursements

Charitable programs
(Please identify program and approximate amount)

013 _____ N/A

Gifts to qualified donees (identify recipient, and registration number where applicable)

014 _____ N/A

Fundraising activities carried on by the organization itself

015 _____ N/A

Fundraising activities carried on by other organizations on the charity's behalf (provide name of fundraising organization)

016 _____ N/A

Management and administration

Remuneration and benefits not already included

017 _____ N/A

Accounting and legal services

018 _____ N/A

Occupancy costs not already included

019 _____ N/A

Supplies and equipment not already included

020 _____ N/A

Printing, publications not already included (describe)

021 _____ N/A

Social events not already included (describe)

022 _____ N/A

Other disbursements (describe)

023 \$5,000 _____ N/A

Set up and incorporation costs

Total estimated disbursements
(Add lines 013 to 023)

029 \$5,000 _____ N/A

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

Location	Amount

Assets and liabilities

D. Assets

Cash on hand or in bank accounts

030 \$45,000 N/A

Investments

(e.g., bonds, stocks, guaranteed term deposits)

031 N/A

Fixed assets

(specify – e.g., equipment, land, buildings, vehicles, inventory)

032 N/A

Total assets

(Add lines 030-032)

035 \$45,000

Liabilities

Mortgages, loans, and notes payable (specify)

036 _____ N/A

Other amounts payable (specify)

037 _____ N/A

Total liabilities
(Add lines 036 and 037)

040 0.00

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.

It is anticipated that the Foundation will receive financial support from
directors, members and employees as well as from persons, corporations and
organizations related to these people.

Part 6 - Confidential information

Q19 Business address or physical location of organization

Same as mailing address (Q5) or:

(number, street, room, floor or suite no., lot no., concession)

(city or town, province, and postal code)

()

(phone number)

()

(fax number)

Q20 Physical location of books and records

Same as mailing address (Q5) or Same as business address (Q19) or:

(number, street, room, floor or suite no., lot no., concession)

(city or town, province, and postal code)

()

(phone number)

()

(fax number)

Q21 Authorized Representative/Contact Person

Name: Blake Bromley, Pam Lushington and/or Leslie Brandlmayr of ODDO Services Inc.

Full mailing address: Suite 790 - 1500 West Georgia Street

Vancouver, BC V6G 2Z6

(number, street, room, floor or suite no., lot no., concession)

(city or town, province, and postal code)

()

(phone number)

()

(fax number)

Q22 Confidential information about directors/trustees

Director/Trustee i) Name: Blake Bromley

Complete home address:

6556 Balsam Street

(number, street, room, floor or suite no., R.R.)

Vancouver, BC V6P 5W8

(city or town, province, and postal code)

()

(phone number)

Occupation/line of work: Lawyer

Director/Trustee ii) Name: Anna Lee

Complete home address:

#82 6245 Sherdian Road

(number, street, room, floor or suite no., R.R.)

Richmond, BC V7E 4W6

(city or town, province, and postal code)

()

(phone number)

Occupation/line of work: Legal Secretary

Part 6 - Confidential information (cont'd)

* Director/Trustee (iii) Name: Leslie Bradnlmayr

Complete home address:

5012 Watling Street

(number, street, room, floor or suite no., R.R.)

Burnaby, BC

(city or town, province, and postal code)

()

(phone number)

Occupation/line of work: Legal Assistant

Director/Trustee (iv) Name:

Complete home address:

(number, street, room, floor or suite no., R.R.)

(city or town, province, and postal code)

()

(phone number)

Occupation/line of work:

Director/Trustee (v) Name:

Complete home address:

(number, street, room, floor or suite no., R.R.)

(city or town, province, and postal code)

()

(phone number)

Occupation/line of work:

Director/Trustee (vi) Name:

Complete home address:

(number, street, room, floor or suite no., R.R.)

(city or town, province, and postal code)

()

(phone number)

Occupation/line of work:

Director/Trustee (vii) Name:

Complete home address:

(number, street, room, floor or suite no., R.R.)

(city or town, province, and postal code)

()

(phone number)

Occupation/line of work:

Part 6 – Confidential information (cont'd)

Director/Trustee viii) Name: _____
Complete home address: _____

(number, street, room, floor or suite no., R.R.)

(city or town, province, and postal code)

()
(phone number)
Occupation/line of work: _____

Director/Trustee ix) Name: _____
Complete home address: _____

(number, street, room, floor or suite no., R.R.)

(city or town, province, and postal code)

()
(phone number)
Occupation/line of work: _____

Director/Trustee x) Name: _____
Complete home address: _____

(number, street, room, floor or suite no., R.R.)

(city or town, province, and postal code)

()
(phone number)
Occupation/line of work: _____

Director/Trustee xi) Name: _____
Complete home address: _____

(number, street, room, floor or suite no., R.R.)

(city or town, province, and postal code)

()
(phone number)
Occupation/line of work: _____

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

Part 7 – Certification and Final Steps

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. <u><i>B. Bromley</i></u>	2. <u><i>A. Lee</i></u>
Name (please print)	<u>BLAKE BROMLEY</u>	<u>ANNA LEE</u>
Position within organization	<u>Director</u>	<u>Director</u>
Date signed	<u><i>B. Bromley</i> Feb. 20/03</u>	<u>Feb. 21/03</u>