

Section A - Identification

- To complete this form, you will need the guide called Completing the Registered Charity Information Return, T4033A.
The Privacy Act protects personal information given on this form, which is kept in a personal information bank.
Except for yes/no questions, if a question does not apply to your charity, please leave it blank.

Please attach a bar code label here before you mail this return. If no label, enter:
1. Fiscal Period Ending 2007/08/31
2. BN/registration number 888963519 RR 0001

RC-07-807

A1 Has the charity made any changes to its governing documents during the fiscal period... 1500 Yes No
A2 Was the charity an internal division regulated by the governing documents of another charity... 1510 Yes No
A3 Was the charity linked in a subordinate way to a provincial, national, or international organization... 1540 Yes No
A4 Has the charity wound-up, dissolved, or terminated operations? 1570 Yes No
A5 Has the charity amalgamated, merged, or consolidated with another organization? 1580 Yes No

Section B - Directors/Trustees and Like Officials

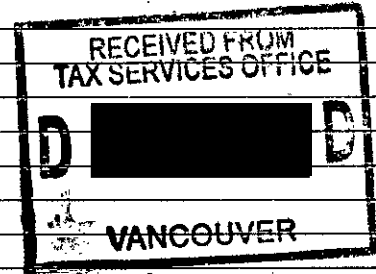
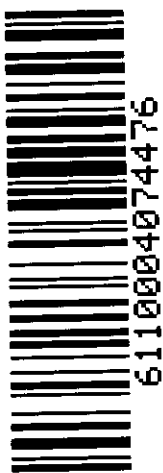
B1 You must attach a list with the last name, first name, and initial of each director/trustee and like official, home address... 1700 Yes No

Section C - Programs and General Information

C1 Was the charity inactive during the fiscal period? If yes, please explain why in the "Ongoing programs" space below. 1800 Yes No
C2 Describe how the charity carried out its charitable purposes during the fiscal period. Give detailed information so a reader can clearly understand what the charity actually did to fulfill its mandate.

Ongoing programs:

MADE GIFTS TO QUALIFIED DONEES, FUNDING CONSTRUCTION OF UNIVERSITY FOR QUEST UNIVERSITY CANADA



carried on in Canada. check the appropriate box to show where the programs were carried on.
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.

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

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

<input type="text" value="3700"/> \$1–\$39,999	<input type="text" value="3710"/> \$40,000–\$79,999	<input type="text" value="3720"/> \$80,000–\$119,999	<input type="text" value="3730"/> 2 \$120,000 and over
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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 \$.00

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.

Assets							
Cash, bank accounts, and short-term investments	4100	8,506,483	.00	Accounts payable and accrued liabilities	4300	6,778,208	.00
Amounts receivable from non-arm's length parties	4110	115,831,408	.00	Deferred revenue	4310		.00
Amounts receivable from all others	4120		.00				
Investments in non-arm's length parties	4130		.00	Amounts owing to non-arm's length parties	4320		.00
Long-term investments	4140	2,702,244	.00	Other liabilities	4330	19,000,000	.00
Inventories	4150		.00	Total liabilities (add lines 4300 to 4330)	4350	25,778,208	.00
Capital assets (at cost or fair market value)	4160	2,526	.00				
Other assets	4170	686,649	.00	Amount included in lines 4150, 4160, and 4170 not used in charitable programs	4250	689,165	.00
Total assets (add lines 4100 to 4170)	4200	127,729,300	.00				

E3 Please show figures to the nearest single dollar. Do not show cents. See the guide for an explanation of the terms.

Revenue							
Total eligible amount of tax-receipted gifts	4500	8,950,400	.00				
Total amount received from other registered charities	4510	45,175,000	.00				
Total specified gifts included in line 4510	4520		.00				
Total enduring property included in line 4510 (See the guide.)	4525		.00				
Total other gifts	4530		.00				
Revenue from federal government	4540		.00				
Revenue from provincial/territorial governments	4550		.00				
Revenue from municipal/regional governments	4560		.00				
Total revenue from government (add lines 4540, 4550, and 4560)	4570		.00				
Interest and investment income	4580	344,869	.00				
Proceeds from disposition of assets gross	4590	1,025,000	.00	net	4600	233,966	.00
Rental income (land and buildings)	4610		.00				
Memberships, dues, and association fees (non tax-receipted)	4620		.00				
Total revenue from fundraising	4630		.00				
Total revenue from sale of goods and services (except to government)	4640		.00				
Other revenue	4650	139,200	.00				
Total revenue (add lines 4500, 4510, 4530, 4570, 4580, and 4600 to 4650)	4700	54,843,435	.00				

Expenditures (Enter all expenditures, whether or not on charitable programs)						
Advertising and promotion	4800	6,070	.00			
Travel and vehicle	4810	15,072	.00			
Interest and bank charges	4820		.00			
Licences, memberships, and dues	4830		.00			
Office supplies and expenses	4840	25,174	.00			
Occupancy costs	4850	18,540	.00			
Professional and consulting fees	4860	309,107	.00			
Education and training for staff and volunteers	4870		.00			
Salaries, wages, benefits, and honoraria	4880	466,181	.00			
Donated and purchased supplies and assets expensed for the fiscal period	4890		.00			
Amortization of capitalized assets	4900	1,869	.00			
Research grants and scholarships as part of charitable programs	4910		.00			
Other expenditures	4920		.00			
Total expenditures before gifts to qualified donees (add lines 4800 to 4920)	4950	842,013	.00			

Total charitable programs expenditures included in line 4950	5000		.00
Total management and administration expenditures included in line 4950	5010	842,013	.00
Total fundraising expenditures included in line 4950	5020		.00
Total political activity expenditures included in line 4950	5030		.00
Total other expenditures included in line 4950	5040		.00

Total gifts to qualified donees excluding enduring property	5050	5,665,327	.00
Total enduring property transferred to qualified donees (See the guide.)	5060		.00
Total specified gifts to qualified donees (See the guide.)	5070		.00
Total expenditures (add lines 4950, 5050, 5060 and 5070)	5100	6,507,340	.00

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	\$,00
F2	If the charity retained contracted fundraiser(s), enter:				
	a. the gross revenues collected by the fundraiser(s) on behalf of the charity	5450	\$,00
	b. the amounts paid to and/or retained by the fundraiser(s)	5460	\$,00
	c. the net fundraising revenue received by the charity (line 5450 minus line 5460)	5470	\$,00
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	\$,00
	• the amount disbursed for the fiscal period for the specified purpose we have granted permission for	5510	\$,00
	• the amount deemed to be a tax-receipted gift for the fiscal period	5520	\$,00
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	\$,00
	• the total eligible amount of tax-receipted tuition fees	5610	\$,00
	• the total eligible amount of tax-receipted enduring property	5640	\$,00
F5	Enter the amount, if any, of enduring property spent in the fiscal period. (See the guide.)	5710	\$,00
F6	Enter the capital gains from the disposition of enduring property in the fiscal period. (See the guide.)	5720	\$,00
F7	Is the charity claiming an amount that is less than the maximum capital gains reduction? (See the guide.)	5730		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	If yes, enter the amount from line 11 of form T1259. (See the guide.)	5740	\$,00
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	\$,00
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		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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	\$	34,081,647	,00
	• the 24 months before the end of the fiscal period	5910	\$	18,467,241	,00

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		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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) Anne Lawlor

Position in charity CHIEF FINANCIAL OFFICER

Signature _____

Date signed 2008/04/17

Section I – Confidential Data

I1	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.	
	City	
	Province or territory and postal code	
I2	Location of the charity's books and records	
	Number, street, apt. no., or lot and concession no.	
	City	
	Province or territory and postal code	
I3	Name and address of the person who completed this return	
	Name	
	Firm name (if applicable)	
	Number, street, apt. no., R.R. no., or P.O. box no.	
	City	
	Province or territory and postal code	

Place bar code label here

Directors/Trustees Worksheet

Provide the last name, first name, and initial for each director/trustee and like official, home address (including street number, street name, city, province or 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, whether or not they are at arm's length from all other members of the charity's Board of Directors/Trustees 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.

Public information			Confidential information		
Last name: Strangway		First name: David	Initial:		
Position in charity: Director	Director/Trustee at year end?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	Arm's length:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Last name: Ufford		First name: Peter	Initial:		
Position in charity: Director	Director/Trustee at year end?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	Arm's length:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Last name: Lee		First name: Robert	Initial:		
Position in charity: Director	Director/Trustee at year end?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	Arm's length:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Last name: Smith		First name: Ross	Initial:		
Position in charity: Director	Director/Trustee at year end?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	Arm's length:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Last name:		First name:	Initial:		
Position in charity:	Director/Trustee at year end?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Street number and name:		
	Arm's length:	<input type="checkbox"/> Yes <input type="checkbox"/> No	City:		
			Province or territory:	Postal Code:	Telephone number:
			Date of birth:		
Last name:		First name:	Initial:		
Position in charity:	Director/Trustee at year end?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Street number and name:		
	Arm's length:	<input type="checkbox"/> Yes <input type="checkbox"/> No	City:		
			Province or territory:	Postal Code:	Telephone number:
			Date of birth:		
Last name:		First name:	Initial:		
Position in charity:	Director/Trustee at year end?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Street number and name:		
	Arm's length:	<input type="checkbox"/> Yes <input type="checkbox"/> No	City:		
			Province or territory:	Postal Code:	Telephone number:
			Date of birth:		
Last name:		First name:	Initial:		
Position in charity:	Director/Trustee at year end?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Street number and name:		
	Arm's length:	<input type="checkbox"/> Yes <input type="checkbox"/> No	City:		
			Province or territory:	Postal Code:	Telephone number:
			Date of birth:		
Last name:		First name:	Initial:		
Position in charity:	Director/Trustee at year end?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Street number and name:		
	Arm's length:	<input type="checkbox"/> Yes <input type="checkbox"/> No	City:		
			Province or territory:	Postal Code:	Telephone number:
			Date of birth:		

Place bar code label here

Qualified Donees Worksheet

Provide the name of each qualified donee, whether or not it is an associated charity, its location, BN/registration number, the total amount of the gifts for the fiscal period, the amount, if any, of specified gifts. List the qualified donees in the order of the total amount of the gifts made, starting with the largest. Round numbers to nearest single dollar.

Total number of qualified donees 1

Name of qualified donee: QUEST UNIVERSITY CANADA		Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Location: SQUAMISH			
BN/registration number: 864070859	Total amount of gifts: \$ 5,665,327.00	Amount of specified gifts: \$	

Name of qualified donee:		Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Location:			
BN/registration number:	Total amount of gifts: \$	Amount of specified gifts: \$	

Name of qualified donee:		Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location:			
BN/registration number:	Total amount of gifts: \$	Amount of specified gifts: \$	

Name of qualified donee:		Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location:			
BN/registration number:	Total amount of gifts: \$	Amount of specified gifts: \$	

Name of qualified donee:		Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location:			
BN/registration number:	Total amount of gifts: \$	Amount of specified gifts: \$	

Name of qualified donee:		Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location:			
BN/registration number:	Total amount of gifts: \$	Amount of specified gifts: \$	

Name of qualified donee:		Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location:			
BN/registration number:	Total amount of gifts: \$	Amount of specified gifts: \$	

Name of qualified donee:		Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location:			
BN/registration number:	Total amount of gifts: \$	Amount of specified gifts: \$	

Name of qualified donee:		Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location:			
BN/registration number:	Total amount of gifts: \$	Amount of specified gifts: \$	

Name of qualified donee:		Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location:			
BN/registration number:	Total amount of gifts: \$	Amount of specified gifts: \$	

Name of qualified donee:		Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location:			
BN/registration number:	Total amount of gifts: \$	Amount of specified gifts: \$	