



REGISTERED CHARITY INFORMATION RETURN

Section A: Identification

22 2012-04-30 891106841 RR 0001 0744540

- Guide T4033, Completing the Registered Charity Information Return, is available through our Forms and publications Web pages at www.cra.gc.ca/charities.
• The Privacy Act protects all personal information given on this form, which is kept in personal information banks. The Canada Revenue Agency (CRA) will make this form and all attachments available to the public on the Charities Information Web pages, except for information or data identified as confidential. All of the information collected on this form may be shared with certain other government departments and agencies.

Remember: Even if the charity goes through an inactive period, you must continue to file information returns to maintain its registered status.

If you did not receive a barcode label to affix to the return, please complete the following:

1. Charity's name:

Theanon Charitable Foundation

2. Return for fiscal period ending:

2012/04/30

3. BN/registration number:

89110 6841 RR 0001

4. Web address (if applicable)

A1 Was the charity in a subordinate position to a parent organization? 1510 Yes No

If yes, please provide the name and BN/registration number of the organization.

Table with 2 columns: Name, BN (if applicable) RR

A2 Has the charity wound-up, dissolved, or terminated operations? 1570 Yes No

A3 All charities are designated as one of the following: a charitable organization, a public foundation, or a private foundation. Is your organization designated as a public foundation or private foundation? 1600 Yes No

(Refer to the Form TF725, Registered Charity Basic Information sheet (BIS) to confirm. This form is included in the return package.)

If yes, you must complete and attach Schedule 1, Foundations, to your return.

Section B: Directors/trustees and like officials

B1 The charity is required to provide certain information for all members of its board of directors/trustees for the complete fiscal period. Only the public information section on the worksheet is available to the public. The confidential data section is for the CRA's use but may be shared as permitted by law (e.g. with certain other government departments and agencies). Use Form T1235, Directors/Trustees and Like Officials Worksheet, or include your own sheet with the same information. Charities subject to the Ontario Corporations Act may complete a blended worksheet.

Section C: Programs and general information

C1 Was the charity active during the fiscal period? If no, explain why in the "Ongoing programs" space provided at C2 1800 Yes No

C2 In the space provided, describe all ongoing and new charitable programs the charity carried on to further its charitable purpose(s) (as defined in its governing documents) this fiscal period. "Programs" includes all of the charitable work the charity carries out on its own through employees or volunteers as well as through qualified donees and intermediaries. The charity may also use this space to describe the contributions of its volunteers in carrying out its programs (e.g. number of volunteers and/or hours). Grant-making charities should describe the types of organizations they support. Please note that "programs" does not include fundraising activities. Do not attach additional sheets of paper or annual reports.

Ongoing programs:
It made gifts to "qualified donees"
New programs:



F5000006514738

Registered charities may make gifts to qualified donees. Qualified donees are other registered Canadian charities, as well as certain other organizations described in the *Income Tax Act*.

- C3** Did the charity make gifts or transfer funds to qualified donees or other organizations? **2000** Yes No
If yes, you must complete and attach Form T1236, *Qualified Donees Worksheet/Amounts Provided to Other Organizations*, to your return.
- C4** Did the charity carry on, fund, or provide any resources through employees, volunteers, agents, joint ventures, contractors, or any other individuals, intermediaries, entities, or means (other than qualified donees) for any activity/program/project outside Canada? **2100** Yes No
If yes, you must complete and attach Schedule 2, *Activities Outside Canada*, to your return.

A registered charity may pursue political activities to retain, oppose, or change the law, policy, or decision of any level of government inside or outside Canada provided the activities are non-partisan, related to its charitable purposes, and limited in extent.

- C5** (a) Did the charity carry on any political activities during the fiscal period? **2400** Yes No
 (b) Enter the total amount spent by the charity on these activities **5030** \$
- C6** If the charity carried on fundraising activities or engaged third parties to carry on fundraising activities on its behalf, tick all fundraising methods that it used during the fiscal period.

- | | | |
|--|--|---|
| 2500 <input type="checkbox"/> Advertisements/print/radio/TV commercials | 2570 <input type="checkbox"/> Fundraising sales (e.g., cookies) | 2620 <input type="checkbox"/> Telephone/TV solicitations |
| 2510 <input type="checkbox"/> Auctions | 2575 <input type="checkbox"/> Internet | 2630 <input type="checkbox"/> Tournament/sporting events |
| 2530 <input type="checkbox"/> Collection plate/boxes | 2580 <input type="checkbox"/> Mail campaigns | 2640 <input type="checkbox"/> Cause-related marketing |
| 2540 <input type="checkbox"/> Door-to-door solicitation | 2590 <input type="checkbox"/> Planned-giving programs | 2650 <input type="checkbox"/> Other |
| 2550 <input type="checkbox"/> Draws/lotteries | 2600 <input type="checkbox"/> Targeted corporate donations/sponsorships | 2660 Specify: _____ |
| 2560 <input type="checkbox"/> Fundraising dinners/galas/concerts | 2610 <input type="checkbox"/> Targeted contacts | |

- C7** Did the charity pay external fundraisers? **2700** Yes No
If yes, you must complete the following lines, and complete and attach Schedule 4, *Confidential Data*, 1. Information about Fundraisers.
- (a) Enter the gross revenue collected by the fundraisers on behalf of the charity. **5450** \$
- (b) Enter the amounts paid to and/or retained by the fundraisers. **5460** \$
- (c) Identify the method of payment to the fundraiser:
- | | | |
|--|---|--|
| 2730 <input type="checkbox"/> Commissions | 2750 <input type="checkbox"/> Finder's fees | 2770 <input type="checkbox"/> Honoraria |
| 2740 <input type="checkbox"/> Bonuses | 2760 <input type="checkbox"/> Set fee for services | 2780 <input type="checkbox"/> Other |
| | | 2790 Specify: _____ |
- (d) Did the fundraiser issue tax receipts on behalf of the charity? **2800** Yes No

- C8** Did the charity compensate any of its directors/trustees or like officials or persons not at arm's length from the charity for services provided during the fiscal period (other than reimbursement for out-of-pocket expenses)? **3200** Yes No

- C9** Did the charity incur any expenses for compensation of employees during the fiscal period? **3400** Yes No
If yes, you must complete and attach Schedule 3, *Compensation*, to your return.

- C10** Did the charity receive any donations or gifts of any kind valued at \$10,000 or more from any donor that was **not** resident in Canada and was **not** any of the following: **3900** Yes No
- A Canadian citizen, nor
 - Employed in Canada, nor
 - Carrying on a business in Canada, nor
 - A person having disposed of taxable Canadian property?
- If yes, you must complete and attach Schedule 4, *Confidential Data*, 2. Information about Donors Not Resident in Canada, for each donation of \$10,000 or more.**

- C11** Did the charity receive any non-cash gifts (gifts-in-kind) for which it issued tax receipts? **4000** Yes No
If yes, you must complete and attach Schedule 5, *Non-Cash Gifts* to your return.

- C12** Did the charity acquire a non-qualifying security? **5800** Yes No

- C13** Did the charity allow a donor to use any of the charity's property during the fiscal period? (except for permissible uses) **5810** Yes No

- C14** Did the charity issue any of its tax receipts for donations on behalf of another organization? **5820** Yes No

Section D: Financial information

If any of the following applies to your charity, proceed to Schedule 6, *Detailed Financial Information*, and do not complete Section D below. If none of the following applies, complete Section D.

- a) The charity's revenue exceeds \$100,000.
- b) The amount of all property (e.g., investments, rental properties) not used in charitable programs exceeds \$25,000.
- c) The charity currently has permission to accumulate funds during this fiscal period.

Please show all figures to the nearest single dollar.

D1 Was the financial information reported below prepared on an accrual or cash basis?

4020 Accrual Cash

D2 Summary of financial position:

Using the charity's own financial statements, provide the following:

Does the charity own land and/or buildings?

4050 Yes No

Total assets (including land and buildings)

4200 \$ _____

Total liabilities

4350 \$ _____

Did the charity borrow from, loan to, or invest assets with any non-arm's length parties?

4400 Yes No

D3 Revenue:

Did the charity issue tax receipts for donations?

4490 Yes No

If yes, what is the total eligible amount of all donations for which the charity issued tax receipts

4500 \$ _____ 0

Total amount of 10 year gifts received

4505 \$ _____ 0

Total amount received from other registered charities

4510 \$ _____ 0

What is the total amount for all other donations received for which a tax receipt was not issued by the charity? (excluding amounts at lines 4575 and 4630)

4530 \$ _____

Did the charity receive any revenue from any level of Canadian government?

4565 Yes No

If yes, total amount received

4570 \$ _____

Total non tax-receipted amounts from all sources outside Canada (government and non-government).

4575 \$ _____

Total non tax-receipted amounts from fundraising

4630 \$ _____ 0

Total revenue from sale of goods and services (except to any level of Canadian government).

4640 \$ _____

Other amounts not already included in the amounts above

4650 \$ _____

Total revenue (Add lines 4500 to 4650, excluding line 4505)

4700 \$ _____ 0

D4 Expenditures:

What was the charity's total expenditure on professional and consulting fees?

4860 \$ _____

What was the charity's total expenditure on travel and vehicles?

4810 \$ _____

All other expenditures not already included in the amounts above (excluding gifts to qualified donees)

4920 \$ _____

Total expenditures (excluding gifts to qualified donees) (Add lines 4860, 4810, and 4920)

4950 \$ _____

Of the total amount at line 4950:

a) How much did the charity spend on charitable programs?

5000 \$ _____ 0

b) How much did the charity spend on management and administration?

5010 \$ _____

Total amount of gifts made to all qualified donees

5050 \$ _____ 0

Total expenditures (Add lines 4950 and 5050)

5100 \$ _____ 0

Section E: Certification

This return **must** be signed by a director/trustee or like official of the registered charity 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 form, the basic information sheet, and any attachment is, to the best of my knowledge, correct, complete, and current.

Name (please print): Blake Bromley	
Position in charity: Director	Date: 2012/11/14

Section F: Confidential Data

T3010, Registered Charity Information Return, checklist

- Have you confirmed that all charity information included in the Form TF725, **Registered Charity Basic Information Sheet** (BIS) is correct?
 - Some changes can be made **directly** on the BIS.
- Have you attached Form TF725, *Registered Charity Basic Information* sheet (BIS)?
- Has the charity made any amendments to its governing documents during the fiscal period?
 - **If yes**, have you sent us an official copy of the amended governing documents in a separate envelope?
- Have you completed Schedule 1, *Foundations*, if required?
- Have you attached Form T1235, *Directors/Trustees and Like Officials Worksheet*?
- Have you attached Form T1236, *Qualified Donees Worksheet/Amounts Provided to Other Organizations*, if required?
- Have you completed Schedule 2, *Activities Outside Canada*, if required?
- Have you completed Schedule 3, *Compensation*, if required?
- Have you completed Schedule 4, *Confidential Data*, if required?
- Have you completed Schedule 5, *Non-Cash Gifts*, if required?
- Have you completed Schedule 6, *Detailed Financial Information*, if required?
- Have you attached a copy of the charity's financial statements?

- 1** Did the foundation acquire control of a corporation in the fiscal period? **100** Yes No
- 2** Did the foundation incur any debts at any time during the fiscal period other than for current operating expenses, purchasing or selling investments, or in administering charitable programs? **110** Yes No

For private foundations only:

- 3** At any time during the fiscal period, did the foundation hold any shares, rights to acquire shares, or debts owing to it that meet the definition of a non-qualified investment? **120** Yes No
- 4** Did the foundation own more than 2% of any class of shares of a corporation at any time during this fiscal period? **130** Yes No

If **yes**, you must complete and attach *Form T2081, Excess Corporate Holdings Worksheet*, to your return.
(Note: Only private foundations will have this worksheet included in their return package.)

Activities Outside Canada

Schedule 2

For more information about carrying on programs outside Canada see the Charities Directorate website at www.cra.gc.ca/charities

- 1** What were total expenditures on activities/programs/projects carried on outside Canada during the fiscal period, excluding gifts to qualified donees? **200** \$ _____
- 2** Were any of the charity's resources provided for programs outside Canada under any kind of an arrangement including a contract, agency agreement, or joint venture to any other individual or entity (excluding gifts to qualified donees)? **210** Yes No

If **yes**, enter the amounts of the total reported on line 200 transferred to these individuals/organizations as required in the following table.

Name of individual/organization	Using the list on the reverse, identify country code where activities were carried on.	Amount (\$) Show amounts to the nearest single dollar.

- 3** Using the list on the reverse, identify the countries where the charity itself carried on programs or provided any of its resources. Enter the appropriate country codes in the following spaces.

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- 4** Are any projects undertaken outside Canada funded by the Canadian International Development Agency (CIDA)? **220** Yes No
- If **yes**, what was the total amount of funds expended under this arrangement? **230** \$ _____

- 5** Were any programs carried on outside Canada carried out by employees of the charity? **240** Yes No

- 6** Were any programs carried on outside Canada carried out by volunteers of the charity? **250** Yes No

- 7** Is the charity exporting goods as part of its charitable programs? **260** Yes No

If **yes**, list the items being exported, their value, their destination (city/region) and country code.

Item	Value	Destination (city/region)	Country code

COUNTRY CODES

Americas-Central and South

AR-Argentina
 BO-Bolivia
 BR-Brazil
 CL-Chile
 CO-Columbia
 CR-Costa Rica
 CU-Cuba
 DO-Dominican Republic
 EC-Ecuador
 SV-El Salvador
 GT-Guatemala
 GY-Guyana
 HT-Haiti
 HN-Honduras
 JM-Jamaica
 MX-Mexico
 NI-Nicaragua
 PA-Panama
 PE-Peru
 UY-Uruguay
 VE-Venezuela
 QM-Other

Americas-North

US-United States of America
 QN-Other

Middle East

IR-Iran
 IQ-Iraq

IL-Israel
 PS-Israeli Occupied Territories
 JO-Jordan
 KW-Kuwait
 LB-Lebanon
 OM-Oman
 QA-Qatar
 SA-Saudi Arabia
 SY-Syrian Arab Republic
 YE-Yemen
 QO-Other

Europe

AL- Albania
 AM-Armenia
 BA-Bosnia and Herzegovina
 BY-Belarus
 BG-Bulgaria
 DK-Denmark
 ES-Spain
 FR-France
 GE-Georgia
 DE-Germany
 GB-United Kingdom
 HR-Croatia
 IT-Italy
 CY-Cyprus
 MK-Macedonia
 ME-Montenegro
 NL-Netherlands
 PL-Poland
 RO-Romania

RU-Russia
 RS-Serbia
 TR-Turkey
 UA-Ukraine
 QP-Other

Asia and Oceania

AF- Afghanistan
 AZ-Azerbaijan
 BD-Bangladesh
 BT-Bhutan
 KH-Cambodia
 CN-China
 IN-India
 ID-Indonesia
 KZ-Kazakhstan
 KG-Kyrgyzstan
 LA-Laos
 LK-Sri Lanka
 MY-Malaysia
 MN-Mongolia
 MM-Myanmar (Burma)
 KP-North Korea
 KR-South Korea
 PK-Pakistan
 PH-Philippines
 SG-Singapore
 TH-Thailand
 TJ-Tajikistan
 TL-Timor-Leste
 UZ-Uzbekistan
 VN-Vietnam
 QR-Other

Africa

DZ-Algeria
 AO-Angola
 BW-Botswana
 CM-Cameroon
 CF-Central African Republic
 TD-Chad
 CG-Republic of Congo
 CD- Democratic Republic of Congo
 EG-Egypt
 ET-Ethiopia
 GA-Gabon
 GM-Gambia
 GH-Ghana
 NA-Namibia
 KE-Kenya
 LR-Liberia
 MG-Madagascar
 NE-Niger
 NG-Nigeria
 RW-Rwanda
 SL-Sierra Leone
 SO-Somalia
 SD-Sudan
 UG-Uganda
 ZM-Zambia
 ZW-Zimbabwe
 QS-Other

Compensation

Schedule 3

1 (a) Enter the **number** of permanent, full-time, compensated positions in the fiscal period. This number should represent the number of positions the charity had including both managerial positions and others, and should not include independent contractors. **300**

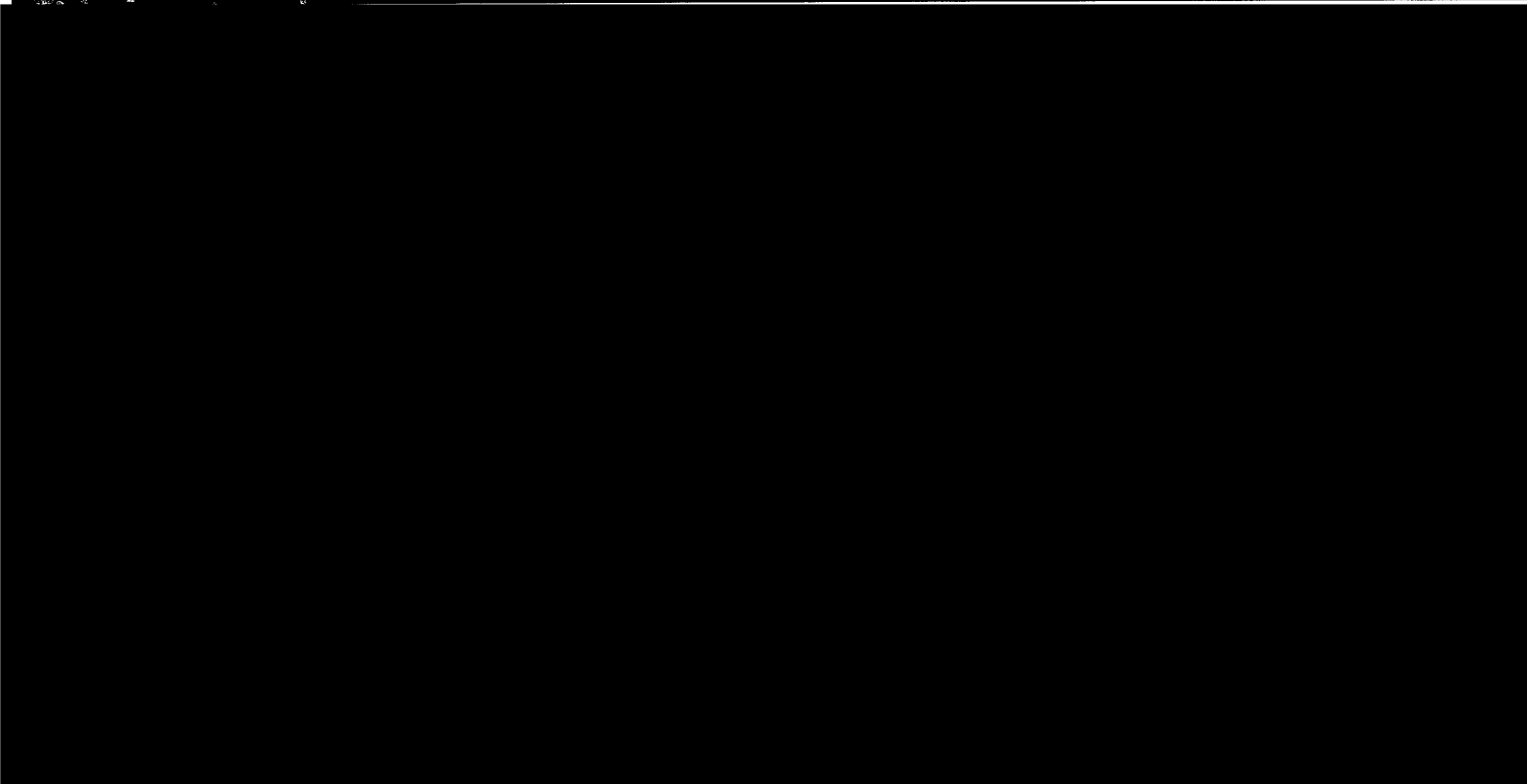
(b) For the **ten (10)** highest compensated, permanent, full-time positions enter the **number** falling within each of the following annual compensation categories.

305	\$1 – \$39, 999	310	\$40,000 – \$79,999	315	\$80,000 – \$119,999
320	\$120,000 – \$159,999	325	\$160,000 – \$199,999	330	\$200,000 – \$249,999
335	\$250,000 – \$299,999	340	\$300,000 – \$349,999	345	\$350,000 and over

2 (a) Enter the **number** of part-time or part-year (for example, seasonal) employees the charity employed during the fiscal period **370**

(b) What was the total expenditure on compensation for part-time or part-year employees in the fiscal period? **380**\$

3 What was the charity's total expenditure on all compensation in the fiscal period? **390**\$



Non-Cash Gifts

Schedule 5

1 Identify all types of non-cash gifts (gifts-in-kind) received for which a tax-receipt was issued:

- 500 Artwork/wine/jewellery
- 505 Building materials
- 510 Clothing/furniture/food
- 515 Vehicles
- 520 Cultural properties
- 525 Ecological properties
- 530 Life insurance policies
- 535 Medical equipment/supplies
- 540 Privately-held securities
- 545 Machinery/equipment (including computers and software)
- 550 Publicly traded securities/mutual funds
- 555 Books (literature, comics)
- 560 Other
- 565 Specify: _____

2 Indicate the total eligible amount of tax receipted non-cash gifts

Was the financial information reported below prepared on an accrual or cash basis?

4020 Accrual Cash

Statement of financial position

Show figures to the nearest single dollar.

Assets:

Cash, bank accounts, and short-term investments	4100\$	2,920,665
Amounts receivable from non-arm's length parties	4110\$	
Amounts receivable from all others	4120\$	1,790,492
Investments in non-arm's length parties	4130\$	
Long-term investments	4140\$	250,100
Inventories	4150\$	
Land and buildings in Canada	4155\$	
Other capital assets in Canada	4160\$	
Capital assets outside Canada	4165\$	
Accumulated amortization of capital assets	4166\$	
Other assets	4170\$	
10 year gifts	4180\$	
Total assets (add lines 4100 to 4170)	4200\$	4,961,257

Liabilities:

Accounts payable and accrued liabilities	4300\$	1,776
Deferred revenue	4310\$	
Amounts owing to non-arm's length parties	4320\$	
Other liabilities	4330\$	
Total liabilities (add lines 4300 to 4330)	4350\$	1,776

Amount included in lines 4150, 4155, 4160, 4165 and 4170 not used in charitable programs

	4250\$	
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Statement of operations

Revenue:

Total eligible amount of all gifts for which the charity issued tax receipts		4500\$	78,850
Total eligible amount of tax-receipted tuition fees	5610\$		
Total amount of 10 year gifts received	4505\$		
Total amount received from other registered charities		4510\$	
Total other gifts received for which a tax receipt was not issued by the charity		4530\$	175,000
Total revenue received from federal government		4540\$	
Total revenue received from provincial/territorial governments		4550\$	
Total revenue received from municipal/regional governments		4560\$	
Total revenue received from all sources outside Canada		4575\$	
Total interest and investment income received or earned		4580\$	39,836
Gross proceeds from disposition of assets	4590\$	19,837,889	
Net proceeds from disposition of assets (show a negative amount with brackets)		4600\$	9,491,266
Gross income received from rental of land and/or buildings		4610\$	
Non tax-receipted revenues received for memberships, dues, and association fees		4620\$	
Total non tax-receipted revenue from fundraising		4630\$	
Total revenue from sale of goods and services (except to government)		4640\$	
Other revenue not already included in the amounts above		4650\$	(814,533)
Specify type(s) of revenue included in the amount reported at 4650 (e.g., dividends)	4655	Unrealized loss on investments and foreign e)	
Total revenue (add lines 4500, 4510 to 4580, and 4600 to 4650)		4700\$	8,970,419

Expenditures:

Advertising and promotion		4800\$	
Travel and vehicle expenses		4810\$	3,066
Interest and bank charges		4820\$	2,095
Licences, memberships, and dues		4830\$	3,389
Office supplies and expenses		4840\$	
Occupancy costs		4850\$	
Professional and consulting fees		4860\$	1,230,308
Education and training for staff and volunteers		4870\$	
Total expenditure on all compensation (enter the amount reported at line 390 in Schedule 3 if applicable)		4880\$	
Fair market value of all donated goods used in charitable programs		4890\$	
Total cost of all purchased supplies and assets		4891\$	

Amortization of capitalized assets		4900 \$	
Total expenditure for research grants and scholarships as part of charitable programs		4910 \$	
Other expenditures not included in the amounts above (excluding gifts to qualified donees)		4920 \$	
Specify type(s) of expenditures included in the amount reported at 4920	4930		
Total expenditures before gifts to qualified donees (add lines 4800 to 4920)		4950 \$	1,238,858

Lines 5000 to 5040 represent a breakdown of the expenditures on lines 4800 to 4920. The total of lines 5000 to 5040 should equal line 4950.

Total expenditures on charitable programs	5000 \$	
Total expenditures on management and administration	5010 \$	1,238,858
Total expenditures on fundraising	5020 \$	
Total expenditures on political activities, inside or outside Canada	5030 \$	
Total other expenditures included in line 4950	5040 \$	
Total amount of gifts made to all qualified donees	5050 \$	18,263,450
Total expenditures (add amounts from line 4950 and 5050)	5100 \$	19,502,308

Other financial information

Permission to accumulate property:

Only registered charities that have written permission to accumulate should complete this section.

- Enter the amount accumulated for the fiscal period, including income earned on accumulated funds
- Enter the amount disbursed for the fiscal period for the specified purpose we have permitted

5500 \$	0
5510 \$	0

Permission to reduce disbursement quota:

If the charity has received approval from the Charities Directorate to make a reduction to its disbursement quota, enter the amount for the fiscal period

5750 \$	0
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Property not used in charitable activities

Enter the value of property not used for charitable activities or administration during:

- The 24 months before the beginning of the fiscal period
- The 24 months before the end of the fiscal period

5900 \$	18,835,421
5910 \$	10,321,005



Directors/Trustees and Like Officials Worksheet

Enter the prescribed information for each director/trustee and like official of the Agency makes the public information section on this worksheet available to the public. Confidential data, may be shared as permitted by law (e.g. with certain other government departments and agencies). See the reverse of this form for an explanation of terms used.

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Total Number of Directors/Trustees and Like Officials:

Public information			Confidential Data		
Last name:	First name:	Initial:			
Bromley	Blake				
Director/Trustee/Like Officials Term ▶ Start Date: <u>1986/09/22</u> End Date: _____					
Position:	At arm's length with other Directors, etc.?				
Director	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Last name:	First name:	Initial:			
Kruse	Robert				
Director/Trustee/Like Officials Term ▶ Start Date: <u>1998/05/20</u> End Date: _____					
Position:	At arm's length with other Directors, etc.?				
Director	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Last name:	First name:	Initial:			
Richardson	Christopher				
Director/Trustee/Like Officials Term ▶ Start Date: <u>2008/04/14</u> End Date: _____					
Position:	At arm's length with other Directors, etc.?				
Director	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Last name:	First name:	Initial:	Home address – Street number and name:		
Director/Trustee/Like Officials Term ▶ Start Date: _____ End Date: _____			City: _____ Prov/Terr: _____ Postal code: _____		
Position:	At arm's length with other Directors, etc.?		Telephone number: _____ Date of Birth (mandatory for identification): _____		
<input type="checkbox"/> Yes <input type="checkbox"/> No			() - ()		
Last name:	First name:	Initial:	Home address – Street number and name:		
Director/Trustee/Like Officials Term ▶ Start Date: _____ End Date: _____			City: _____ Prov/Terr: _____ Postal code: _____		
Position:	At arm's length with other Directors, etc.?		Telephone number: _____ Date of Birth (mandatory for identification): _____		
<input type="checkbox"/> Yes <input type="checkbox"/> No			() - ()		
Last name:	First name:	Initial:	Home address – Street number and name:		
Director/Trustee/Like Officials Term ▶ Start Date: _____ End Date: _____			City: _____ Prov/Terr: _____ Postal code: _____		
Position:	At arm's length with other Directors, etc.?		Telephone number: _____ Date of Birth (mandatory for identification): _____		
<input type="checkbox"/> Yes <input type="checkbox"/> No			() - ()		
Last name:	First name:	Initial:	Home address – Street number and name:		
Director/Trustee/Like Officials Term ▶ Start Date: _____ End Date: _____			City: _____ Prov/Terr: _____ Postal code: _____		
Position:	At arm's length with other Directors, etc.?		Telephone number: _____ Date of Birth (mandatory for identification): _____		
<input type="checkbox"/> Yes <input type="checkbox"/> No			() - ()		
Last name:	First name:	Initial:	Home address – Street number and name:		
Director/Trustee/Like Officials Term ▶ Start Date: _____ End Date: _____			City: _____ Prov/Terr: _____ Postal code: _____		
Position:	At arm's length with other Directors, etc.?		Telephone number: _____ Date of Birth (mandatory for identification): _____		
<input type="checkbox"/> Yes <input type="checkbox"/> No			() - ()		
Last name:	First name:	Initial:	Home address – Street number and name:		
Director/Trustee/Like Officials Term ▶ Start Date: _____ End Date: _____			City: _____ Prov/Terr: _____ Postal code: _____		
Position:	At arm's length with other Directors, etc.?		Telephone number: _____ Date of Birth (mandatory for identification): _____		
<input type="checkbox"/> Yes <input type="checkbox"/> No			() - ()		

Qualified Donees Worksheet / Amounts



Registered charities may make gifts to qualified donees. Provide the required information for each. See the reverse for explanations of the terms used.

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Total number of Qualified Donees/Other Organizations:

Name of organization: MSC Canada Inc.	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/registration number: <input type="text" value="11904 2489 RR 0001"/>	City and Prov/Terr: <input type="text" value="Mississauga ON"/>
Amount of gifts-in-kind: \$ <input type="text" value="0"/>	Total amount of gifts: \$ <input type="text" value="33,950"/>
Name of organization: Revelstoke Education Foundation	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/registration number: <input type="text" value="85375 9041 RR 0001"/>	City and Prov/Terr: <input type="text" value="Vancouver BC"/>
Amount of gifts-in-kind: \$ <input type="text" value="0"/>	Total amount of gifts: \$ <input type="text" value="10,000"/>
Name of organization: Operation Mobilization	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/registration number: <input type="text" value="10780 1755 RR 0001"/>	City and Prov/Terr: <input type="text" value="Port Colborne ON"/>
Amount of gifts-in-kind: \$ <input type="text" value="0"/>	Total amount of gifts: \$ <input type="text" value="1,000"/>
Name of organization: Child Aid International Fund Society	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/registration number: <input type="text" value="81153 8057 RR 0001"/>	City and Prov/Terr: <input type="text" value="Vancouver BC"/>
Amount of gifts-in-kind: \$ <input type="text" value="0"/>	Total amount of gifts: \$ <input type="text" value="10,000"/>
Name of organization: Open Air Campaigners	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/registration number: <input type="text" value="10780 1458 RR 0001"/>	City and Prov/Terr: <input type="text" value="Wingham ON"/>
Amount of gifts-in-kind: \$ <input type="text" value="0"/>	Total amount of gifts: \$ <input type="text" value="1,000"/>
Name of organization: International Student Ministries	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/registration number: <input type="text" value="12954 3302 RR 0001"/>	City and Prov/Terr: <input type="text" value="Three Hills AB"/>
Amount of gifts-in-kind: \$ <input type="text" value="0"/>	Total amount of gifts: \$ <input type="text" value="5,000"/>
Name of organization: Canadian Sunday School Mission	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/registration number: <input type="text" value="10776 4573 RR 0002"/>	City and Prov/Terr: <input type="text" value="Prince George BC"/>
Amount of gifts-in-kind: \$ <input type="text" value="0"/>	Total amount of gifts: \$ <input type="text" value="400"/>
Name of organization: St Paul's Parish	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/registration number: <input type="text" value="11884 9470 RR 0062"/>	City and Prov/Terr: <input type="text" value="Richmond BC"/>
Amount of gifts-in-kind: \$ <input type="text" value="0"/>	Total amount of gifts: \$ <input type="text" value="100"/>



Qualified Donees Worksheet / Amounts F



Registered charities may make gifts to qualified donees. Provide the required information for each. See the reverse for explanations of the terms used.

Total number of Qualified Donees/Other Organizations:

22 2012-04-30 891106841 RR 0001 0744540

Name of organization: Lighthouse Harbour Ministries	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/registration number: <input type="text" value="11901 9479 RR 0001"/>	City and Prov/Terr: <input type="text" value="North Vancouver BC"/>
Amount of gifts-in-kind: \$ <input type="text" value="0"/>	Total amount of gifts: \$ <input type="text" value="1,000"/>
Name of organization: Family Bible Hour	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/registration number: <input type="text" value="13180 6408 RR 0001"/>	City and Prov/Terr: <input type="text" value="St Catharines ON"/>
Amount of gifts-in-kind: \$ <input type="text" value="0"/>	Total amount of gifts: \$ <input type="text" value="1,000"/>
Name of organization: Timothy Foundation	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/registration number: <input type="text" value="83220 0463 RR 0001"/>	City and Prov/Terr: <input type="text" value="Vancouver BC"/>
Amount of gifts-in-kind: \$ <input type="text" value="18,200,000"/>	Total amount of gifts: \$ <input type="text" value="18,200,000"/>
Name of organization:	Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No
BN/registration number: <input type="text" value="RR"/>	City and Prov/Terr: <input type="text"/>
Amount of gifts-in-kind: \$ <input type="text" value="0"/>	Total amount of gifts: \$ <input type="text" value="0"/>
Name of organization:	Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No
BN/registration number: <input type="text" value="RR"/>	City and Prov/Terr: <input type="text"/>
Amount of gifts-in-kind: \$ <input type="text" value="0"/>	Total amount of gifts: \$ <input type="text" value="0"/>
Name of organization:	Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No
BN/registration number: <input type="text" value="RR"/>	City and Prov/Terr: <input type="text"/>
Amount of gifts-in-kind: \$ <input type="text" value="0"/>	Total amount of gifts: \$ <input type="text" value="0"/>
Name of organization:	Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No
BN/registration number: <input type="text" value="RR"/>	City and Prov/Terr: <input type="text"/>
Amount of gifts-in-kind: \$ <input type="text" value="0"/>	Total amount of gifts: \$ <input type="text" value="0"/>