

REGISTERED CHARITY INFORMATION RETURN

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

Year	Month	Day

2. BN/registration number

RR

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 establishing its independent existence)? If yes, what is the name and BN/registration number of the other charity? ... **1510** Yes No

Name	BN/registration number (##### ##RR#####) RR
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A3 Was the charity linked in a subordinate way 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

Name	BN/registration number (##### ##RR#####) RR
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A4 Has the charity wound-up, dissolved, or terminated operations? (If yes, see the guide.) **1570** Yes No

A5 Has the charity amalgamated, merged, or consolidated with another organization? (If yes, see the guide.) **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 (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, if they are at arm's length from all other members of the governing board and their date of birth. **Only the Public information section on the worksheet is available to the public. The Confidential information section is for the CRA's use only and remains confidential.** Use the worksheet included in the guide or a sheet with 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**. Have you attached the list required above? **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. Describe the charity's **ongoing programs** and **new programs** in the spaces provided below. Do **not** attach additional sheets of paper or annual reports. Do **not** include a description of fundraising activities in this section. Grant-making 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.
- | | | |
|--|---|---|
| 2500 <input type="checkbox"/> Advertisements/posters/flyers/radio or TV commercials | 2560 <input type="checkbox"/> Fundraising dinners/galas/concerts | 2620 <input type="checkbox"/> Telephone solicitations |
| 2510 <input type="checkbox"/> Auctions | 2570 <input type="checkbox"/> Fundraising sales (e.g., cookies, chocolate) | 2630 <input type="checkbox"/> Tournaments/sporting events |
| 2520 <input type="checkbox"/> Bingo/casino nights | 2580 <input type="checkbox"/> Mail campaigns | 2640 <input type="checkbox"/> Walk-a-thons/bike-a-thons (etc.) |
| 2530 <input type="checkbox"/> Collection plates/boxes | 2590 <input type="checkbox"/> Planned-giving programs | 2650 <input type="checkbox"/> Other |
| 2540 <input type="checkbox"/> Door-to-door solicitation | 2600 <input type="checkbox"/> Targeted corporate donations/sponsorships | 2660 Specify: _____ |
| 2550 <input type="checkbox"/> Draws/lotteries | 2610 <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.
- | | | |
|--|---|--|
| 3000 <input type="checkbox"/> Artwork/wine/jewellery | 3040 <input type="checkbox"/> Cultural property | 3080 <input type="checkbox"/> Publicly-traded securities/mutual funds |
| 3010 <input type="checkbox"/> Building materials | 3050 <input type="checkbox"/> Ecological property | 3090 <input type="checkbox"/> Privately-held securities |
| 3020 <input type="checkbox"/> Clothing/furniture/food | 3060 <input type="checkbox"/> Machinery/equipment (including computers/software) | 3100 <input type="checkbox"/> Other |
| 3030 <input type="checkbox"/> Vehicles | 3070 <input type="checkbox"/> Hedge funds/life insurance policies | 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**.
- 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.

Assets		Liabilities	
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 \$	Total liabilities (add lines 4300 to 4330)	4350 \$
Inventories	4150 \$		
Capital assets (at cost or fair market value)	4160 \$		
Other assets	4170 \$		
Total assets (add lines 4100 to 4170)	4200 \$	Amount included in lines 4150, 4160, and 4170 not used in charitable programs	4250 \$

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 \$
Total amount received from other registered charities	4510 \$
Total specified gifts included in line 4510	4520 \$
Total enduring property included in line 4510 (See the guide.)	4525 \$
Total other gifts	4530 \$
Revenue from federal government	4540 \$
Revenue from provincial/territorial governments	4550 \$
Revenue from municipal/regional governments	4560 \$
Total revenue from government (add lines 4540, 4550, and 4560)	4570 \$
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 \$
Total revenue (add lines 4500, 4510, 4530, 4570, 4580, and 4600 to 4650)	4700 \$
Expenditures (Enter all expenditures, whether or not on charitable programs)	
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	4900 \$
Research grants and scholarships as part of charitable programs	4910 \$
Other expenditures	4920 \$
Total expenditures before gifts to qualified donees (add lines 4800 to 4920)	4950 \$
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 expenditures included in line 4950	5040 \$
Total gifts to qualified donees excluding enduring property	5050 \$
Total enduring property transferred to qualified donees (See the guide.)	5060 \$
Total specified gifts to qualified donees (See the guide.)	5070 \$
Total expenditures (add lines 4950, 5050, 5060 and 5070)	5100 \$

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

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 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 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 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 (<i>please print</i>)	<input type="text"/>	Position in charity	<input type="text"/>
Signature	<input type="text"/>	Date signed	<input type="text"/>

Section I – Confidential Data

I1	Physical location (address) of the charity (<i>Do not use rural route or post office box numbers.</i>)
Number, street, apt. no., or lot and concession no.	<input type="text"/>
City	<input type="text"/>
Province or territory and postal code	Postal code: <input type="text"/>
I2	Location of the charity's books and records
Number, street, apt. no., or lot and concession no.	<input type="text"/>
City	<input type="text"/>
Province or territory and postal code	Postal code: <input type="text"/>
I3	Name and address of the person who completed this return
Name	<input type="text"/>
Firm name (if applicable)	<input type="text"/>
Number, street, apt. no., R.R. no., or P.O. box no.	<input type="text"/>
City	<input type="text"/>
Province or territory and postal code	Postal code: <input type="text"/>
Phone number	Fax number