

Directors/Trustees and Like Officials Worksheet

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You **must** give us complete information for each director/trustee and like official who, at any time during the fiscal period of this return, was a member of the charity's board of directors/trustees. Directors/trustees and like officials are persons who govern a registered charity. See the reverse for information on filling out this form.

Total number of directors/trustees and like officials:	Charity name:	Business number:	Return for fiscal period ending (YYYY/MM/DD):
<input type="text" value="13"/>	<input type="text" value="Habitat for Humanity Niagara"/>	<input type="text" value="899006191RR0001"/>	<input type="text" value="2020-12-31"/>

Note: If you would like these individuals to have the authority to communicate with the CRA on behalf of your charity, their name must also appear as an owner for your Business Number (BN). For more information, go to canada.ca/charities-giving, select "Operating a registered charity," then "Making a change to your organization" and see "Change director."

Public information				Confidential data			
Last name: GOOBIE		First name: MARK		Residential address – Street number and name: 5811 Young Street			
Term ▶ Start date (Y/M/D): 2019-04-16		End date (Y/M/D): 2020-01-21		City: Smithville		Prov/Terr: ON	Postal code: L0R 2A0
Position: DIRECTOR		At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Phone number (905) 321-7982		Date of birth (Y/M/D): 1974-01-13	
Last name: KRAUSE		First name: CAROLEE		Residential address – Street number and name: 13 Montebello Place			
Term ▶ Start date (Y/M/D): 2019-04-01		End date (Y/M/D):		City: St Catharines		Prov/Terr: ON	Postal code: L2R 6B5
Position: DIRECTOR		At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Phone number (905) 401-8049		Date of birth (Y/M/D): 1970-11-27	
Last name: KULIK		First name: MILES		Residential address – Street number and name: 17 Deerpark Crescent			
Term ▶ Start date (Y/M/D): 2019-04-01		End date (Y/M/D):		City: Fonthill		Prov/Terr: ON	Postal code: L0S 1E1
Position: DIRECTOR		At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Phone number (905) 570-2983		Date of birth (Y/M/D): 1969-12-02	
Last name: LOFORTI LEPP		First name: CINDI		Residential address – Street number and name: 74 GARRISON VILLAGE DR.			
Term ▶ Start date (Y/M/D): 2016-06-21		End date (Y/M/D):		City: N-O-T-L		Prov/Terr: ON	Postal code: L0S 1J0
Position: CHAIR		At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Phone number (905) 329-0353		Date of birth (Y/M/D): 1958-04-24	
Last name: MCLEAN		First name: JEFF		Residential address – Street number and name: 79 Stoney Brook Cr			
Term ▶ Start date (Y/M/D): 2014-10-21		End date (Y/M/D):		City: St. Catharines		Prov/Terr: ON	Postal code: L2S 3R8
Position: DIRECTOR		At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Phone number (905) 684-9221		Date of birth (Y/M/D): 1979-07-04	

Public information				Confidential data				
Last name:	MILLER	First name:	PAUL	Initial:	Residential address – Street number and name:			
Term ▶ Start date (Y/M/D): 2013-09-17 End date (Y/M/D):				69 BEECH ST.		City:	Prov/Terr:	Postal code:
				ST. CATHARINES		ON	L2R 2B8	
Position:	PAST CHAIR	At arm's length with other Directors?		Phone number	(905) 321-4309	Date of birth (Y/M/D):		
		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				1954-05-06		
Last name:	RYAN	First name:	CARL	Initial:	Residential address – Street number and name:			
Term ▶ Start date (Y/M/D): 2007-11-16 End date (Y/M/D):				282 ROACH AVE		City:	Prov/Terr:	Postal code:
				WELLAND		ON	L3C 2W4	
Position:	VICE CHAIR	At arm's length with other Directors?		Phone number	(905) 327-6950	Date of birth (Y/M/D):		
		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				1964-11-08		
Last name:	SNAZYK	First name:	ANDY	Initial:	Residential address – Street number and name:			
Term ▶ Start date (Y/M/D): 2017-10-01 End date (Y/M/D):				3 TULIPTREE RD		City:	Prov/Terr:	Postal code:
				THOROLD		ON	L2V0A6	
Position:	TREASURER	At arm's length with other Directors?		Phone number	(905) 646-8141	Date of birth (Y/M/D):		
		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				1987-05-08		
Last name:	THORSTEINSON	First name:	HARRY	Initial:	Residential address – Street number and name:			
Term ▶ Start date (Y/M/D): 2018-04-01 End date (Y/M/D):				70 MARSDALE DR		City:	Prov/Terr:	Postal code:
				ST. CATHARINES		ON	L2T3S1	
Position:	SECRETARY	At arm's length with other Directors?		Phone number		Date of birth (Y/M/D):		
		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				1942-04-06		
Last name:	WEBB	First name:	CAROLYN	Initial:	Residential address – Street number and name:			
Term ▶ Start date (Y/M/D): 2018-04-17 End date (Y/M/D):				31 VICTORIA TERRACE		City:	Prov/Terr:	Postal code:
				GRIMSBY		ON	L3M2E6	
Position:	DIRECTOR	At arm's length with other Directors?		Phone number	(905) 945-7039	Date of birth (Y/M/D):		
		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				1946-07-24		
Last name:	WIENS	First name:	DAVE	Initial:	Residential address – Street number and name:			
Term ▶ Start date (Y/M/D): 2016-03-22 End date (Y/M/D):				6 RODMAN HALL DR		City:	Prov/Terr:	Postal code:
				ST. CATHARINES		ON	L2S1P2	
Position:	DIRECTOR	At arm's length with other Directors?		Phone number	(905) 658-0739	Date of birth (Y/M/D):		
		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				1954-03-11		
Last name:	DEMIZIO	First name:	FRANK	Initial:	Residential address – Street number and name:			
Term ▶ Start date (Y/M/D): 2015-10-20 End date (Y/M/D):				10 Mussari Court		City:	Prov/Terr:	Postal code:
				Fonthill		ON	L0S1E0	
Position:	DIRECTOR	At arm's length with other Directors?		Phone number	(905) 892-4239	Date of birth (Y/M/D):		
		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				1956-05-28		

Public information		Confidential data		
Last name: MARQUIS		First name: MELISSA		Initial:
Term ▶ Start date (Y/M/D): 2020-03-31		End date (Y/M/D):		
Position: DIRECTOR		At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Last name:		First name:		Initial:
Term ▶ Start date (Y/M/D):		End date (Y/M/D):		
Position:		At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No		
		Residential address – Street number and name: 2426 Third Street Louth		
		City: St. Catharines		Prov/Terr: ON
		Postal code: L2R6P7		
		Phone number (289) 213-0225		Date of birth (Y/M/D): 1977-03-04
		Residential address – Street number and name:		
		City:		Prov/Terr:
		Postal code:		
		Phone number		Date of birth (Y/M/D):

Approval code: 13001



Qualified donees worksheet / Amounts provided to other organizations

Registered charities can make gifts to qualified donees. Enter the required information for gifts made to each qualified donee or other organization. See the reverse for information on filling out this form.

Important: If you submit this form, you **must** answer **Yes** to question C3 in Form T3010 Charities information return for the same fiscal period.

Charity name: Habitat for Humanity Niagara	BN: (9 digits, 2 letters, 4 digits. Example: 123456789RR0001) 899006191RR0001
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Return for fiscal period ending: Year Month Day
2020-12-31

Total number of qualified donees/other organizations: 1

Name of organization: Habitat for Humanity Canada		Associated charity: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number: 11895 0120 RR0001	City and Prov/Terr: Toronto, Ontario		Country:
Amount of non-cash gifts	\$	Total amount of gifts	\$ 20,000.00

Name of organization:		Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number:	City and Prov/Terr:		Country:
Amount of non-cash gifts	\$	Total amount of gifts	\$

Name of organization:		Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number:	City and Prov/Terr:		Country:
Amount of non-cash gifts	\$	Total amount of gifts	\$

Name of organization:		Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number:	City and Prov/Terr:		Country:
Amount of non-cash gifts	\$	Total amount of gifts	\$

Name of organization:		Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number:	City and Prov/Terr:		Country:
Amount of non-cash gifts	\$	Total amount of gifts	\$

Name of organization:		Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number:	City and Prov/Terr:		Country:
Amount of non-cash gifts	\$	Total amount of gifts	\$

Registered Charity Information Return

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Section A: Identification

To help you fill out this form, refer to Guide T4033, Completing the Registered Charity Information Return. It can be found at canada.ca/cra-forms.

Note: Even if a charity is inactive, an information return must be filed to maintain its registered status.

Complete the following:

1. Charity name:

Habitat for Humanity Niagara

2. Return for fiscal period ending:

Year Month Day
2020-12-31

3. BN/registration number:

899006191RR0001

4. Web address (if applicable):

HABITATNIAGARA.CA

A1 Was the charity in a subordinate position to a head body? **1510** Yes No
If yes, give the name and BN/registration number of the organization.

Name: HABITAT FOR HUMANITY CANADA
BN (9 digits, 2 letters, 4 digits. Example: 123456789RR0001): 11895 0120 RR0001

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

A3 Is the charity designated as a public foundation or private foundation? **1600** Yes No

If yes, you must complete Schedule 1, Foundations. To confirm the charity's designation, go to canada.ca/charities-list and refer to the charity's detail page.

Section B: Directors/trustees and like officials

B1 All charities must complete Form T1235, Directors/Trustees and Like Officials Worksheet. Only the public information section of the worksheet is available to the public.

For charities subject to the Ontario Corporations Act.

As of May 15, 2021, the Canada Revenue Agency no longer collects this information on behalf of the Ontario Ministry of Government and Consumer Services. For more information on filing an Ontario annual information return, visit ontario.ca/businessregistry.

Note: If you would like these individuals to have the authority to communicate with the CRA on behalf of your charity, their name must also appear as an owner for your Business Number (BN). For more information, go to canada.ca/charities-giving, select "Operating a registered charity," then "Making a change to your organization" and see "Change director."

Section C: Programs and general information

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

C2 Describe all ongoing and new charitable programs the charity carried on during this fiscal period to further its purpose(s) (as defined in its governing documents). "Programs" includes all of the charitable activities that 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 activities, for example, number of volunteers and/or hours. Do not include the names of employees or volunteers. Grant-making charities should describe the types of organizations they support. Do not describe fundraising activities in this space.

Do not attach additional sheets of paper or annual reports.

Ongoing programs
CONSTRUCTING AND RENOVATING HOMES FOR ECONOMICALLY DISADVANTAGED INDIVIDUALS;
SALE OF DONATED CONSTRUCTION MATERIALS TO THE GENERAL PUBLIC

New programs

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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
Important: If **yes**, you **must** complete Form T1236, Qualified donees worksheet/Amounts provided to other organizations.

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
Important: If **yes**, you **must** complete Schedule 2, Activities outside Canada.

C5 Public policy dialogue and development activities
This question has been removed.

C6 If the charity carried on fundraising activities or engaged third parties to carry on fundraising activities on its behalf, select all fundraising methods that it used during the fiscal period:

- | | | |
|---|---|---|
| 2500 <input checked="" type="checkbox"/> Advertisements/print/radio/TV commercials | 2570 <input checked="" type="checkbox"/> Sales | 2620 <input type="checkbox"/> Telephone/TV solicitations |
| 2510 <input type="checkbox"/> Auctions | 2575 <input checked="" type="checkbox"/> Internet | 2630 <input type="checkbox"/> Tournament/sporting events |
| 2530 <input type="checkbox"/> Collection plate/boxes | 2580 <input checked="" type="checkbox"/> Mail campaigns | 2640 <input checked="" 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 checked="" type="checkbox"/> Targeted corporate donations/sponsorships | 2660 Specify: _____ |
| 2560 <input type="checkbox"/> Fundraising dinners/galas/concerts | 2610 <input checked="" type="checkbox"/> Targeted contacts | |

C7 Did the charity pay external fundraisers? **2700** Yes No
If **yes**, you **must** complete the following lines, and complete Schedule 4, Confidential data, Table 1.

(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) Select the method of payment to the fundraiser:

- | | | |
|--|---|--|
| 2730 <input type="checkbox"/> Commissions | 2750 <input type="checkbox"/> Finder's fee | 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 expenses)? **3200** Yes No

C9 Did the charity incur any expenses for compensation of employees during the fiscal period? **3400** Yes No
Important: If **yes**, you **must** complete Schedule 3, Compensation.

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?

Important: If **yes**, you **must** complete Schedule 4, Confidential data, Table 2, for each donation of \$10,000 or more.

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- C11** Did the charity receive any non-cash gifts for which it issued tax receipts? **4000** Yes No
Important: If yes, you must complete Schedule 5, Non-cash gifts.
- C12** Did the charity acquire a non-qualifying security? **5800** Yes No
- C13** Did the charity allow any of its donors to use any of its property? (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
- C15** Did the charity have direct partnership holdings at any time during the fiscal period? **5830** Yes No

Section D: Financial information

Fill out either Section D or Schedule 6, Detailed financial information.

If **any** of the following applies to the charity, complete Schedule 6 instead of Section D:

- (a) The charity's revenue exceeds \$100,000.
- (b) The amount of all property (for example, investments, rental properties) not used in charitable activities was more than \$25,000.
- (c) The charity had permission to accumulate funds during this fiscal period.

Show all amounts to the nearest single Canadian dollar. Do not enter "See attached financial statements." All relevant fields must be filled out.

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, enter the following:

Did 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 persons? **4400** Yes No

D3 Revenue:

Did the charity issue tax receipts for gifts? **4490** Yes No

If **yes**, enter the total eligible amount of all gifts for which the charity has issued or will issue tax receipts **4500** \$ _____

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 (excluding amounts at lines 4575 and 4630) **4530** \$ _____

Did the charity receive any revenue from any level of government in Canada? **4565** Yes No

If **yes**, total amount received **4570** \$ _____

Total tax-receipted revenue from all sources outside of Canada (government and non-government) **4571** \$ _____

Total **non** tax-receipted revenue from all sources outside of Canada (government and non-government) **4575** \$ _____

Total **non** tax-receipted revenue from fundraising **4630** \$ _____

Total revenue from sale of goods and services (except to any level of government in Canada) **4640** \$ _____

Other revenue not already included in the amounts above **4650** \$ _____

Total revenue (add lines 4500, 4510 to 4570, and 4575 to 4650) **4700** \$ _____

D4 Expenditures:

Professional and consulting fees **4860** \$ _____

Travel and vehicle expenses **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 amount at line 4950:

(a) Total expenditures on charitable activities **5000** \$ _____

(b) Total expenditures on management and administration **5010** \$ _____

Total amount of gifts made to all qualified donees **5050** \$ _____

Total expenditures (add lines 4950 and 5050) **5100** \$ _____

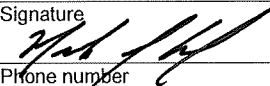
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Section E: Certification

This return must be signed by a person 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 annual return and any attachment is, to the best of my knowledge, correct, complete, and current.

Name (print) Carl, Mark		Signature 
Position in charity CEO	Date 2021-06-24	Phone number (905) 685-7395

Section F: Confidential data

F1 Enter the physical address of the charity and the address in Canada for the charity's books and records. Post office box numbers and rural routes are not sufficient.

	Physical address of the charity	Address for the charity's books and records
Complete street address	150 Bunting Road	150 Bunting Road
City	St. Catharines	St. Catharines
Province or territory and postal code	ON L2P 3G5	ON L2P 3G5

F2 Name and address of individual who completed this return.

Name Timothy Nelles, CPA, CA	
Company name (if applicable) Grant Thornton LLP	
Complete street address 80 King Street, Suite 200	
City, province or territory, and postal code St. Catharines, Ontario, L2R 7G1	
Phone number (905) 323-7162	Is this the same individual who certified in Section E above? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Privacy statement

Personal information is collected under the authority of the Income Tax Act and is used to establish and validate the identity and contact information of directors, trustees, officers, like officials, and authorized representatives of the organization. This information will also be used as a basis for the indirect collection of additional personal information from other internal and external sources, which includes personal tax information, and relevant financial and biographical information. Personal information will be used to assess the risk of registration with respect to the obligations and requirements as outlined in the Act and the common law. The social insurance number (SIN) is collected under subsection 237 of the Act and is used for identification purposes.

The Canada Revenue Agency (CRA) will make the information on this annual information return available to the public on the Charities Directorate website, except for information identified as confidential. Personal information may also be disclosed under information-sharing agreements and in accordance with section 241 of the Act. Incomplete or inaccurate information may result in compliance measures including revocation of registered status.

Personal information is described in personal information bank CRA PPU 200 and is protected under the Privacy Act. Individuals have a right of protection, access to and correction or notation of their personal information. You are entitled to complain to the Privacy Commissioner of Canada regarding our handling of your information.

Notification to directors and like officials: The CRA strongly encourages the organization to voluntarily inform its directors and like officials that it has collected and disclosed their personal information to the CRA.

I confirm that I have read the Privacy statement above.

Checklist

A charity's complete annual information return includes:

- Form T3010, Registered Charity Information Return, and all applicable schedules
- a copy of the charity's financial statements
- Form T1235, Directors/Trustees and Like Officials Worksheet
- Form T1236, Qualified donees worksheet/Amounts provided to other organizations (if applicable)
- Form T2081, Excess Corporate Holdings Worksheet for Private Foundations (if applicable)

If financial statements are not included, the charity's registration may be revoked.

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Foundations **Schedule 1**

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

For private foundations only:

- 3** 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 the fiscal period? **130** Yes No

If yes, you must complete and attach Form T2081, Excess Corporate Holdings Worksheet for Private Foundations.

Activities outside Canada **Schedule 2**

Important: If you complete this section, you **must** answer **yes** to question C4.

For more information, go to canada.ca/charities-giving and see Guidance CG-002, Canadian registered charities carrying on activities outside Canada.

- 1** Total expenditures on activities/programs/projects carried on outside Canada, excluding gifts to qualified donees **200** \$ _____
- 2** Were any of the charity's financial resources spent on programs outside of Canada under any kind of an arrangement including a contract, agency agreement, or joint venture to any other individual or organization (excluding gifts to qualified donees)? **210** Yes No

If yes, provide details of the amount reported in question 1 on line 200, that the charity transferred to these individuals or organizations in the following table:

Name of individual/organization	Country code where the activities were carried out (see list at the end of Schedule 2)	Amount (\$) Show amounts to the nearest Canadian dollar

Important: If you entered information in the table above, you **must** answer **yes** in line 210.

- 3** Using the table below, enter the countries outside Canada where the charity itself carried on programs or devoted any of its resources.

- 4** Were any projects undertaken outside Canada funded by Global Affairs Canada? **220** Yes No
If yes, what was the total amount the charity spent under this arrangement? **230** \$ _____
- 5** Were any of the charity's activities outside of Canada carried out by employees of the charity? **240** Yes No
- 6** Were any of the charity's activities outside of Canada carried out by volunteers of the charity? **250** Yes No
- 7** Did the charity export goods as part of its charitable activities? **260** Yes No

If yes, list the items exported, their destination, the country code, and their value.

Item exported	Destination (city/region)	Country code	Value (CAN \$)

Protected B when completedBN/registration number 899006191RR0001Fiscal period end 2020-12-31**Country codes**

AF-Afghanistan	CU-Cuba	KP-North Korea	RO-Romania
AL-Albania	CY-Cyprus	KR-South Korea	RU-Russia
DZ-Algeria	DK-Denmark	KW-Kuwait	RW-Rwanda
AO-Angola	DO-Dominican Republic	KG-Kyrgyzstan	SA-Saudi Arabia
AR-Argentina	EC-Ecuador	LA-Laos	RS-Serbia
AM-Armenia	EG-Egypt	LB-Lebanon	SL-Sierra Leone
AZ-Azerbaijan	SV-El Salvador	LR-Liberia	SG-Singapore
BD-Bangladesh	ET-Ethiopia	MK-Macedonia	SO-Somalia
BY-Belarus	FR-France	MG-Madagascar	ES-Spain
BT-Bhutan	GA-Gabon	MY-Malaysia	LK-Sri Lanka
BO-Bolivia	GM-Gambia	ML-Mali	SD-Sudan
BA-Bosnia and Herzegovina	GE-Georgia	MU-Mauritius	SY-Syrian Arab Republic
BW-Botswana	DE-Germany	MX-Mexico	TJ-Tajikistan
BR-Brazil	GH-Ghana	MN-Mongolia	TZ-United Republic of Tanzania
BN-Brunei Darussalam	GT-Guatemala	ME-Montenegro	TH-Thailand
BG-Bulgaria	GY-Guyana	MZ-Mozambique	TL-Timor-Leste
BI-Burundi	HT-Haiti	MM-Myanmar (Burma)	TR-Turkey
KH-Cambodia	HN-Honduras	NA-Namibia	UG-Uganda
CM-Cameroon	IN-India	NL-Netherlands	UA-Ukraine
CF-Central African Republic	ID-Indonesia	NI-Nicaragua	GB-United Kingdom
TD-Chad	IR-Iran	NE-Niger	US-United States of America
CL-Chile	IQ-Iraq	NG-Nigeria	UY-Uruguay
CN-China	IL-Israel	OM-Oman	UZ-Uzbekistan
CO-Colombia	PS-Israeli Occupied Territories	PK-Pakistan	VE-Venezuela
KM-Comoros	IT-Italy	PA-Panama	VN-Vietnam
CD-Democratic Republic of Congo	JM-Jamaica	PE-Peru	YE-Yemen
CG-Republic of Congo	JP-Japan	PH-Philippines	ZM-Zambia
CR-Costa Rica	JO-Jordan	PL-Poland	ZW-Zimbabwe
CI-Côte d'Ivoire	KZ-Kazakhstan	QA-Qatar	
HR-Croatia	KE-Kenya	RE-Réunion	

Use the following codes for countries not listed above:

QS-Other countries in Africa

QR-Other countries in Asia and Oceania

QM-Other countries in Central and South America

QP-Other countries in Europe

QO-Other countries in the Middle East

QN-Other countries in North America

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Compensation **Schedule 3**

Important: If you complete this section, you **must** answer **yes** to question C9.

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. **Do not** enter a dollar amount. **300**

(b) For the **ten (10)** highest compensated, permanent, full-time positions enter the **number of positions** that are within each of the following annual compensation categories. **Do not** tick the boxes; use numbers.

305 <input type="text"/> \$1 – \$39,999	310 <input type="text" value="7"/> \$40,000 – \$79,999	315 <input type="text" value="3"/> \$80,000 – \$119,999
320 <input type="text"/> \$120,000 – \$159,999	325 <input type="text"/> \$160,000 – \$199,999	330 <input type="text"/> \$200,000 – \$249,999
335 <input type="text"/> \$250,000 – \$299,999	340 <input type="text"/> \$300,000 – \$349,999	345 <input type="text"/> \$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) Total expenditure on compensation for part-time or part-year employees in the fiscal period. **380** \$

3 Total expenditure on all compensation in the fiscal period. **390** \$

Confidential data **Schedule 4**

Important: If you complete this section, you **must** answer **yes** to question C10.

The information in this schedule is for the CRA's use and may be shared as permitted by law (for example, with certain other government departments and agencies).

1. Information about external fundraisers

Enter the name(s) and arm's length status of each external fundraiser.

Name (confidential)	At arm's length? Yes/No (confidential)

2. Information about donors not resident in Canada

Complete this schedule to report any gift of any kind valued at \$10,000 or more received from any donor that was **not** resident in Canada and was **not** any of the following:

- a Canadian citizen, nor
- employed in Canada, nor
- carrying on business in Canada, nor
- a person having disposed of taxable Canadian property.

Enter the name of each donor and the value of the gift in the table below. Select whether the donor was an organization (for example a business, corporate entity, charity, non-profit organization), a government or an individual.

Name (confidential)	Type of donor (confidential)			Value (CAN \$)
	Organization	Government	Individual	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Non-cash gifts **Schedule 5**

Important: If you complete this section, you **must** answer **yes** to question C11.

1 Select all types of non-cash gifts received for which a tax receipt was issued:

500 <input type="checkbox"/> Artwork/wine/jewellery	525 <input type="checkbox"/> Ecological properties	550 <input type="checkbox"/> Publicly traded securities/ commodities/mutual funds
505 <input checked="" type="checkbox"/> Building materials	530 <input type="checkbox"/> Life insurance policies	555 <input type="checkbox"/> Books
510 <input checked="" type="checkbox"/> Clothing/furniture/food	535 <input type="checkbox"/> Medical equipment/supplies	560 <input type="checkbox"/> Other
515 <input type="checkbox"/> Vehicles	540 <input type="checkbox"/> Privately-held securities	565 Specify: _____
520 <input type="checkbox"/> Cultural properties	545 <input type="checkbox"/> Machinery/equipment/ computers/software	

2 Enter the total amount of tax-receipted non-cash gifts **580** \$

Approval code: 13001

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Detailed financial information **Schedule 6**

Fill out this schedule if **any** of the following applies to the charity:

- (a) The charity's revenue exceeded \$100,000.
- (b) The amount of all property (for example, investments, rental properties) not used in charitable activities was more than \$25,000.
- (c) The charity had permission to accumulate funds during this fiscal period.

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

Statement of financial position

Show all amounts to the nearest single Canadian dollar. Do not enter "see attached financial statements." All relevant fields must be filled out.

Assets:		Liabilities:			
Cash, bank accounts, and short-term investments	4100	\$ 1,332,211	Accounts payable and accrued liabilities	4300	\$ 274,623
Amounts receivable from non-arm's length persons	4110	\$	Deferred revenue	4310	\$ 108,068
Amounts receivable from all others	4120	\$ 247,098	Amounts owing to non-arm's length persons	4320	\$
Investments in non-arm's length persons	4130	\$ 3,956,718	Other liabilities	4330	\$ 2,079,080
Long-term investments	4140	\$	Total liabilities (add lines 4300 to 4330)	4350	\$ 2,461,771
Inventories	4150	\$ 1,981,410			
Land and buildings in Canada	4155	\$			
Other capital assets in Canada	4160	\$ 1,389,449			
Capital assets outside Canada	4165	\$			
Accumulated amortization of capital assets	4166	\$ -971,435	Amount included in lines 4150, 4155, 4160, 4165 and 4170 not used in charitable activities	4250	\$
Other assets	4170	\$ 65,034			
10 year gifts	4180	\$			
Total assets (add lines 4100 to 4170)	4200	\$ 8,000,485			

Statement of operations

Revenue:				
Total eligible amount of all gifts for which the charity has issued or will issue tax receipts			4500	\$ 899,774
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	\$ 615,182
Total other gifts received for which a tax receipt was not issued by the charity (excluding amounts at lines 4575 and 4630)			4530	\$ 109,238
Total revenue received from federal government			4540	\$ 382,242
Total revenue received from provincial/territorial governments			4550	\$
Total revenue received from municipal/regional governments			4560	\$ 34,878
Total tax-receipted revenue from all sources outside of Canada (government and non-government)	4571	\$		
Total non tax-receipted revenue from all sources outside Canada (government and non-government)			4575	\$
Total interest and investment income received or earned			4580	\$
Gross proceeds from disposition of assets	4590	\$		
Net proceeds from disposition of assets (show a negative amount with brackets)			4600	\$
Gross income received from rental of land and/or buildings			4610	\$
Total 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 any level of government in Canada)			4640	\$ 1,400,258
Other revenue not already included in the amounts above			4650	\$ 665,405
Specify type(s) of revenue included in the amount reported at 4650	4655	CMHC forgivable loan, mortgage reserve, undesignated		
Total revenue (add lines 4500, 4510 to 4560, 4575, 4580, and 4600 to 4650)			4700	\$ 4,106,977

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Expenditures:

Advertising and promotion	4800	\$	52,614
Travel and vehicle expenses	4810	\$	49,293
Interest and bank charges	4820	\$	105,445
Licences, memberships, and dues	4830	\$	238,143
Office supplies and expenses	4840	\$	155,929
Occupancy costs	4850	\$	412,903
Professional and consulting fees	4860	\$	47,685
Education and training for staff and volunteers	4870	\$	15,346
Total expenditure on all compensation (enter the amount reported at line 390 in Schedule 3, if applicable)	4880	\$	1,516,345
Fair market value of all donated goods used in charitable activities	4890	\$	
Purchased supplies and assets	4891	\$	
Amortization of capitalized assets	4900	\$	87,473
Research grants and scholarships as part of charitable activities	4910	\$	
All other expenditures not included in the amounts above (excluding gifts to qualified donees)	4920	\$	-93,552
Specify type(s) of expenditures included in the amount reported at 4920	4930		Compensation allocated to inventory
Total expenditures before gifts to qualified donees (add lines 4800 to 4920)	4950	\$	2,587,624

Of the amounts at lines 4950:

(a) Total expenditures on charitable activities	5000	\$	2,527,624
(b) Total expenditures on management and administration	5010	\$	100,000
(c) Total expenditures on fundraising	5020	\$	
(d) Total other expenditures included in line 4950	5040	\$	
Total amount of gifts made to all qualified donees	5050	\$	20,000
Total expenditures (add lines 4950 and 5050)	5100	\$	2,607,624

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 **5500** \$
- Enter the amount disbursed for the fiscal period for the specified purpose **5510** \$

Permission to reduce disbursement quota:

If the charity has received approval to make a reduction to its disbursement quota, enter the amount for the fiscal period . . . **5750** \$

Property not used in charitable activities:

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

- The 24 months before the **beginning** of the fiscal period **5900** \$
- The 24 months before the **end** of the fiscal period **5910** \$