

Place bar code label here

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 cra.gc.ca/E/pub/tg/t4033.

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

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

1. Charity name:

Thompson Nicola Cariboo United Way

2. Return for fiscal period ending:

Year Month Day
2016-12-31

3. BN/registration number:

119278257RR0001

4. Web address (if applicable):

www.unitedwaytnc.ca

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

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

Name: United Way of Canada
BN (if applicable)

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

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

If yes, you must complete Schedule 1, *Foundations*. Refer to Form TF725, *Registered Charity Basic Information Sheet*, to confirm the designation. (Form TF725 is part of the return.)

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. Charities subject to the *Ontario Corporations Act* must also complete Form RC232-WS, *Director/Officer Worksheet and Ontario Corporations Information Act Annual Return*.

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 In the space below, describe all **ongoing** and **new** charitable programs the charity carried on 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:
TO GENERATE RESOURCES AND COLLABORATE WITH OTHERS TO MEET A REGIONAL COMMUNITY IMPACT STRATEGY.

New programs:
N/A

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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
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
If yes, you must complete Schedule 2, *Activities Outside Canada*.

C5 Political Activities

A registered charity may pursue political activities only if the activities are non-partisan, related to its charitable purposes, and limited in extent. A political activity is any activity that explicitly communicates to the public that a law, policy or decision of any level of government inside or outside Canada should be retained, opposed, or changed.

(a) Did the charity carry on any political activities during the fiscal period, including making gifts to qualified donees that were intended for political activities? **2400** Yes No
If yes, you must complete Schedule 7, *Political Activities*.

(b) Total amount spent by the charity on these political activities. **5030** \$

(c) Of the amount at line 5030, the total amount of gifts made to qualified donees. **5031** \$

(d) Total amount received from outside Canada that was directed to be spent on political activities. **5032** \$
If you entered an amount on line 5032 you must complete Schedule 7, *Political Activities*, Table 3.

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 checked="" type="checkbox"/> Advertisements/print/radio/TV commercials | 2570 <input 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 checked="" 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 checked="" 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 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) Tick 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
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?

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 gifts in kind (non-cash gifts) for which it issued tax receipts? **4000** Yes No
If yes, you must complete Schedule 5, *Gifts in kind*.
- 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*.

Skip this section if any of the following applies to the charity:

- (a) The charity's revenue exceeds \$100,000.
- (b) The amount of all property (for example, investments, rental properties) not used in charitable activities is more than \$25,000.
- (c) The charity has 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 issued 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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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 form, the basic information sheet, and any attachment is, to the best of my knowledge, correct, complete, and current.

| | |
|--|--|
| Name (print): Baker, Danalee | Signature:  |
| Position in charity: Executive Director | Date: 2017-06-29 |
| | Telephone number: (250) 372-9933 |

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 | 177 Victoria Street | |
| City | Kamloops | |
| Province or territory and postal code | BC V2C 1Z4 | |

F2 Name and address of individual who completed this return.

| | |
|---|---|
| Name: | |
| Company name (if applicable): BDO Canada LLP | |
| Complete street address: 300-275 Lansdowne Street | |
| City, province or territory, and postal code: Kamloops BC V2C6J3 | |
| Telephone number: (250) 372-9505 | Is this the same individual who certified in Section E? <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 and/or 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 social insurance number (SIN), personal tax information, and relevant financial and biographical information, which may be used to assess the overall risk of registration with respect to the obligations of registration as outlined in the Act and the common law. The social insurance number is collected pursuant to subsection 237 of the Act and is used for identification purposes.

The Canada Revenue Agency (CRA) will make this form and all attachments available to the public on the Charities Directorate website, except for information or data identified as confidential. Personal information may also be disclosed to the organization in question and/or its authorized representatives and other third parties pursuant to the disclosure provisions under Section 241 of the Act. Personal information may also be shared with other government departments and agencies under information-sharing agreements in accordance with the disclosure provisions under Section 241 of the Act. Incomplete or inaccurate information may result in a range of actions including suspension of tax-receipting privileges, up to and including revocation of registered status.

Information is described in Charities Program 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. Please be advised that 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 charity to voluntarily inform directors and like officials that their personal information has been collected and disclosed to the CRA for the submission of its annual information return.

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*;
- Form TF725, *Registered Charity Basic Information Sheet*;
- a copy of the charity's financial statements;
- Form T1235, *Directors/Trustees and Like Officials Worksheet*;
- Form RC232-WS, *Director/Officer Worksheet and Ontario Corporations Information Act Annual Return*, or Form RC232, *Ontario Corporations Information Act Annual Return* (if applicable);
- Form T1236, *Qualified Donees Worksheet/Amounts Provided to Other Organizations* (if applicable); and
- Form T2081, *Excess Corporate Holdings Worksheet for Private Foundations* (if applicable).

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

Approval code: 13001

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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*.

Activities outside Canada **Schedule 2**

For more information about carrying on activities outside of Canada, go to cra.gc.ca/chrts-gvng/chrts/plcy/cgd/tsd-cnd-eng.html.

- 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**, 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 country codes at the end of Schedule 2, enter the code where the activities were carried out. | Amount (\$) Show amounts to the nearest Canadian dollar |
|---------------------------------|---|--|
| | | |
| | | |
| | | |

- 3** Using the list below, enter the country code where the charity itself carried on programs or devoted any of its resources.

| | | | | |
|--|--|--|--|--|
| | | | | |
| | | | | |

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

If **yes**, list the items being exported, their value (in Canadian dollars), their destination and the country code.

| Item | Value | Destination (city/region) | Country code |
|------|-------|---------------------------|--------------|
| | | | |
| | | | |
| | | | |

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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-Columbia | 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**

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** 13

(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 1 \$1 – \$39,999 | 310 10 \$40,000 – \$79,999 | 315 1 \$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** 1

(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** \$ 524,916

Confidential data **Schedule 4**

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 fundraisers

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

| Name | At arm's length? Yes/No |
|------|-------------------------|
| | |
| | |

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 chart below. Tick whether the donor was an organization (for example a business, corporate entity, charity, non-profit organization), a government or an individual.

| Name | Value | 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"/> |

Gifts in kind **Schedule 5**

1 Tick all types of gifts in kind 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 type="checkbox"/> Building materials | 530 <input type="checkbox"/> Life insurance policies | 555 <input type="checkbox"/> Books |
| 510 <input type="checkbox"/> Clothing/furniture/food | 535 <input type="checkbox"/> Medical equipment/supplies | 560 <input checked="" type="checkbox"/> Other |
| 515 <input type="checkbox"/> Vehicles | 540 <input type="checkbox"/> Privately-held securities | 565 Specify: <u>Event Costs</u> |
| 520 <input type="checkbox"/> Cultural properties | 545 <input type="checkbox"/> Machinery/equipment/ computers/software | |

2 Enter the total amount of tax-receipted gifts in kind **580** \$ 1,017

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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 exceeds \$100,000.
- (b) The amount of all property (for example, investments, rental properties) not used in charitable activities is more than \$25,000.
- (c) The charity has 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 | \$ | 18,568 | Accounts payable and accrued liabilities | 4300 | \$ | 143,168 |
| Amounts receivable from non-arm's length persons | 4110 | \$ | | Deferred revenue | 4310 | \$ | 40,000 |
| Amounts receivable from all others | 4120 | \$ | 1,409,689 | Amounts owing to non-arm's length persons | 4320 | \$ | |
| Investments in non-arm's length persons | 4130 | \$ | | Other liabilities | 4330 | \$ | 275,530 |
| Long-term investments | 4140 | \$ | | Total liabilities (add lines 4300 to 4330) | 4350 | \$ | 458,698 |
| Inventories | 4150 | \$ | | | | | |
| Land and buildings in Canada | 4155 | \$ | | | | | |
| Other capital assets in Canada | 4160 | \$ | 35,569 | | | | |
| Capital assets outside Canada | 4165 | \$ | | Amount included in lines 4150, 4155, 4160, 4165 and 4170 not used in charitable activities | 4250 | \$ | |
| Accumulated amortization of capital assets | 4166 | \$ | | | | | |
| Other assets | 4170 | \$ | 15,042 | | | | |
| 10 year gifts | 4180 | \$ | | | | | |
| Total assets (add lines 4100 to 4170) | 4200 | \$ | 1,478,868 | | | | |

Statement of operations

| Revenue: | | | |
|--|-------------|----|--------------------|
| Total eligible amount of all gifts for which the charity issued tax receipts | 4500 | \$ | 1,831,889 |
| 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 (excluding amounts at lines 4575 and 4630) | 4530 | \$ | |
| Total revenue received from federal government. | 4540 | \$ | |
| Total revenue received from provincial/territorial governments | 4550 | \$ | |
| Total revenue received from municipal/regional governments | 4560 | \$ | |
| 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 | \$ | 10,711 |
| 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 | \$ | |
| Other revenue not already included in the amounts above | 4650 | \$ | 300,645 |
| Specify type(s) of revenue included in the amount reported at 4650 | 4655 | | Grants and funding |
| Total revenue (add lines 4500, 4510 to 4560, 4575, 4580, and 4600 to 4650) | 4700 | \$ | 2,143,245 |

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Expenditures:

| | | | |
|--|------|----|-------------------------------|
| Advertising and promotion | 4800 | \$ | 31,155 |
| Travel and vehicle expenses | 4810 | \$ | |
| Interest and bank charges | 4820 | \$ | 15,268 |
| Licences, memberships, and dues | 4830 | \$ | 31,796 |
| Office supplies and expenses | 4840 | \$ | 29,058 |
| Occupancy costs | 4850 | \$ | 45,591 |
| Professional and consulting fees | 4860 | \$ | 39,353 |
| Education and training for staff and volunteers | 4870 | \$ | 18,971 |
| Total expenditure on all compensation (enter the amount reported at line 390 in Schedule 3, if applicable) | 4880 | \$ | 524,916 |
| Fair market value of all donated goods used in charitable activities | 4890 | \$ | |
| Purchased supplies and assets | 4891 | \$ | |
| Amortization of capitalized assets | 4900 | \$ | 10,395 |
| 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 | \$ | 935,607 |
| Specify type(s) of expenditures included in the amount reported at 4920 | 4930 | | Campaign, fundraising, admin, |
| Total expenditures before gifts to qualified donees (add lines 4800 to 4920) | 4950 | \$ | 1,682,110 |

Of the amounts at lines 4950 and 5031 (reported at C5 Political Activities (c)):

| | | | |
|--|-------------|-----------|------------------|
| (a) Total expenditures on charitable activities | 5000 | \$ | 796,738 |
| (b) Total expenditures on management and administration | 5010 | \$ | 372,971 |
| (c) Total expenditures on fundraising | 5020 | \$ | 512,401 |
| (d) Total expenditures on political activities, inside or outside Canada, from question C5 (b) | 5030 | \$ | |
| (e) Total other expenditures included in line 4950 | 5040 | \$ | |
| Total amount of gifts made to all qualified donees | 5050 | \$ | 668,950 |
| Total expenditures (add lines 4950 and 5050) | 5100 | \$ | 2,351,060 |

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

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

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

Protected B when completed

BN/registration number 119278257RR0001

Fiscal period end 2016-12-31

Political activities

Schedule 7

A registered charity may pursue political activities only if the activities are non-partisan, related to its charitable purposes, and limited in extent. A political activity is any activity that explicitly communicates to the public that a law, policy or decision of any level of government inside or outside Canada should be retained, opposed, or changed.

1 Describe the charity's political activities, including gifts to qualified donees intended for political activities, and explain how these relate to its charitable purposes.

2 Identify the way the charity participated in or carried out political activities during the fiscal period.

| | | Resources used Tick all the boxes that apply | | | |
|---|------------|--|--------------------------|--------------------------|--------------------------|
| | | Staff | Volunteers | Financial | Property |
| Media releases and advertisements | 700 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Conferences, workshops, speeches, or lectures | 701 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Publications (printed or electronic) | 702 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Rallies, demonstrations, or public meetings | 703 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Petitions, boycotts (calls to action) | 704 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Letter writing campaign (printed or electronic) | 705 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Internet (website, social media (Twitter, YouTube)) | 706 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Gifts to qualified donees for political activities | 707 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other (specify): | 708 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Funding from outside of Canada for political activities

3 If the charity entered an amount on line 5032, complete the fields below. Enter the political activity that the funds were intended to support, the amount received from each country outside Canada, and the corresponding country code (using the codes provided in Schedule 2). For more information on how to complete this table, see Guide T4033.

| Political activity | Amount | Country Code |
|--------------------|--------|--------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Approval code: 13001

Directors/Trustees and Like Officials Worksheet

Protected B when completed

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 Help for information on filling out this form.

Total number of directors/trustees and like officials:

Place bar code label here

| Public information | | | | Confidential data | | | |
|----------------------------|--|--|--|----------------------------------|--|--|----------------------|
| Last name: Shaver | | First name: Alan | | Initial: | | Home address – Street number and name: 273 Fernie Place | |
| Term ▶ Start date (Y/M/D): | | End date (Y/M/D): | | City: Kamloops | | Prov/Terr: BC | Postal code: V2C 6S4 |
| Position: Board Member | | At arm's length with other Directors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Telephone number: (250) 828-5163 | | Date of birth (Y/M/D): | |
| Last name: Brouwer | | First name: Greg | | Initial: | | Home address – Street number and name: 241 Holloway Drive | |
| Term ▶ Start date (Y/M/D): | | End date (Y/M/D): | | City: Kamloops | | Prov/Terr: BC | Postal code: V1S 0B3 |
| Position: Board Member | | At arm's length with other Directors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Telephone number: (250) 852-1690 | | Date of birth (Y/M/D): | |
| Last name: Clare | | First name: Gerriane | | Initial: | | Home address – Street number and name: 1375 Finlay Ave | |
| Term ▶ Start date (Y/M/D): | | End date (Y/M/D): | | City: Kamloops | | Prov/Terr: BC | Postal code: V2E 2P6 |
| Position: Board Member | | At arm's length with other Directors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Telephone number: (250) 319-6628 | | Date of birth (Y/M/D): | |
| Last name: Hamm | | First name: Homer | | Initial: | | Home address – Street number and name: 1930 Sedgewick Drive | |
| Term ▶ Start date (Y/M/D): | | End date (Y/M/D): | | City: Kamloops | | Prov/Terr: BC | Postal code: V2E 1Z7 |
| Position: Board Member | | At arm's length with other Directors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Telephone number: (250) 374-5473 | | Date of birth (Y/M/D): | |
| Last name: MacInnes | | First name: Hugh | | Initial: | | Home address – Street number and name: 1839 Springhill Drive | |
| Term ▶ Start date (Y/M/D): | | End date (Y/M/D): | | City: Kamloops | | Prov/Terr: BC | Postal code: V2E 1H9 |
| Position: Chair | | At arm's length with other Directors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Telephone number: (250) 819-1423 | | Date of birth (Y/M/D): | |

| Public information | | | Confidential data | | |
|----------------------------|--|----------|---|------------------------|----------------------|
| Last name: Aziz | First name: Jameel | Initial: | Home address – Street number and name: 2103-1030 Talasa Way | | |
| Term ▶ Start date (Y/M/D): | End date (Y/M/D): | | City: Kamloops | Prov/Terr: BC | Postal code: V2H 0C3 |
| Position: Board Member | At arm's length with other Directors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Telephone number: (250) 819-0968 | Date of birth (Y/M/D): | |
| Last name: Fawcett | First name: Jason | Initial: | Home address – Street number and name: 2004 High Canada Place | | |
| Term ▶ Start date (Y/M/D): | End date (Y/M/D): | | City: Kamloops | Prov/Terr: BC | Postal code: V2E 2E3 |
| Position: Board Member | At arm's length with other Directors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Telephone number: (250) 314-7534 | Date of birth (Y/M/D): | |
| Last name: Drennan | First name: Laura | Initial: | Home address – Street number and name: PO Box 231 | | |
| Term ▶ Start date (Y/M/D): | End date (Y/M/D): | | City: Logan Lake | Prov/Terr: BC | Postal code: V0K 1W0 |
| Position: Board Member | At arm's length with other Directors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Telephone number: (250) 377-5635 | Date of birth (Y/M/D): | |
| Last name: Goebel | First name: Lauren | Initial: | Home address – Street number and name: 3369 Duck Range Road | | |
| Term ▶ Start date (Y/M/D): | End date (Y/M/D): | | City: Pritchard | Prov/Terr: BC | Postal code: V0E 2P0 |
| Position: Board Member | At arm's length with other Directors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Telephone number: (250) 828-5500 | Date of birth (Y/M/D): | |
| Last name: Allaire | First name: Jean-Claude | Initial: | Home address – Street number and name: 1300 Finlay Ave | | |
| Term ▶ Start date (Y/M/D): | End date (Y/M/D): | | City: Kamloops | Prov/Terr: BC | Postal code: V2E 2N3 |
| Position: Board Member | At arm's length with other Directors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Telephone number: (819) 570-1666 | Date of birth (Y/M/D): | |
| Last name: Warren | First name: Ray | Initial: | Home address – Street number and name: 2612 Galbraith Drive | | |
| Term ▶ Start date (Y/M/D): | End date (Y/M/D): | | City: Kamloops | Prov/Terr: BC | Postal code: V1S 0A3 |
| Position: Board Member | At arm's length with other Directors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Telephone number: (250) 819-9694 | Date of birth (Y/M/D): | |
| Last name: Chassie | First name: Kari | Initial: | Home address – Street number and name: 1735 Bearcroft Court | | |
| Term ▶ Start date (Y/M/D): | End date (Y/M/D): | | City: Kamloops | Prov/Terr: BC | Postal code: V2B 8M2 |
| Position: Treasurer | At arm's length with other Directors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Telephone number: (778) 470-0027 | Date of birth (Y/M/D): | |

| Public information | | | Confidential data | | |
|----------------------------|--|----------|--|------------------------|----------------------|
| Last name: McClellan | First name: Ashleigh | Initial: | Home address – Street number and name: 2060 Grasslands Blvd | | |
| Term ▶ Start date (Y/M/D): | End date (Y/M/D): | | City: Kamloops | Prov/Terr: BC | Postal code: V2B 0A6 |
| Position: Board Member | At arm's length with other Directors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Telephone number: (250) 318-7262 | Date of birth (Y/M/D): | |
| Last name: Groulx | First name: Leslie | Initial: | Home address – Street number and name: 365 Robson Street | | |
| Term ▶ Start date (Y/M/D): | End date (Y/M/D): | | City: Clearwater | Prov/Terr: BC | Postal code: V0E 1N1 |
| Position: Board Member | At arm's length with other Directors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Telephone number: (250) 674-2780 | Date of birth (Y/M/D): | |
| Last name: Davis | First name: Keith | Initial: | Home address – Street number and name: 2081 Saddleback Drive | | |
| Term ▶ Start date (Y/M/D): | End date (Y/M/D): | | City: Kamloops | Prov/Terr: BC | Postal code: V2B 0B9 |
| Position: Board Member | At arm's length with other Directors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Telephone number: (250) 314-5124 | Date of birth (Y/M/D): | |
| Last name: Hordiuk | First name: Rhonda | Initial: | Home address – Street number and name: 124 Mayfield Ave | | |
| Term ▶ Start date (Y/M/D): | End date (Y/M/D): | | City: Williams Lake | Prov/Terr: BC | Postal code: V2G 2Y3 |
| Position: Board Member | At arm's length with other Directors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Telephone number: (250) 305-6844 | Date of birth (Y/M/D): | |
| Last name: | First name: | Initial: | Home address – Street number and name: | | |
| Term ▶ Start date (Y/M/D): | End date (Y/M/D): | | City: | Prov/Terr: | Postal code: |
| Position: | At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Telephone number: | Date of birth (Y/M/D): | |

Approval code: 13001



Place bar code label here

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 Help for information on filling out this form.

Total number of qualified donees/other organizations:

| | | | |
|---|---|--|--------------|
| Name of organization: ASK Wellness Kamloops | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 65,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|--|---|--|--------------|
| Name of organization: Big Brothers Big Sisters of Kamloops & Region | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 20,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|--------------|
| Name of organization: Boys and Girls Club of Kamloops | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 65,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|--------------|
| Name of organization: Canadian Mental Health Association | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 29,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|--|---|--|--------------|
| Name of organization: Children's Therapy and Family Resource Centre | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 25,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|--------------|
| Name of organization: Chris Rose Therapy centre for Autism | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 30,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|--------------|
| Name of organization: Elizabeth Fry Society | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 35,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|--------------|
| Name of organization: Interior Community Services | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 45,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|--------------|
| Name of organization: Kamloops Aboriginal Friendship Society | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 15,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-------------|
| Name of organization: Kamloops Arts Council | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 8,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|--------------|
| Name of organization: Kamloops Brain Injury Association | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 30,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|--------------|
| Name of organization: Family Tree Family Centre | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 40,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|--------------|
| Name of organization: Kamloops Food Policy Council | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 10,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-------------|
| Name of organization: Kamloops Sexual Assault Counselling Centre | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 9,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|--------------|
| Name of organization: Kamloops YMCA-YWCA | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 29,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|--------------|
| Name of organization: New Life Community Kamloops | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 15,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|--------------|
| Name of organization: School District 73 | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 30,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|--------------|
| Name of organization: ASK Wellness | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 19,300.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|--|---|--|-------------|
| Name of organization: Big Brothers Big Sisters of Kamloops & Region | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 5,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-------------|
| Name of organization: Nicola Family Therapy | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Merritt BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 7,500.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-------------|
| Name of organization: School District 58 | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Merritt BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 7,200.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-------------|
| Name of organization: School District 58 | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Merritt BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 1,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|--------------|
| Name of organization: Logan Lake Wellness health and Youth Society | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Logan Lake BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 25,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-------------|
| Name of organization: School District 74 | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Ashcroft BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 4,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-------------|
| Name of organization: School District 74 | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Ashcroft BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 2,600.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-------------|
| Name of organization: School District 74 | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Ashcroft BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 3,060.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-------------|
| Name of organization: School District 74 | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Ashcroft BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 3,300.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|--|---|--|-------------|
| Name of organization: Winding Rivers Arts and Performance Society | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Ashcroft BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 3,300.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|--|---|--|-------------|
| Name of organization: Winding Rivers Arts and Performance Society | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Ashcroft BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 2,500.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|--|---|--|--------------|
| Name of organization: South Cariboo Elizabeht fry Society | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Ashcroft BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 10,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-----------|
| Name of organization: Village of Cache Creek | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Cache Creek BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 240.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|--|---|--|--------------|
| Name of organization: Big Brothers Big Sisters of Williams Lake | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Williams Lake BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 10,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|--|---|--|--------------|
| Name of organization: Boys and Girls Club of Williams Lake & District | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Williams Lake BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 10,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-------------|
| Name of organization: Williams Lake Hospice Society | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Williams Lake BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 5,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-------------|
| Name of organization: Cariboo Chilcotin Child Development centre | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Williams Lake BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 5,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|--|---|--|-------------|
| Name of organization: Canadian Mental health Association- South Cariboo | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: 100 Mile House | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 2,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|--------------|
| Name of organization: Clearwater Secondary School | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Clearwater BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 11,500.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|--|---|--|-------------|
| Name of organization: Big Brothers Big Sisters of Kamloops & Region | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Kamloops BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 5,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-------------|
| Name of organization: District of Barriere | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Barriere | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 2,370.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-------------|
| Name of organization: Yellowhead Community Services | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Clearwater BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 5,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-------------|
| Name of organization: Yellowhead Community Services | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Clearwater BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 1,500.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-------------|
| Name of organization: Yellowhead Community Services | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Clearwater BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 5,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-------------|
| Name of organization: Yellowhead Community Services | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Clearwater BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 1,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-------------|
| Name of organization: Yellowhead Community Services | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Clearwater BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 5,000.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|---|--|-------------|
| Name of organization: District of Clearwater | | Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: Clearwater BC | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ 6,580.00 |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, enter amount | \$ |

| | | | |
|---|--|---|----|
| Name of organization: | | Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| BN/Registration number: | City and Prov/Terr: | | |
| Amount of gifts in kind | \$ | Total amount of gifts | \$ |
| Was any part of the gift intended for political activities? | <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, enter amount | \$ |

Approval code: 13001

