



REGISTERED CHARITY INFORMATION RETURN

Section A: Identification

• Guide T4033, *Completing the Registered Charity Information Return*, is available through our Forms and publications Web pages at www.cra.gc.ca/charities.
 • The *Privacy Act* protects all personal information given on this form, which is kept in personal information bank CRA PPU 200. The Canada Revenue Agency (CRA) will make this form and all attachments available to the public on the Charities Directorate Web site, except for information or data identified as confidential. All of the information collected on this form may be shared as permitted by law (e.g., with certain other government departments and agencies).

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

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

1. Charity name:
 Bethel Associated Gospel Church

2. Return for fiscal period ending:
 Year: 2 0 1 1 | Month: 0 4 | Day: 3 0

3. BN/registration number:
 106788409 RR 0001

4. Web address (if applicable):
 www.bethelkingston.com

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

Name	BN (if applicable)
------	--------------------

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

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

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

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

Section B: Directors/trustees and like officials

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

Section C: Programs and general information

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

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

Ongoing programs:
 - provide weekly worship services
 - provide ministries for women, men, youth and children on a weekly/monthly basis
 - provide pastoral care
 - donate funds to Missions headquarters for overseas and homeland missionary activities
 - provide housing accommodations for recovering addicts

New programs:

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

C3 Did the charity make gifts or transfer funds to qualified donees or other organizations? **2000** Yes No
 If **yes**, you must complete and attach Form T1236, *Qualified Donees Worksheet/Amounts Provided to Other Organizations*, to your return.

C4 Did the charity carry on, fund, or provide any resources through employees, volunteers, agents, joint ventures, contractors, or any other individuals, intermediaries, entities, or means (other than qualified donees) for any activity/program/project outside Canada? **2100** Yes No
 If **yes**, you must complete and attach Schedule 2, *Activities Outside Canada*, to your return.

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

C5 (a) Did the charity carry on any political activities during the fiscal period? **2400** Yes No
 (b) Enter the total amount spent by the charity on these activities **5030** \$ _____

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

- | | | |
|--|---|---|
| 2500 <input type="checkbox"/> Advertisements/print/radio/TV commercials | 2570 <input checked="" type="checkbox"/> Fundraising sales (e.g., cookies) | 2620 <input type="checkbox"/> Telephone/TV solicitations |
| 2510 <input type="checkbox"/> Auctions | 2575 <input type="checkbox"/> Internet | 2630 <input type="checkbox"/> Tournament/sporting events |
| 2530 <input checked="" type="checkbox"/> Collection plate/boxes | 2580 <input type="checkbox"/> Mail campaigns | 2640 <input type="checkbox"/> Cause-related marketing |
| 2540 <input type="checkbox"/> Door-to-door solicitation | 2590 <input type="checkbox"/> Planned-giving programs | 2650 <input type="checkbox"/> Other |
| 2550 <input type="checkbox"/> Draws/lotteries | 2600 <input type="checkbox"/> Targeted corporate donations/sponsorships | 2660 Specify: _____ |
| 2560 <input 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 and attach Schedule 4, *Confidential Data*, 1. Information about Fundraisers.

(a) Enter the gross revenue collected by the fundraisers on behalf of the charity. **5450** \$ _____
 (b) Enter the amounts paid to and/or retained by the fundraisers. **5460** \$ _____

(c) Identify the method of payment to the fundraiser:

- | | | |
|--|---|--|
| 2730 <input type="checkbox"/> Commissions | 2750 <input type="checkbox"/> Finder's fees | 2770 <input type="checkbox"/> Honoraria |
| 2740 <input type="checkbox"/> Bonuses | 2760 <input type="checkbox"/> Set fee for services | 2780 <input type="checkbox"/> Other |
| | | 2790 Specify: _____ |

(d) Did the fundraiser issue tax receipts on behalf of the charity? **2800** Yes No

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

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

C10 Did the charity receive any donations or gifts of any kind valued at \$10,000 or more from any donor that was **not** resident in Canada and was **not** any of the following: **3900** Yes No
 • A Canadian citizen, nor
 • Employed in Canada, nor
 • Carrying on a business in Canada, nor
 • A person having disposed of taxable Canadian property?

If **yes**, you must complete and attach Schedule 4, *Confidential Data*, 2. Information about Donors Not Resident in Canada, for each donation of \$10,000 or more.

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

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

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

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

Section D: Financial Information

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

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

Please show all figures to the nearest single dollar.

D1 Was the financial information reported below prepared on an accrual or cash basis? 4020 Accrual Cash

D2 Summary of financial position:

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

Does the charity own land and/or buildings? 4050 Yes No
Total assets (including land and buildings) 4200 \$ _____
Total liabilities 4350 \$ _____
 Did the charity borrow from, loan to, or invest assets with any non-arm's length parties? 4400 Yes No

D3 Revenue:

Did the charity issue tax receipts for donations? 4490 Yes No
If yes, what is the total eligible amount of all donations for which the charity issued tax receipts? 4500 \$ _____
 Total amount of 10 year gifts received 4505 \$ _____
 Total amount received from other registered charities 4510 \$ _____
 What is the total amount for all other donations received for which a tax receipt was **not** issued by the charity? (excluding amounts at lines 4575 and 4630) 4530 \$ _____
 Did the charity receive any revenue from any level of Canadian government? 4565 Yes No
If yes, total amount received 4570 \$ _____
 Total non tax-receipted amounts from all sources outside Canada (government and non-government) 4575 \$ _____
 Total non tax-receipted amounts from fundraising 4630 \$ _____
 Total revenue from sale of goods and services (except to any level of Canadian government) 4640 \$ _____
 Other amounts not already included in the amounts above 4650 \$ _____
Total revenue (Add lines 4500 to 4650, excluding line 4505) 4700 \$ _____

D4 Expenditures:

What was the charity's total expenditure on professional and consulting fees? 4860 \$ _____
 What was the charity's total expenditure on travel and vehicles? 4810 \$ _____
 All other expenditures not already included in the amounts above (excluding gifts to qualified donees) 4920 \$ _____
Total expenditures (excluding gifts to qualified donees) (Add lines 4860, 4810, and 4920) 4950 \$ _____
 Of the total amount at line 4950:
 a) How much did the charity spend on charitable programs? 5000 \$ _____
 b) How much did the charity spend on management and administration? 5010 \$ _____
Total amount of gifts made to all qualified donees 5050 \$ _____
Total expenditures (Add lines 4950 and 5050) 5100 \$ _____

Section E: Certification

This return **must** be signed by a director/trustee or like official of the registered charity who has authority to sign on behalf of the charity. **It is a serious offence under the *Income Tax Act* to provide false or deceptive information.**

I certify that the information given on this form, the basic information sheet, and any attachment is, to the best of my knowledge, correct, complete, and current.

Name (please print): Geoff Baker		Signature: <i>G. Baker</i>
Position in charity: Treasurer	Date: 2011-08-11	Telephone No.: 613-387-2043

Section F: Confidential Data

F1 Provide 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
Number, street, apt. no., or lot and concession no.	314 Johnson Street	314 Johnson Street
City	Kingston	Kingston
Province or territory and postal code	Ontario K7L 1Y7	Ontario K7L 1Y7

F2 Name and address of individual who completed this return.

Name:	
Firm name (if applicable): Withey Addison LLP	
Number, street, apt. no., R.R. no., or P.O. box no.: 320-366 King Street East	
City, province or territory, and postal code: Kingston, Ontario K7K 6Y3	
Telephone No.: 613-544-5010	Is this the same individual who certified in Section E? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

T3010, Registered Charity Information Return, checklist

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

Foundations

Schedule 1

- 1** Did the foundation acquire control of a corporation in the fiscal period? **100** Yes No
- 2** Did the foundation incur any debts at any time during the fiscal period other than for current operating expenses, purchasing or selling investments, or in administering charitable programs? **110** Yes No
- For private foundations only:**
- 3** At any time during the fiscal period, did the foundation hold any shares, rights to acquire shares, or debts owing to it that meet the definition of a non-qualified investment? **120** Yes No
- 4** Did the foundation own more than 2% of any class of shares of a corporation at any time during this fiscal period? **130** Yes No

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

Activities Outside Canada

Schedule 2

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

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

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

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

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

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

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

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

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

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

Item	Value	Destination (city/region)	Country code

COUNTRY CODES

Americas-Central and South

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

Americas-North

US-United States of America
 QN-Other

Middle East

IR-Iran
 IQ-Iraq

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

Europe

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

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

Asia and Oceania

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

Africa

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

Compensation

Schedule 3

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

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

305 <input type="text" value="1"/> \$1 – \$39,999	310 <input type="text" value="2"/> \$40,000 – \$79,999	315 <input type="text"/> \$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) What was the total expenditure on compensation for part-time or part-year employees in the fiscal period? **380** \$

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

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

1. Information about Fundraisers

Please provide the name(s) and arm's length status of external fundraiser(s).

Name	At arm's length? Yes/No

2. Information about Donors Not Resident in Canada

Complete this schedule to report any donation of \$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

Provide the name of the donor and the value of the donation in the chart below. You must also indicate whether the donor was an organization (for example a business, corporate entity, charity, non-profit organization), a government or an individual by placing a check mark in the appropriate box.

Name	Amount	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

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

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

2 Indicate the total eligible amount of tax-receipted non-cash gifts **580** \$ _____

Licences, memberships, and dues	4830	\$	1,262
Office supplies and expenses	4840	\$	15,299
Occupancy costs	4850	\$	144,624
Professional and consulting fees	4860	\$	1,050
Education and training for staff and volunteers	4870	\$	
Total expenditure on all compensation (enter the amount reported at line 390 in Schedule 3, if applicable)	4880	\$	237,985
Fair market value of all donated goods used in charitable programs	4890	\$	0
Total cost of all purchased supplies and assets	4891	\$	796

Amortization of capitalized assets	4900	\$	41,367
Total expenditure for research grants and scholarships as part of charitable programs	4910	\$	_____
Other expenditures not included in the amounts above (excluding gifts to qualified donees)	4920	\$	84,262
Specify type(s) of expenditures included in the amount reported at 4920 4930 Christian ed, Church programs, Associated Gospel Church			
Total expenditures before gifts to qualified donees (add lines 4800 to 4920)	4950	\$	548,744

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

Total expenditures on charitable programs	5000	\$	477,232
Total expenditures on management and administration	5010	\$	71,512
Total expenditures on fundraising	5020	\$	_____
Total expenditures on political activities, inside or outside Canada	5030	\$	_____
Total other expenditures included in line 4950	5040	\$	_____
Total amount of gifts made to all qualified donees	5050	\$	70,262
Total expenditures (add amounts from lines 4950 and 5050)	5100	\$	618,006

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 we have permitted. **5510** \$ _____

Permission to reduce disbursement quota:

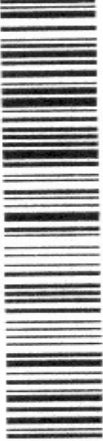
If the charity has received approval from the Charities Directorate to make a reduction to its disbursement quota, enter the amount for the fiscal period

5750 \$ _____

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 **5900** \$ _____ 0
- The 24 months before the **end** of the fiscal period. **5910** \$ _____ 0



Enter the prescribed information for each director/trustee and like official of the charity's board of directors/trustees. The Canada Revenue Agency makes this information available to the public. All the information collected on this form, including the confidential data, may be shared as permitted by law (e.g. with the charity). See the reverse of this form for an explanation of terms used.

Total Number of Directors/Trustees and Like Officials: **3**

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Public Information		Confidential Data	
Last name: Dickey	Initial: J	Home address - Street number and name: 428 Carrie Crescent	Postal Code: K7M 5X5
Director/Trustee/Like Officials Term ▶ Start Date: 2010/05/01	End Date: 2011/04/30	City: Kingston	Prov/Terr: Ontario
At arm's length with other Directors, etc.? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Telephone Number: 613-384-2829	Date of Birth (mandatory for identification): 1962/05/27
Position: Trustee			
Last name: Balson	Initial: C	Home address - Street number and name: 4585 Lower Round Lake Road	Postal Code: K0H 1H0
Director/Trustee/Like Officials Term ▶ Start Date: 2010/05/01	End Date: 2011/04/30	City: Battersea	Prov/Terr: Ontario
At arm's length with other Directors, etc.? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Telephone Number: 613-353-7312	Date of Birth (mandatory for identification): 1961/12/31
Position: Trustee			
Last name: Vilela	Initial:	Home address - Street number and name: 967 Woodbine Road	Postal Code: K7P 2X5
Director/Trustee/Like Officials Term ▶ Start Date: 2010/05/01	End Date: 2011/04/30	City: Kingston	Prov/Terr: Ontario
At arm's length with other Directors, etc.? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Telephone Number: 613-634-8774	Date of Birth (mandatory for identification): 1979/09/03
Position: Trustee			
Last name:	Initial:	Home address - Street number and name:	Postal Code:
Director/Trustee/Like Officials Term ▶ Start Date:	End Date:	City:	Prov/Terr:
At arm's length with other Directors, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No		Telephone Number:	Date of Birth (mandatory for identification):
Position:			
Last name:	Initial:	Home address - Street number and name:	Postal Code:
Director/Trustee/Like Officials Term ▶ Start Date:	End Date:	City:	Prov/Terr:
At arm's length with other Directors, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No		Telephone Number:	Date of Birth (mandatory for identification):
Position:			
Last name:	Initial:	Home address - Street number and name:	Postal Code:
Director/Trustee/Like Officials Term ▶ Start Date:	End Date:	City:	Prov/Terr:
At arm's length with other Directors, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No		Telephone Number:	Date of Birth (mandatory for identification):
Position:			
Last name:	Initial:	Home address - Street number and name:	Postal Code:
Director/Trustee/Like Officials Term ▶ Start Date:	End Date:	City:	Prov/Terr:
At arm's length with other Directors, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No		Telephone Number:	Date of Birth (mandatory for identification):
Position:			
Last name:	Initial:	Home address - Street number and name:	Postal Code:
Director/Trustee/Like Officials Term ▶ Start Date:	End Date:	City:	Prov/Terr:
At arm's length with other Directors, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No		Telephone Number:	Date of Birth (mandatory for identification):
Position:			
Last name:	Initial:	Home address - Street number and name:	Postal Code:
Director/Trustee/Like Officials Term ▶ Start Date:	End Date:	City:	Prov/Terr:
At arm's length with other Directors, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No		Telephone Number:	Date of Birth (mandatory for identification):
Position:			
Last name:	Initial:	Home address - Street number and name:	Postal Code:
Director/Trustee/Like Officials Term ▶ Start Date:	End Date:	City:	Prov/Terr:
At arm's length with other Directors, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No		Telephone Number:	Date of Birth (mandatory for identification):
Position:			

Name of organization: The Navigators of Canada	Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/Registration number: 108089871 RR 0001	City and Prov/Terr: P.O. Box 27070, London, ON N5X 3X5
Amount of gifts-in-kind: \$	Total amount of gifts: \$ 14,340.00
Name of organization: OME International - Canada	Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/Registration number: 107808990 RR 0001	City and Prov/Terr: 5155 Spectrum Way, Bldg 21, Mississauga, ON L4W 5A1
Amount of gifts-in-kind: \$	Total amount of gifts: \$ 8,700.00



Qualified Donees Worksheet / Amounts Pro

Registered charities may make gifts to qualified donees. Provide the required information for 2011-04-30 106788409 RR 0001 0237578
See the reverse for explanations of the terms used.

Total number of Qualified Donees/Other Organizations:

Name of organization: Power to Change Ministries		Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
BN/Registration number: 118827849 RR 0001	City and Prov/Terr.: 20385 64 Avenue, Langley, BC		
Amount of gifts-in-kind	\$	Total amount of gifts	\$ 12,350.00
Name of organization: Pioneers		Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
BN/Registration number: 119160901 RR 0001	City and Prov/Terr.: 51 Byron Avenue, Dorchester, ON N0L 1G2		
Amount of gifts-in-kind	\$	Total amount of gifts	\$ 600.00
Name of organization: Avant Ministries Canada		Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
BN/Registration number: 118942564 RR 0001	City and Prov/Terr.: 2121 Henderson Highway, Winnipeg, MB R2G 1P5		
Amount of gifts-in-kind	\$	Total amount of gifts	\$ 1,200.00
Name of organization: Inter-Varsity Christian Fellowship of Canada		Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
BN/Registration number: 107513160 RR 0001	City and Prov/Terr.: 64 Prince Andrew Place, Kingston, ON K7K 3B1		
Amount of gifts-in-kind	\$	Total amount of gifts	\$ 4,400.00
Name of organization:		Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number: RR	City and Prov/Terr.:		
Amount of gifts-in-kind	\$	Total amount of gifts	\$
Name of organization:		Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number: RR	City and Prov/Terr.:		
Amount of gifts-in-kind	\$	Total amount of gifts	\$
Name of organization:		Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number: RR	City and Prov/Terr.:		
Amount of gifts-in-kind	\$	Total amount of gifts	\$
Name of organization:		Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number: RR	City and Prov/Terr.:		
Amount of gifts-in-kind	\$	Total amount of gifts	\$