



Capital Regional District
Grant-In-Aid Application Form
FOR ELECTORAL AREAS ONLY:

Juan de Fuca

Salt Spring Island

Southern Gulf Islands

[Revised November 16, 2012]

CRD GRANT-IN-AID APPLICATION FORM

Grants-In-Aid are for the CRD Electoral Areas only: Juan de Fuca, Salt Spring Island, and Southern Gulf Islands

Application Submitted By

Name and Address of Applicant: Salt Spring Therapeutic Riding Association
700 Upper Ganges Road, Box 739
Salt Spring Island, BC V8K 1S1

Contact(s): Richard B. Way [REDACTED] [REDACTED]
(name) (phone) (fax)
r-way@ssstra.ca
Email address

Contact(s): Kimberly Lemieux [REDACTED] [REDACTED]
(name) (phone) (fax)
[REDACTED]
Email address

Application Summary

Project or purpose for which you require assistance:

Arena lighting for therapeutic riding lessons.

Amount of grant requested \$ 9,500.00

To the best of my knowledge, all of the information that is provided in this application is true and correct. Furthermore, I hereby certify that this application for assistance is:

- **NOT** being made on behalf of an industrial, commercial, or business undertaking
- **NOT** available for the personal benefit of any individual, proprietor, member or shareholder

Kimberly Lemieux
(signature of authorized signatory)

Secretary
(title)

Kimberly Lemieux
(print name)

Applicant Profile

1. Please describe the services / benefits that your organization provides to the community. Are these services / benefits available to the community from another organization or agency?

The Salt Spring Therapeutic Riding Association (SSTRA) is the only riding organization on the island that offers specialized equine-assisted programs to enhance the lives of individuals aged 6 to 65 who identify as neurodivergent (including Autism, ADHD, acquired or traumatic brain injury), as well as those living with other intellectual and physical challenges. Our instructors provide personalized, client-centered riding lessons that have many physical benefits (improved muscle tone and development, balance, posture and coordination) and psychological benefits (improved cognitive functioning, socialization and interpersonal skills, emotional intelligence and perception of quality of life). Research shows that interacting with horses, whether through riding or on the ground through grooming and other activities, can help with nervous system regulation and growth in empathy, trust, and self-confidence.

2. Describe the geographic area that receives services or benefits from your organization.

Salt Spring Island

3. Is your organization voluntary and non-profit? ☐ NO ☒ YES

Please detail any remuneration paid, or funds otherwise made available to members, officers, etc. of your organization.

N/A

Please indicate the number of members / volunteers in your organization and how long your organization has been in operation.

We have: 7 Board Members; 40 Membership; 18 Horse care volunteers; and, 12 Volunteer Horse leaders for lessons.

SSTRA has been providing these equine therapeutic sessions for 25 years. We also have two contract employees - a barn manager, who also teaches lessons, and a therapeutic riding instructor.

Project / Proposal Profile

1. Assistance is being requested for:

capital project and / or equipment

special event

other purpose (Purchase of and Installation of lighting in riding arena)

2. Please describe the proposal for which you are requesting assistance. Attach additional information if required.

To serve our Island community better, we request funds to purchase and install arena lighting, which will allow us to expand our operating hours.

Recently, SSTRRA has experienced a refresh. Our new board wishes to improve the organization's operations and expand its therapeutic lesson offerings.

To aid us in expanding our program, we would like to add arena lighting which will extend SSTRRA's working day. As 95% of our students are in public school, our after-school lesson slots are always at a premium. In the winter, when daylight is scant, our after-school operation window shrinks significantly. With arena lighting, we will be able run lessons in the evening, which will enable more children/youth to enroll in our sessions.

We have attached a project budget spreadsheet and quotes to support our request.

We have budgeted for the following: trenching for electrical wires, purchase and installation of lighting, aerial work platform rental, permits, travel. Please see attached.

3. Please describe how this proposal will benefit the community.

SSTRRA's mandate is to support both the emotional and physical development of our riders through the delivery of structured programming in a caring and inclusive environment. By striving to enhance our students' well-being, we are, by extension, enhancing the well-being of our Salt Spring Island community.

Arena lighting will help SSTRRA expand its program and improve community outreach in two ways: 1) Increased enrollment and 2) Subsidized lessons. We plan to use additional revenue gained through our expanded offerings to subsidize lessons for those in our community in need of both compassionate and financial assistance.

Funding and Financial Information

1. Attach supporting financial information, i.e., budget / financial report. Ensure the following information is clearly itemized;
 - project budget,
 - grants / funding from other sources,
 - funding contributed by applicant through fund raising activities or other sources of revenue and,
 - financial statement that itemizes total expenses for the fiscal year, including any monies and/or benefits paid to members or officers.

2. Have you applied for a grant / funding from another source(s)? ☒ NO ☐ YES

If yes, complete the following chart. **If no**, please explain This grant is for a specific project (necessary lighting), rather than operations.

Name of Grant or Funding Agency	\$ Amount Applied For	Status of Grant Application		
		Approved (Y)	Denied (Y)	Pending (Y)
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. Have you received assistance (grant in aid / waiving of fees, etc.), from the CRD in previous years?

☒ NO ☐ YES..... **If yes**, please complete the following chart.

Year	\$ Amount	Purpose for which assistance was used

4. Does your organization:

Offer direct financial assistance to individuals or families? ☐ Yes ☒ No

Provide services that fall within the mandate of either
a senior government or a local service agency? ☒ Yes ☐ No

Provide an opportunity for individuals to make direct
Contributions to the project (e.g., fundraising for the project)? ☒ Yes ☐ No

Or, is your organization:

part of a Provincial or National fund raising campaign? ☐ Yes ☒ No

The information provided in Section 4 is for data collection purposes.

Followup:

Please refer to Page 6 of the ***Grant-In-Aid - Application Completion Guide*** regarding the following:

1. Acknowledgement

2. Reporting

Please remember to attach.

Item	Cost (CAD)
Lights & Electrical Supply	3200
Labour to Install	1400
Ferry	100
Electrical Permit	495
Reflectors for lights	360
Power Box & supplies	945
Labour	500
Trenching	1509
Emergency Lighting	150
Hi-Reach rental & delivery	850
Total	9509
Total Ask for this project	9500



Lumley Electrical
Owner

Address : 1094 Marchmont rd Duncan BC V9L2M9 **Phone:** 2508157588

Email: Adam_Lumley@hotmail.com

April 10/25

Electrical Quote For :

SS Therapeutic Riding :

700 Upper Ganges Rd
Salt Spring Island BC V8K 1S1
Canada

From : Lumley Electrical

Install 6 high bay lights including switching from nearby building.

Supplies needed :

6 - Rabb rh1s-led-150-a100 (HighBay light)

1 - 15/20 , 20/15 amp tandem -

40m - 10/3 Nmwu

12/2 bx - 150m -

16 , Bx connectors straight -

12 , Bx 90 connectors-

6- Octagon boxes -

6 - Octagon cover -

1 - PVC lb 3/4 -

4 - PVC 90 -

8 - Pvc ta 3/4 -

16 - 3/4 pvc straps -

Strain relief x 2 -

2 gan pvc device box -

2 gan pvc switch cover -

2 - toggle switches -

Pvc pipe X 2 -

Pvc 4x4 or 6x6 Chain -
1/8 small roll -

Supply total -

\$3200.00

Labour - 16 hours -

\$1400.00

Ferry -

\$100.00

Grand total electrical cost for above :

\$4700.00

Additional fee - Electrical Permit -

Technical safety BC-

\$495.00

Optional ** Refectors for high bay lighting -

6 - Reflectors - 2 week wait - \$360.00

Second Quote for :

Additional - Power Feed - power box -

Power Box - 60-100amp siemens -

40m - 6/3 ACWU -

Lb metal -

2- Teck connectors -

60amp Breaker - square D - 3/4-4"

Nipple / lock rings -

Total supplies - \$945.00

Labour cost - \$500.00

Grand total - \$1445.00



Estimate

Deliver To
700 Upper ganges rd BC

Number: SE-2702
Reference: power trench
Issued: 15 Apr 2025
Expiry Date: 15 May 2025

Therapeutic Riding center
700 Upper ganges rd BC

Diggin' It Excavating
PO Box 507
Salt Spring Island BC V8K 2W2
Canada

www.digginitssi.com
250-537-6027
14digginit@gmail.com
GST/HST 819218785 RT 0001

Item	Qty/Hrs	Price/Rate	Sales Tax	Net
CAT				
303.5E				
Mini				
Excavator				
Delivery				
Small				
Equipment				
Sand No 1				
Sand No 1 Delivered				
4 yd Truck				
4 yd Truck				
Total Net				1,438.00
GST 5.00%				71.90
Estimate Total				1,509.90
Total to Pay				\$1,509.90

Comments

All prices are subject to change due to fluctuating supplier markets and can only be guaranteed for 30 days from date of issue.

Terms and Conditions

This estimate includes all the parts, labour and machine time required to complete the project as described. It does NOT, however, include electrical and structural work, and/or septic tank pumping. Changes to the project made by the owner, designer and/or engineer will result in a recalculation of the estimate. The estimate is also subject to change due to unforeseen circumstances including, weather and/or ground conditions. In such an event, Diggin' It will promptly identify the issue and discuss the ramifications before continuing with the project as described.

Please let me know if I can assist you in any other way or answer any questions you might have.

SALTSPRING THERAPEUTIC RIDING ASSOCIATION

PO Box #739
STN Ganges
Salt Spring Island, BC
V8K 2W3

April 3, 2025

McLean, Lizotte, Wheadon and Company
340 Lower Ganges Road
Salt Spring Island British Columbia V8K 2V3

Attention: Frédéric Lizotte, CPA, CGA

Dear Sir:

Further to the engagement letter dated December 13, 2021, we acknowledge that we are responsible for:

- a. The compiled financial information;
- b. Selecting the basis of accounting to be applied in the preparation of the compiled financial information that is appropriate for the intended use;
- c. The accuracy and completeness of the information provided to you; and
- d. Attaching the compilation engagement report when distributing or reproducing the compiled financial information.

Further, we confirm, to the best of our knowledge and belief, the following representations made by us to you during your compilation of the financial information:

Approved the accounting prepared by the firm

We have reviewed, approved and recorded all of the following:

- a. Adjusting journal entries you prepared or changed;
- b. Account codes you determined or changed;
- c. Transactions you classified; and
- d. Accounting records you prepared or changed.

Accounting and financial records

All accounting and financial records and related data of the organization have been made available to you, and you have been made aware of and given access to outside sources of information where applicable.

All information necessary has been disclosed

All information necessary to complete the financial information has been disclosed to you.

No events occurred or pending

No events have occurred or are pending, and no facts have been discovered to date, which would cause the financial information to be misleading.

Management responsible for financial information

The financial information has been reviewed by management and we acknowledge sole responsibility for the content.

(continued)

Proceeds of Crime (Money Laundering) and Terrorist Financing Act

We hereby acknowledge that McLean, Lizotte, Wheadon and Company have made us aware of your legal obligations under the Proceeds of Crime (Money Laundering) and Terrorist Financing Act. We hereby acknowledge that we are aware of potential conflict of interest that may arise as a result of your legal obligations under this Act and authorize McLean, Lizotte, Wheadon and Company to release and disclose information about Saltspring Therapeutic Riding Association as required by statute.

Acknowledged and agreed on behalf of Saltspring Therapeutic Riding Association by:

Authentisign
Richard Way

04/03/25

Authentisign
Alison McAndrew

04/03/25

SALTSPRING THERAPEUTIC RIDING ASSOCIATION
Compiled Financial Information
Year Ended December 31, 2024

SALTSPRING THERAPEUTIC RIDING ASSOCIATION
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Year Ended December 31, 2024

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CHARTERED PROFESSIONAL ACCOUNTANTS

COMPILATION ENGAGEMENT REPORT

To the Management of Saltspring Therapeutic Riding Association

On the basis of information provided by management, we have compiled the statement of financial position of Saltspring Therapeutic Riding Association as at December 31, 2024, and the statements of revenues and expenditures and changes in net assets for the year then ended, and Note 1, which describes the basis of accounting applied in the preparation of the compiled financial information ("financial information").

Management is responsible for the accompanying financial information, including the accuracy and completeness of the underlying information used to compile it and the selection of the basis of accounting.

We performed this engagement in accordance with Canadian Standard on Related Services (CSRS) 4200, *Compilation Engagements*, which requires us to comply with relevant ethical requirements. Our responsibility is to assist management in the preparation of the financial information.

We did not perform an audit engagement or a review engagement, nor were we required to perform procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an audit opinion or a review conclusion, or provide any form of assurance on the financial information.

Readers are cautioned that the financial information may not be appropriate for their purposes.

McLean, Lizotte, Wheadon and Company

Salt Spring Island, British Columbia
April 3, 2025

MCLEAN, LIZOTTE, WHEADON AND COMPANY
Chartered Professional Accountants

SALT SPRING ISLAND
340 LOWER GANGES ROAD
SALT SPRING ISLAND, BC
V8K 2V3

250-537-9742
FAX: 250-537-9792

VICTORIA
300A-3060 CEDAR HILL ROAD
VICTORIA, BC
V8T 3J5

250-475-3000
FAX: 250-475-2224

www.mlwaccounting.ca
email: cpa@mlwaccounting.ca

*denotes partnership of professional corporations

SALTSPRING THERAPEUTIC RIDING ASSOCIATION
Statement of Financial Position
December 31, 2024

	2024	2023
ASSETS		
CURRENT		
Cash	\$ 6,896	\$ 24,543
Accounts receivable	6,375	-
	<u>13,271</u>	<u>24,543</u>
HORSES AND TACK (at cost)	<u>14,781</u>	<u>11,281</u>
	<u>\$ 28,052</u>	<u>\$ 35,824</u>
LIABILITIES AND NET ASSETS		
CURRENT		
Accounts payable and accrued liabilities	\$ 2,432	\$ 3,880
NET ASSETS	<u>25,620</u>	<u>31,944</u>
LIABILITIES AND NET ASSETS	<u>\$ 28,052</u>	<u>\$ 35,824</u>

ON BEHALF OF THE BOARD

Authentisign

 _____ Director

Authentisign

 _____ Director

SALTSPRING THERAPEUTIC RIDING ASSOCIATION
Statement of Revenues and Expenditures
Year Ended December 31, 2024

	2024	2023
REVENUES		
Lessons, clinics and camp	\$ 52,134	\$ 43,670
Donations - foundations	45,000	55,000
Donations - other	36,905	23,919
Gaming grant	18,800	15,000
Hay and board income	4,827	8,345
Memberships	25	165
	<u>157,691</u>	<u>146,099</u>
EXPENSES		
Administrative	8,535	7,288
Bad debts	475	-
Facility rental	18,000	18,000
General maintenance and utilities	3,444	1,908
Horse maintenance	49,387	40,842
Horse management	29,668	22,314
Instructors	21,060	18,935
Professional fees	2,890	1,351
Program coordinator	30,000	37,000
Training	556	-
	<u>164,015</u>	<u>147,638</u>
DEFICIENCY OF REVENUES OVER EXPENSES FROM OPERATIONS	<u>(6,324)</u>	<u>(1,539)</u>
OTHER ITEMS		
Writedown on sale/gift of horses	-	(3,600)
DEFICIENCY OF REVENUES OVER EXPENSES	<u>\$ (6,324)</u>	<u>\$ (5,139)</u>

Statement of Changes in Net Assets
Year Ended December 31, 2024

	2024	2023
NET ASSETS - BEGINNING OF YEAR	\$ 31,944	\$ 37,083
DEFICIENCY OF REVENUES OVER EXPENSES	<u>(6,324)</u>	<u>(5,139)</u>
NET ASSETS - END OF YEAR	<u>\$ 25,620</u>	<u>\$ 31,944</u>

SALTSPRING THERAPEUTIC RIDING ASSOCIATION
Notes to Compiled Financial Information
Year Ended December 31, 2024

1. BASIS OF ACCOUNTING

The basis of accounting applied in the preparation of the statement of financial position of Saltspring Therapeutic Riding Association as at December 31, 2024, and the statements of revenues and expenditures and changes in net assets for the year then ended is the historical cost basis and reflects cash transactions with the addition of:

- Accounts receivable less an allowance for doubtful accounts;
 - Accounts payable and accrued liabilities.
-



Canada Revenue
Agency

Agence du revenu
du Canada

Protected B when completed

Registered Charity Information Return

Section A: Identification

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

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

Complete the following:

1. Charity name:

SALTSPRING THERAPEUTIC RIDING ASSOCIATION

2. Return for fiscal period ending:

Year	Month	Day
2024	12	31

3. BN/registration number:

87378 3013 RR 0001

4. Web address (if applicable):

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

Name

BN (9 digits, 2 letters, 4 digits. Example: 123456789RR0001)

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

- A3 Is the charity designated as a public foundation or private foundation? 1600 ☐ Yes ☒ No

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

Section B: Directors/trustees and like officials

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

For charities subject to the Ontario Corporations Act.

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

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

Section C: Programs and general information

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

- C2 Describe all ongoing and new charitable programs during this fiscal period that furthered the charity's purpose(s) (as defined in its governing documents). "Programs" includes:

- charitable activities that the charity carries out on its own through employees, volunteers, or intermediaries, and
- qualifying disbursements that the charity makes through gifts to qualified donees or grants to non-qualified donees (grantees).

Charities making qualifying disbursements should describe the types of organizations they support. 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.

Do not describe fundraising activities in this space.

Do not attach additional sheets of paper or annual reports.

Ongoing programs

WE CONTINUE TO OFFER 31 WEEKS OF INDIVIDUAL LESSONS TO INDIVIDUALS WITH EMOTIONAL, MENTAL AND PHYSICAL CHALLENGES.

WE OFFER PRIVATE RIDING LESSONS TO INDIVIDUALS ON WEEKENDS. WE ALSO OFFER RESTORATIVE EQUINE WELLNESS TO MEMBERS OF OUR COMMUNITY WHO HAVE EXPERIENCED AND ARE PRESENTLY CHALLENGED WITH SIGNIFICANT MENTAL/PHYSIOLOGICAL HEALTH ISSUES RELATING TO TRAUMA

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, excluding grants to non-qualified donees? **2000** ☐ Yes ☒ No

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

C4 Did the charity carry on, fund, or provide any resources through employees, volunteers, agents, joint ventures, contractors, or any other individuals, intermediaries, entities, or means (excluding qualifying disbursements) for any activity/program/project outside Canada? **2100** ☐ Yes ☒ No

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

C5 Public policy dialogue and development activities

This question has been removed.

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

2500 ☒ Advertisements/print/radio/TV commercials

2570 ☒ Sales

2620 ☐ Telephone/TV solicitations

2510 ☐ Auctions

2575 ☐ Internet

2630 ☐ Tournament/sporting events

2530 ☐ Collection plate/boxes

2580 ☐ Mail campaigns

2640 ☐ Cause-related marketing

2540 ☐ Door-to-door solicitation

2590 ☐ Planned-giving programs

2650 ☐ Other

2550 ☒ Draws/lotteries

2600 ☐ Targeted corporate donations/sponsorships

2660 Specify: _____

2560 ☐ Fundraising dinners/galas/concerts

2610 ☒ 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** \$ 0

(b) Enter the amounts paid to and/or retained by the fundraisers. **5460** \$ 0

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

2730 ☐ Commissions

2750 ☐ Finder's fee

2770 ☐ Honoraria

2740 ☐ Bonuses

2760 ☐ Set fee for services

2780 ☐ Other

2790 Specify: _____

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

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

C9 Did the charity incur any expenses for compensation of employees during the fiscal period? **3400** ☐ Yes ☒ No

Important: If yes, you must complete Schedule 3, Compensation.

C10 Did the charity receive any donations or gifts of any kind valued at \$10,000 or more from any donor that was not resident in Canada and was not any of the following: **3900** ☐ Yes ☒ No

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

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

C11 Did the charity receive any non-cash gifts for which it issued tax receipts? **4000** ☐ Yes ☒ No

Important: If yes, you must complete Schedule 5, Non-cash gifts.

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

C13 Did the charity allow any of its donors to use any of its property? (except for permissible uses) **5810** ☐ Yes ☒ No

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

C15 Did the charity have direct partnership holdings at any time during the fiscal period? **5830** ☐ Yes ☒ No

Registered charities may make grants to non-qualified donees (grantees) as described in the Income Tax Act.

C16	Did the charity make qualifying disbursements by way of grants to non-qualified donees (grantees) in the fiscal period?	5840	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If yes , you must complete lines 5841, 5842 and 5843.			
	Did the charity make grants to any grantees totalling more than \$5,000 in the fiscal period?	5841	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If yes , you must complete Form T1441, Qualifying Disbursements: Grants to Non-Qualified Donees (Grantees).			
	Enter the number of grantees that received grants totalling \$5,000 or less in the fiscal period	5842		
	Enter the total amount paid to grantees that received grants totalling \$5,000 or less in the fiscal period	5843	\$	
C17	In the 24 months before the beginning of the fiscal period, did the average value of your charity's property (cash, investments, capital property or other assets) not used directly in its charitable activities or administration:			
	(a) exceed \$100,000, if the charity is designated as a charitable organization; or			
	(b) exceed \$25,000, if the charity is designated as a public or private foundation?	5850	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If yes , you must complete Schedule 8 – Disbursement quota			
C18	Did the charity hold any donor advised funds (DAF) during the fiscal period?	5860	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If yes , provide the following:			
	(a) Total number of accounts held at the end of the fiscal period	5861		
	(b) Total value of all accounts held at the end of the fiscal period	5862	\$	
	(c) Total value of donations to DAF accounts received during the fiscal period	5863	\$	
	(d) Total value of qualifying disbursements from DAFs during the fiscal period	5864	\$	

Section D: Financial information

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

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

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


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

D1	Was the financial information reported below prepared on an accrual or cash basis?	4020	<input type="checkbox"/> Accrual	<input type="checkbox"/> 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	<input type="checkbox"/> Yes	<input type="checkbox"/> 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	<input type="checkbox"/> Yes	<input type="checkbox"/> No
D3	Revenue:			
	Did the charity issue tax receipts for gifts?	4490	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If yes, enter the total eligible amount of all gifts for which the charity has issued or will issue tax receipts	4500	\$	
	Total amount 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	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If yes, total amount received	4570	\$	
	Total tax-receipted revenue from all sources outside of Canada (government and non-government)	4571	\$	0
	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 qualifying disbursements)	4920	\$	
	Total expenditures (excluding qualifying disbursements) (add lines 4860, 4810, and 4920)	4950	\$	
	Of the amount at line 4950:			
	(a) Total expenditures on charitable activities	5000	\$	0
	(b) Total expenditures on management and administration	5010	\$	0
	Total amount of grants made to all non-qualified donees (grantees)	5045	\$	
	Total amount of gifts made to all qualified donees	5050	\$	
	Total expenditures (add lines 4950, 5045, and 5050)	5100	\$	

Section E: Certification

This return must be signed by a person who has authority to sign on behalf of the charity. It is a serious offence under the Income Tax Act to provide false or deceptive information.

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

Name (print) ALISON MCANDREW	Signature 
Position in charity TREASURER	Date 04/03/25
	Phone number [REDACTED]

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	[REDACTED]	[REDACTED]
City	SALT SPRING ISLAND	SALT SPRING ISLAND
Province or territory and postal code	BC [REDACTED]	BC [REDACTED]

F2 Name and address of individual who completed this return.

Name	
Company name (if applicable) MCLEAN, LIZOTTE, WHEADON AND COMPANY	
Complete street address 340 LOWER GANGES ROAD	
City, province or territory, and postal code SALT SPRING ISLAND BC V8K 2V3	
Phone number 250 537-9742	Is this the same individual who certified in Section E above? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Privacy statement

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

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

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

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

☒ I confirm that I have read the Privacy statement above.

Checklist

A charity's complete annual information return includes:

- Form T3010, Registered Charity Information Return, and all applicable schedules
- a copy of the charity's financial statements
- Form T1235, Directors/Trustees and Like Officials Worksheet
- Form T1236, Qualified donees worksheet/Amounts provided to other organizations (if applicable)
- Form T2081, Excess Corporate Holdings Worksheet for Private Foundations (if applicable)
- Form T1441, Qualifying Disbursements: Grants to Non-Qualified Donees (Grantees) (if applicable)

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

Foundations		Schedule 1	
1	Did the foundation acquire control of a corporation?.....	100	<input type="checkbox"/> Yes <input type="checkbox"/> No
2	Did the foundation incur any debts other than for current operating expenses, purchasing or selling investments, or in administering charitable activities?.....	110	<input type="checkbox"/> Yes <input type="checkbox"/> No
3	(a) What was the total value of all restricted funds held at the end of the fiscal period?.....	111	\$ 0
	(b) Of that amount, what amount was the foundation not permitted to spend due to a funder's written trust or direction?.....	112	\$ 0

For private foundations only:

4	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	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Did the foundation own more than 2% of any class of shares of a corporation at any time during the fiscal period?..... If yes, you must complete and attach Form T2081, Excess Corporate Holdings Worksheet for Private Foundations.	130	<input type="checkbox"/> Yes <input type="checkbox"/> No

Activities outside Canada		Schedule 2	
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Important: If you complete this section, you must answer yes to question C4.

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

1	Total expenditures on activities/programs/projects carried on outside Canada, excluding qualifying disbursements	200	\$ 0
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 qualifying disbursements)?.....	210	<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

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

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

4	Were any projects undertaken outside Canada funded by Global Affairs Canada?.....	220	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, what was the total amount the charity spent under this arrangement?.....	230	\$ 0
5	Were any of the charity's activities outside of Canada carried out by employees of the charity?.....	240	<input type="checkbox"/> Yes <input type="checkbox"/> No
6	Were any of the charity's activities outside of Canada carried out by volunteers of the charity?	250	<input type="checkbox"/> Yes <input type="checkbox"/> No
7	Did the charity export goods as part of its charitable activities?	260	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, list the items exported, their destination, the country code, and their value.		

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

Country codes

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

Use the following codes for countries not listed above:

QS-Other countries in Africa
QR-Other countries in Asia and Oceania
QM-Other countries in Central and South America
QP-Other countries in Europe
QO-Other countries in the Middle East
QN-Other countries in North America

Compensation

Schedule 3

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

1	(a) Enter the number of permanent, full-time, compensated positions in the fiscal period. This number should represent the number of positions the charity had including both managerial positions and others, and should not include independent contractors. Do not enter a dollar amount.	300		0					
	(b) For the ten (10) highest compensated, permanent, full-time positions enter the number of positions that are within each of the following annual compensation categories. Do not tick the boxes; use numbers.								
	305	<input type="text" value="0"/>	\$1 – \$39,999	310	<input type="text" value="0"/>	\$40,000 – \$79,999	315	<input type="text" value="0"/>	\$80,000 – \$119,999
	320	<input type="text" value="0"/>	\$120,000 – \$159,999	325	<input type="text" value="0"/>	\$160,000 – \$199,999	330	<input type="text" value="0"/>	\$200,000 – \$249,999
	335	<input type="text" value="0"/>	\$250,000 – \$299,999	340	<input type="text" value="0"/>	\$300,000 – \$349,999	345	<input type="text" value="0"/>	\$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		0					
	(b) Total expenditure on compensation for part-time or part-year employees in the fiscal period.	380	\$	0					
3	Total expenditure on all compensation in the fiscal period.	390	\$	0					

Confidential data

Schedule 4

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

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

1. Information about external fundraisers

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

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

2. Information about donors not resident in Canada

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

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

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

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

Non-cash gifts

Schedule 5

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

1	Select all types of non-cash gifts received for which a tax receipt was issued:	
500	<input type="checkbox"/> Artwork/wine/jewellery	525 <input type="checkbox"/> Ecological properties
505	<input type="checkbox"/> Building materials	530 <input type="checkbox"/> Life insurance policies
510	<input type="checkbox"/> Clothing/furniture/food	535 <input type="checkbox"/> Medical equipment/supplies
515	<input type="checkbox"/> Vehicles	540 <input type="checkbox"/> Privately-held securities
520	<input type="checkbox"/> Cultural properties	545 <input type="checkbox"/> Machinery/equipment/ computers/software
		550 <input type="checkbox"/> Publicly traded securities/ commodities/mutual funds
		555 <input type="checkbox"/> Books
		560 <input type="checkbox"/> Other
		565 Specify:
2	Enter the total amount of tax-receipted non-cash gifts	580 \$ 0

Detailed financial information

Schedule 6

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

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

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

Statement of financial position

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

Assets:

Cash, bank accounts, and short-term investments	4100	\$	6,896
Cash and bank accounts	4101	\$	0
Short-term investments	4102	\$	0
Amounts receivable from non-arm's length persons	4110	\$	0
Amounts receivable from all others	4120	\$	6,375
Investments in non-arm's length persons	4130	\$	0
Long-term investments	4140	\$	0
Inventories	4150	\$	0
Land and buildings in Canada	4155	\$	0
Used for charitable programs or administration	4157	\$	0
Used for other purposes	4158	\$	0
Other capital assets in Canada	4160	\$	0
Capital assets outside Canada	4165	\$	0
Accumulated amortization of capital assets	4166	\$	0
Other assets	4170	\$	14,781
Impact investments	4190	\$	0
Total assets (add lines 4100, 4110 to 4155, and 4160 to 4170)	4200	\$	28,052

Liabilities:

Accounts payable and accrued liabilities	4300	\$	2,432
Deferred revenue	4310	\$	0
Amounts owing to non-arm's length persons	4320	\$	0
Other liabilities	4330	\$	0
Total liabilities (add lines 4300 to 4330)	4350	\$	2,432

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

4250 \$ 0

Statement of operations

Revenue:

Total eligible amount of all gifts for which the charity has issued or will issue tax receipts	4500	\$	31,183
Total eligible amount of tax-receipted tuition fees	5610	\$	0
Total amount received from other registered charities	4510	\$	45,000
Total other gifts received for which a tax receipt was not issued by the charity (excluding amounts at lines 4575 and 4630)	4530	\$	5,722
Total revenue received from federal government	4540	\$	0
Total revenue received from provincial/territorial governments	4550	\$	18,800
Total revenue received from municipal/regional governments	4560	\$	0
Total tax-receipted revenue from all sources outside of Canada (government and non-government)	4571	\$	0
Total non tax-receipted revenue from all sources outside Canada (government and non-government)	4575	\$	0
Total interest and investment income from impact investments	4576	\$	0
Total interest and investment income from persons not at arm's length	4577	\$	0
Total interest and investment income received or earned	4580	\$	0
Gross proceeds from disposition of assets	4590	\$	0
Net proceeds from disposition of assets (show a negative amount with brackets)	4600	\$	0
Gross income received from rental of land and/or buildings	4610	\$	0
Total non tax-receipted revenues received for memberships, dues and association fees	4620	\$	25
Total non tax-receipted revenue from fundraising	4630	\$	0
Total revenue from sale of goods and services (except to any level of government in Canada)	4640	\$	56,961
Other revenue not already included in the amounts above	4650	\$	0
Specify type(s) of revenue included in the amount reported at 4650	4655		
Total revenue (add lines 4500, 4510 to 4560, 4575, 4580, and 4600 to 4650)	4700	\$	157,691

Expenditures:

Advertising and promotion	4800	\$	935
Travel and vehicle expenses.....	4810	\$	0
Interest and bank charges.....	4820	\$	152
Licences, memberships, and dues.....	4830	\$	1,009
Office supplies and expenses.....	4840	\$	6,912
Occupancy costs	4850	\$	21,444
Professional and consulting fees.....	4860	\$	32,890
Education and training for staff and volunteers	4870	\$	556
Total expenditure on all compensation (enter the amount reported at line 390 in Schedule 3, if applicable)	4880	\$	0
Fair market value of all donated goods used in charity's own activities.....	4890	\$	0
Purchased supplies and assets	4891	\$	49,387
Amortization of capitalized assets	4900	\$	0
Research grants and scholarships as part of charity's own activities	4910	\$	0
All other expenditures not included in the amounts above (excluding qualifying disbursements)	4920	\$	50,727
Specify type(s) of expenditures included in the amount reported at 4920	4930	HORSE MANAGEMENT AND INSTRUCTC	
Total expenditures before qualifying disbursements (add lines 4800 to 4920)	4950	\$	164,012

Of the amounts at lines 4950:

(a) Total expenditures on charitable activities.....	5000	\$	145,729
(b) Total expenditures on management and administration	5010	\$	18,283
(c) Total expenditures on fundraising	5020	\$	0
(d) Total other expenditures included in line 4950.....	5040	\$	0

Total amount of grants made to all non-qualified donees (grantees).....	5045	\$	0
Total amount of gifts made to all qualified donees	5050	\$	0
Total expenditures (add lines 4950, 5045 and 5050)	5100	\$	164,012

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	\$	0
• Enter the amount disbursed for the fiscal period for the specified purpose.....	5510	\$	0

Permission to reduce disbursement quota:

If the charity has received approval to make a reduction to its disbursement quota, enter the amount for the fiscal period	5750	\$	0
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Property not used in charitable activities:

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

• The 24 months before the beginning of the fiscal period	5900	\$	0
• The 24 months before the end of the fiscal period	5910	\$	0

Disbursement quota

Schedule 8

Important: If you complete this section, you must answer **yes** to question C17.

For more information, go to Canada.ca/charities-disbursement-quota.

Step 1. Calculating the disbursement quota requirement for the current fiscal period

Average value of property not used in charitable activities or administration (line 5900 from your return)	805	\$	0
If permission to accumulate property has been granted, enter the total amount accumulated less all disbursements made for the specified purpose (add all amounts from lines 5500 minus all amounts at lines 5510 from all returns to date covered by the permission to accumulate property period)	810	\$	0
Line 805 minus line 810 (if negative, enter 0).....	815	\$	0

If line 815 is \$1,000,000 or less

Multiply line 815 by 3.5%..... 820 \$ 0

If line 815 is over \$1,000,000

Line 815 minus \$1,000,000.....	825	\$	0
Line 825 multiplied by 5%	830	\$	0
Line 830 plus \$35,000	835	\$	0

Enter the amount from line 820 or line 835. This is your charity's disbursement quota requirement for the current fiscal period	840	\$	0
Total expenditures on charitable activities (line 5000 of your return)	845	\$	0
Total amount of grants made to non-qualified donees (line 5045 of your return)	850	\$	0
Total amount of gifts made to qualified donees (line 5050 of your return)	855	\$	0
Add lines 845 to line 855	860	\$	0
Line 860 minus line 840. This is your charity's disbursement quota excess or shortfall for the current fiscal period.....	865	\$	0

If a shortfall exists (line 865 is negative), your charity can draw on disbursement excesses from the five previous fiscal periods to help it meet its shortfall. If no excesses are available to draw on, your charity can try to spend enough the following year to create an excess that it can carry back to cover the shortfall.

Step 2. Estimating the disbursement quota requirement for the next fiscal period

Average value of property not used in charitable activities or administration prior to the next fiscal period (line 5910 from your return)	870	\$	0
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If line 870 is \$1,000,000 or less

Multiply line 870 by 3.5%..... 875 \$ 0

If line 870 is over \$1,000,000

Line 870 minus \$1,000,000.....	880	\$	0
Line 880 multiplied by 5%	885	\$	0
Line 885 plus \$35,000.....	890	\$	0

The amount shown at line 875 or line 890 is your charity's estimated disbursement quota requirement for the next fiscal period.

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 reverse for information on filling out this form.

Total number of directors/trustees and like officials:

Charity name:

Business number:

Return for fiscal period ending (YYYY/MM/DD):

7

SALTSPRING THERAPEUTIC RIDING ASSOCIATION

87378 3013 RR 0001

2 0 2 4 1 2 3 1

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

Public Information	Confidential data
Last name: BECKY First name: CITRA Initial: Term Start date (Y/M/D): End date (Y/M/D): Position: DIRECTOR At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Last name: TAYLOR First name: GILLIAM Initial: Term Start date (Y/M/D): End date (Y/M/D): Position: DIRECTOR At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Last name: DU MONT First name: KATHRYNN Initial: E Term Start date (Y/M/D): End date (Y/M/D): Position: DIRECTOR At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Last name: WAY First name: RICHARD Initial: Term Start date (Y/M/D): End date (Y/M/D): Position: CHAIRPERSON At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Last name: LEMIEUX First name: KIMBERLY Initial: Term Start date (Y/M/D): End date (Y/M/D): Position: DIRECTOR At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Last name: WILKINSON First name: ANNETTE Initial: L Term Start date (Y/M/D): End date (Y/M/D): Position: DIRECTOR At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Last name: MCANDREW First name: ALISON Initial: Term Start date (Y/M/D): End date (Y/M/D): Position: TREASURER At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Last name: First name: Initial: Term Start date (Y/M/D): End date (Y/M/D): Position: At arm's length with other Directors? Yes No	Residential address – Street number and name: City: Prov/Terr: Postal code: Phone number Date of birth (Y/M/D):
Last name: First name: Initial: Term Start date (Y/M/D): End date (Y/M/D): Position: At arm's length with other Directors? Yes No	Residential address – Street number and name: City: Prov/Terr: Postal code: Phone number Date of birth (Y/M/D):

Completing the Directors/Trustees and Like Officials Worksheet

Public information

Information from this column is available to the public.

Enter the last name, first name, and initial of the director/trustee or like official.

Term:

Start date: Enter the date the person started in the position.

End date: Enter the date the person left the position. If the person has not left the position, leave this field blank.

Position: Enter the title of the position being held. Each position is generally identified in an organization's governing documents (for example, president, treasurer, secretary). A registered charity may have other officials that have governing powers similar to those of a director or trustee. For example, a religious leader with some governing authority would be considered a like official.

Is arm's length with other directors: Tick **Yes** if the person is at arm's length with all other directors/trustees or like officials.

Arm's length is a concept that describes a relationship in which two persons act independently of each other and are not related. Related persons are individuals who are related to each other by blood, marriage or common-law partnership, or adoption. It is also possible that individuals not related by a family connection, but by close business relations, may still be considered not at arm's length. For more information on arm's length, go to anada.ca/charities-giving, select "A to Z index of topics for charities," search for "Charities and giving glossary" and see "arm's length."

Confidential data

Information from this column will stay confidential and will not be made available to the public except in circumstances in which the release of any or all of the information is required by law or, in certain circumstances, permitted by law.

According to the Income Tax Act, circumstances in which the law requires or permits such information to be disclosed include a court order, warrant, or subpoena issued for a criminal proceeding under an act of Parliament or a legal proceeding relating to the administration or enforcement of the Income Tax Act, the Canada Pension Plan, the Unemployment Insurance Act, or the Employment Insurance Act, or any other act of Parliament or law of a province that allows a tax or duty to be imposed or collected.

Other circumstances in which we are required or permitted by law to disclose certain records include a request made under the authority of the Auditor General Act, a warrant issued by the Canadian Security Intelligence Service Act, and enquiries from the Department of Finance Canada for information to form or evaluate fiscal policy.

Residential address: In the proper spaces, enter the full home address, including the street number, street name, city (which could be a town, village, or other municipality), province or territory, and postal code of each director/trustee or like official.

Phone number: Enter the telephone number at which the person can be reached during the day.

Date of birth: Enter the person's date of birth so that the CRA is better able to identify the individuals who are responsible for managing the charity.

If the director/trustee or like official lives outside the country, enter the person's full mailing address, including the country.