



OTTAWA ON K1A 0L5

ANANDA MARGA CANADA
NILMINI FERNANDO
128 WALKER ROAD WEST
CALEDON EAST ON L7C 3M4

Date Issued
2011-07-06
Notice Number
01
BN/Registration Number
88925 6640 RR0001

Thank you for filing the charity's Form T3010, *Registered Charity Information Return*, or changes to the Form, for the fiscal period ending 2010-12-31.

Please check the information in this notice carefully.

Important message

You did not make any changes on Form TF725, Registered Charity Basic Information Sheet.

Financial information

We have processed the charity's financial information as submitted. This information may be subject to further review. Should there be a discrepancy between declared and recalculated amounts, it is the charity's responsibility to verify the information submitted and, if applicable, submit a Form T1240, *Registered Charity Adjustment Request*.

Declared	Total assets	Recalculated
93,684		93,684

Declared	Total revenue	Recalculated
12,960		12,960

Declared	Total liabilities	Recalculated
600		600

Declared	Total expenditures	Recalculated
14,352		14,352

If you have any questions, or do not agree with the information in this notice, you can write us at:

Charities Directorate
Canada Revenue Agency
Ottawa ON K1A 0L5

You can fax us at 613-954-8037.

You can also telephone us at:
1-800-267-2384, or
1-800-665-0354 for TTY service for persons with a hearing or speech impairment.

Visit our Web pages at www.cra.gc.ca/charities.

Director General, Charities Directorate



Corporations Canada
9th Floor
Jean Edmonds Towers, South
365 Laurier Ave. West
Ottawa, Ontario
K1A 0C8

Corporations Canada
9ième étage
Tours Jean Edmonds, sud
365, av. Laurier ouest
Ottawa (Ontario)
K1A 0C8

Corporation No / Numéro de corporation
010141-9

As of 31st March / Au 31 mars **2010**

A Name and Mailing Address Nom et adresse postale de la compagnie CCA2-010141-9 ANANDA MARGA CANADA 128 WALKER ROAD WEST CALEDON EAST, ON L7C 3M4	B Postal Address of Head Office, if different from A Adresse postale du siège social si différente de A
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C Incorporated by - Incorporée par <input type="checkbox"/> Letters Patent / Lettres - patentes <input type="checkbox"/> Special Act / Loi spéciale	D Date of Incorporation / Date de l'incorporation	E Last annual meeting of shareholders or members held prior to April 1st / Dernière assemblée annuelle des actionnaires ou membres tenue avant le 1er avril Date: _____ Place - Lieu: _____
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F Names and addresses of the persons who at the date of the return are the Directors of the company. Variations from the authorized number of Directors should be explained.	Noms et adresses des personnes qui à la date du rapport, sont administrateurs de la compagnie. Un changement dans le nombre d'administrateurs devrait être expliqué.
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NAMES AND COMPLETE POSTAL ADDRESSES - NOMS ET ADRESSES POSTALES COMPLÈTES

1 Nilmini Fernando 128 Walker Rd. W. Caledon East ON L7C 3M4	9
2 ROBERT HOFFMANN 110 MILLICENT ST. TORONTO ON M6H 0W4	10
3 JANE CARDWELL 61 FAIRMONT AVENUE OTTAWA, ONTARIO K1Y 1X4	11
4 PRAMOD SINHA 128 WALKER ROAD WEST CALEDON EAST, ONTARIO L7C 3M4	12
5 ACHARYA VIMALANANDA AVADHUTA 128 WALKER ROAD WEST CALEDON EAST, ONTARIO L7C 3M4	G Name and complete postal address of the auditor of the Company / Nom et adresse postale complète du vérificateur de la compagnie
6 OLIVIER GROS 2119 JOUETTIE, AP# 5. LUNGUERIL, Québec, J4K 4X2	

7	Signature (Officer or Director) / Signature (Fonctionnaire ou administrateur)	Title - Titre
8	Telephone No. - N° de téléphone	Date
	Received - Reçu	Date

IC 3151 (1998/04)

DEPARTMENT ONLY - MINISTÈRE SEULEMENT		
Date received - Date de réception	Validation	
Key Code - Code clé	Cheque - Chèque	Amount - Montant



Place bar code label here

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's name:
ANANDA MARGA CANADA

2. Return for fiscal period ending: 2010/12/31

3. BN/registration number: 88925 6640 RR 0001

4. Web address (if applicable):

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) RR
------	--------------------------

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:
SERVICES FOR WORSHIP, MARRIAGE, CHRISTENING (BABY NAMING CEREMONIES) AND FUNERALS. REGULAR, SUNDA DHARMA CHAKRA (COLLECTIVE MEDITATION, SADHANA/CHANTING) HELD IN TORONTO, BRAMPTON, OTTAWA, MONTREAL, VANCOUVER. PUBLIC INSTRUCTIONS, INCLUDING SEMINARS, CLASSES, LECTURERS, PROGRAMS AND INSTRUCTION. ILLUSTRATING THE SPIRITUAL DOCTRINE OF ANANDA MARGA, MEDITATION TECHNIQUES, YOGA PRACTICES, AND DEVOTIONAL SONGS AS GIVEN BY SHRI SHRIANANDA MURTI. STUDY OF ANANDA MARGA SPIRITUAL SCRIPTURES.

New programs:
HOUSE BLESSING CEREMONIES ACCORDING TO CARYA CARYA, AKHANDA KIIRTAN PROGRAMM AT THE HINDU TEMPLE, BRAMPTON, ON. STUDIES OF DEVOTIONAL SONGS- PRABHAT SAMGHIITS, GIVEN BY GURU SHRI SHRI ANANDAMURTI.

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 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 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 checked="" type="checkbox"/> | Other |
| 2550 <input type="checkbox"/> | Draws/lotteries | 2600 <input type="checkbox"/> | Targeted corporate donations/
sponsorships | 2660 <input type="checkbox"/> | Specify: <u>BOOKS</u> |
| 2560 <input 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 <input type="checkbox"/> | 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** \$ 93,684

Total liabilities **4350** \$ 600

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** \$ 11,395

Total amount of 10 year gifts received **4505** \$ 0

Total amount received from other registered charities **4510** \$ 0

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** \$ 405

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** \$ 0

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** \$ 1,160

Total revenue (Add lines 4500 to 4650, excluding line 4505) **4700** \$ 12,960

D4 Expenditures:

What was the charity's total expenditure on professional and consulting fees? **4860** \$ 500

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** \$ 13,852

Total expenditures (excluding gifts to qualified donees) (Add lines 4860, 4810, and 4920) **4950** \$ 14,352

Of the total amount at line 4950:

- a) How much did the charity spend on charitable programs? **5000** \$ 10,313
- b) How much did the charity spend on management and administration? **5010** \$ 4,039

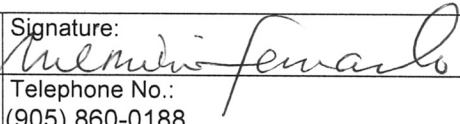
Total amount of gifts made to all qualified donees **5050** \$ 0

Total expenditures (Add lines 4950 and 5050) **5100** \$ 14,352

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): NILMINI FERNANDO	Signature: 	
Position in charity: PRESIDENT	Date: 2011/05/30	Telephone No.: (905) 860-0188

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.	C/O NILMINI FERNANDO 128 WALKER RD	C/O NILMINI FERNANDO 128 WALKER RD
City	CALEDON EAST	CALEDON EAST
Province or territory and postal code	ON L7C 3M4	ON L7C 3M4

F2 Name and address of individual who completed this return.

Name: DONALD KOPPLIN	
Firm name (if applicable): RBA Financial Group (Markdale) Ltd	
Number, street, apt. no., R.R. no., or P.O. box no.: 27 Main St E Box 240	
City, province or territory, and postal code: Markdale ON N0C 1H0	
Telephone No.: (519) 986-2261	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?

- 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.)

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.

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- 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 \$1 – \$39,999	310 \$40,000 – \$79,999	315 \$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**

(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"/>

Non-Cash Gifts

Schedule 5

1 Identify all types of non-cash gifts (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/mutual funds |
| 505 <input type="checkbox"/> Building materials | 530 <input type="checkbox"/> Life insurance policies | 555 <input type="checkbox"/> Books (literature, comics) |
| 510 <input type="checkbox"/> Clothing/furniture/food | 535 <input type="checkbox"/> Medical equipment/supplies | 560 <input type="checkbox"/> Other |
| 515 <input type="checkbox"/> Vehicles | 540 <input type="checkbox"/> Privately-held securities | 565 <input type="checkbox"/> Specify: _____ |
| 520 <input type="checkbox"/> Cultural properties | 545 <input type="checkbox"/> Machinery/equipment (including computers and software) | |

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

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

4020 Accrual Cash

Statement of financial position

Show figures to the nearest single dollar.

Assets:

Cash, bank accounts, and short-term investments	4100\$
Amounts receivable from non-arm's length parties	4110\$
Amounts receivable from all others	4120\$
Investments in non-arm's length parties	4130\$
Long-term investments	4140\$
Inventories	4150\$
Land and buildings in Canada	4155\$
Other capital assets in Canada	4160\$
Capital assets outside Canada	4165\$
Accumulated amortization of capital assets	4166\$
Other assets	4170\$
10 year gifts	4180\$
Total assets (add lines 4100 to 4170)	4200\$

Liabilities:

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

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

4250\$

Statement of operations

Revenue:

Total eligible amount of all gifts for which the charity issued tax receipts	4500\$
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	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 revenue received from all sources outside Canada	4575\$
Total interest and investment income received or earned	4580\$
Gross proceeds from disposition of assets	4590\$
Net proceeds from disposition of assets (show a negative amount with brackets)	4600\$
Gross income received from rental of land and/or buildings	4610\$
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 government)	4640\$
Other revenue not already included in the amounts above	4650\$
Specify type(s) of revenue included in the amount reported at 4650 (e.g., dividends)	4655
Total revenue (add lines 4500, 4510 to 4580, and 4600 to 4650)	4700\$

Expenditures:

Advertising and promotion	4800\$
Travel and vehicle expenses	4810\$
Interest and bank charges	4820\$
Licences, memberships, and dues	4830\$
Office supplies and expenses	4840\$
Occupancy costs	4850\$
Professional and consulting fees	4860\$
Education and training for staff and volunteers	4870\$
Total expenditure on all compensation (enter the amount reported at line 390 in Schedule 3 if applicable)	4880\$
Fair market value of all donated goods used in charitable programs	4890\$
Total cost of all purchased supplies and assets	4891\$

Amortization of capitalized assets	4900\$
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\$
Specify type(s) of expenditures included in the amount reported at 4920	4930
Total expenditures before gifts to qualified donees (add lines 4800 to 4920)	4950\$

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\$
Total expenditures on management and administration	5010\$
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\$
Total expenditures (add amounts from line 4950 and 5050)	5100\$

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 we have permitted	5510\$	0

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

Directors/Trustees and Like Officials Worksheet

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

Total Number of Directors/Trustees and Like Officials:

Public information			Confidential Data		
Last name: FERNANDO	First name: NILMINI	Initial:	Home address – Street number and name: 128 WALKER ROAD WEST		
Director/Trustee/Like Officials Term ▶ Start Date: 2010/01/01 End Date: 2010/12/31			City: CALEDON EAST	Prov/Terr.: ON	Postal code: L7C 3M4
Position: PRESIDENT	At arm's length with other Directors, etc.? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Telephone number: (905) 584-7665	Date of Birth (mandatory for identification): 1964/04/01	
Last name: CARDWELL	First name: JANE	Initial:	Home address – Street number and name: 61 FAIRMONT AVE		
Director/Trustee/Like Officials Term ▶ Start Date: 2010/01/01 End Date: 2010/12/31			City: OTTAWA	Prov/Terr.: ON	Postal code: K1Y 1X4
Position: VICE-PRESIDENT	At arm's length with other Directors, etc.? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Telephone number: (613) 789-6625	Date of Birth (mandatory for identification): 1954/12/14	
Last name: HOFFMANN	First name: ROBERT	Initial:	Home address – Street number and name: 110 MILLICENT STREET		
Director/Trustee/Like Officials Term ▶ Start Date: 2010/01/01 End Date: 2010/12/31			City: TORONTO	Prov/Terr.: ON	Postal code: M6H 1W4
Position: SECRETARY	At arm's length with other Directors, etc.? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Telephone number: (416) 588-8359	Date of Birth (mandatory for identification): 1964/12/14	
Last name: BISWAS	First name: PRAMOD	Initial:	Home address – Street number and name: 175 ADVANCE BLVD		
Director/Trustee/Like Officials Term ▶ Start Date: 2010/01/01 End Date: 2010/12/31			City: BRAMPTON	Prov/Terr.: ON	Postal code: L6P 4J1
Position: DIRECTOR	At arm's length with other Directors, etc.? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Telephone number: () -	Date of Birth (mandatory for identification): 1966/06/04	
Last name:	First name:	Initial:	Home address – Street number and name:		
Director/Trustee/Like Officials Term ▶ Start Date: End Date:			City:	Prov/Terr.:	Postal code:
Position:	At arm's length with other Directors, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No		Telephone number: () -	Date of Birth (mandatory for identification):	
Last name:	First name:	Initial:	Home address – Street number and name:		
Director/Trustee/Like Officials Term ▶ Start Date: End Date:			City:	Prov/Terr.:	Postal code:
Position:	At arm's length with other Directors, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No		Telephone number: () -	Date of Birth (mandatory for identification):	
Last name:	First name:	Initial:	Home address – Street number and name:		
Director/Trustee/Like Officials Term ▶ Start Date: End Date:			City:	Prov/Terr.:	Postal code:
Position:	At arm's length with other Directors, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No		Telephone number: () -	Date of Birth (mandatory for identification):	
Last name:	First name:	Initial:	Home address – Street number and name:		
Director/Trustee/Like Officials Term ▶ Start Date: End Date:			City:	Prov/Terr.:	Postal code:
Position:	At arm's length with other Directors, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No		Telephone number: () -	Date of Birth (mandatory for identification):	