



Canada Revenue Agency / Agence du revenu du Canada

Registered Charity Information Return

Protected B when completed

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:
CANADIAN MENTAL HEALTH ASSOCIATION OF NORTHERN BC

2. Return for fiscal period ending: 3. BN/registration number: 4. Web address (if applicable):

Year Month Day 2 0 2 2 0 3 3 1	131377061RR0001	
---	---	--

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) R
------	---

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

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

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

Section B: Directors/trustees and like officials

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

For charities subject to the Ontario Corporations Act.

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

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

Section C: Programs and general information

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

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

Do not attach additional sheets of paper or annual reports.

Ongoing programs
supported housing and community outreach services and awareness on mental health in Prince George and surrounding area

New programs

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

C3 Did the charity make gifts or transfer funds to qualified donees or other organizations? **2000** Yes No

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

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

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

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

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

- | | | |
|--|---|---|
| 2500 <input checked="" type="checkbox"/> Advertisements/print/radio/ TV commercials | 2570 <input type="checkbox"/> Sales | 2620 <input type="checkbox"/> Telephone/TV solicitations |
| 2510 <input type="checkbox"/> Auctions | 2575 <input checked="" type="checkbox"/> Internet | 2630 <input type="checkbox"/> Tournament/sporting events |
| 2530 <input type="checkbox"/> Collection plate/boxes | 2580 <input type="checkbox"/> Mail campaigns | 2640 <input type="checkbox"/> Cause-related marketing |
| 2540 <input type="checkbox"/> Door-to-door solicitation | 2590 <input type="checkbox"/> Planned-giving programs | 2650 <input type="checkbox"/> Other |
| 2550 <input type="checkbox"/> Draws/lotteries | 2600 <input type="checkbox"/> Targeted corporate donations/ sponsorships | 2660 Specify: _____ |
| 2560 <input type="checkbox"/> Fundraising dinners/galas/concerts | 2610 <input type="checkbox"/> Targeted contacts | |

C7 Did the charity pay external fundraisers? **2700** Yes No

If **yes**, you must complete the following lines, and complete Schedule 4, Confidential data, Table 1.

(a) Enter the gross revenue collected by the fundraisers on behalf of the charity **5450** \$ 9,391
 (b) Enter the amounts paid to and/or retained by the fundraisers **5460** \$ 531
 (c) Select the method of payment to the fundraiser:

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

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

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

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

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

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

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

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

Protected B when completed

- C11** Did the charity receive any non-cash gifts for which it issued tax receipts? **4000** Yes No
Important: If yes, you must complete Schedule 5, Non-cash gifts.
- C12** Did the charity acquire a non-qualifying security? **5800** Yes No
- C13** Did the charity allow any of its donors to use any of its property? (except for permissible uses) **5810** Yes No
- C14** Did the charity issue any of its tax receipts for donations on behalf of another organization? **5820** Yes No
- C15** Did the charity have direct partnership holdings at any time during the fiscal period? **5830** Yes No

Section D: Financial information

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

If **any** of the following applies to the charity, complete Schedule 6 instead of Section D:
 (a) The charity's revenue exceeds \$100,000.
 (b) The amount of all property (for example, investments, rental properties) not used in charitable activities was more than \$25,000.
 (c) The charity had permission to accumulate funds during this fiscal period.

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

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

D2 Summary of financial position:

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

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

D3 Revenue:

- Did the charity issue tax receipts for gifts? **4490** Yes No
- If yes, enter the total eligible amount of all gifts for which the charity has issued or will issue tax receipts** **4500** \$ _____
- Total amount of 10 year gifts received **4505** \$ _____
- Total amount received from other registered charities **4510** \$ _____
- Total other gifts received for which a tax receipt was **not** issued by the charity (excluding amounts at lines 4575 and 4630) **4530** \$ _____
- Did the charity receive any revenue from any level of government in Canada? **4565** Yes No
- If yes, total amount received** **4570** \$ _____
- Total tax-receipted revenue from all sources outside of Canada (government and non-government) **4571** \$ _____
- Total **non** tax-receipted revenue from all sources outside of Canada (government and non-government) **4575** \$ _____
- Total **non** tax-receipted revenue from fundraising **4630** \$ _____
- Total revenue from sale of goods and services (except to any level of government in Canada) **4640** \$ _____
- Other revenue not already included in the amounts above **4650** \$ _____
- Total revenue (add lines 4500, 4510 to 4570, and 4575 to 4650)** **4700** \$ _____

D4 Expenditures:

- Professional and consulting fees **4860** \$ _____
- Travel and vehicle expenses **4810** \$ _____
- All other expenditures not already included in the amounts above (excluding gifts to qualified donees) **4920** \$ _____
- Total expenditures (excluding gifts to qualified donees) (**add lines 4860, 4810, and 4920**) **4950** \$ _____
- Of the amount at line 4950:
 - (a) Total expenditures on charitable activities **5000** \$ _____
 - (b) Total expenditures on management and administration **5010** \$ _____
- Total amount of gifts made to all qualified donees **5050** \$ _____
- Total expenditures (add lines 4950 and 5050)** **5100** \$ _____

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) Andrew Kurc		Signature
Position in charity Director	Date	Phone number () -

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	1152 3RD AVENUE	1152 3RD AVENUE
City	PRINCE GEORGE	PRINCE GEORGE
Province or territory and postal code	BC V2L3E5	BC V2L3E5

F2 Name and address of individual who completed this return.

Name		
Company name (if applicable) KSO Accounting Group		
Complete street address 1181 - 3rd Avenue		
City, province or territory, and postal code Prince George BC V2L 3E4		
Phone number (250) 564-8949		
		Is this the same individual who certified in Section E above? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Privacy statement

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

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

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

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

I confirm that I have read the Privacy statement above.

Checklist

A charity's complete annual information return includes:

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

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

Foundations **Schedule 1**

- 1** Did the foundation acquire control of a corporation? **100** Yes No
 - 2** Did the foundation incur any debts other than for current operating expenses, purchasing or selling investments, or in administering charitable activities? **110** Yes No
- For private foundations only:**
- 3** Did the foundation hold any shares, rights to acquire shares, or debts owing to it that meet the definition of a non-qualified investment? **120** Yes No
 - 4** Did the foundation own more than 2% of any class of shares of a corporation at any time during the fiscal period? **130** Yes No
- If yes, you must complete and attach Form T2081, Excess Corporate Holdings Worksheet for Private Foundations.**

Activities outside Canada **Schedule 2**

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

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

- 1** Total expenditures on activities/programs/projects carried on outside Canada, excluding gifts to qualified donees . **200** \$ _____ 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 gifts to qualified donees)? **210** Yes No

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

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

--	--	--

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

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

- 4** Were any projects undertaken outside Canada funded by Global Affairs Canada? **220** Yes No
- If yes, what was the total amount the charity spent under this arrangement? **230** \$ _____**

- 5** Were any of the charity's activities outside of Canada carried out by employees of the charity? **240** Yes No

- 6** Were any of the charity's activities outside of Canada carried out by volunteers of the charity? **250** Yes No

- 7** Did the charity export goods as part of its charitable activities? **260** Yes No
- If yes, list the items exported, their destination, the country code, and their value.**

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

--	--	--	--

Protected B when completed**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** 22

(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="checkbox"/> \$1 – \$39,999	310 <input type="checkbox"/> 6 \$40,000 – \$79,999	315 <input type="checkbox"/> 3 \$80,000 – \$119,999
320 <input type="checkbox"/> 1 \$120,000 – \$159,999	325 <input type="checkbox"/> \$160,000 – \$199,999	330 <input type="checkbox"/> \$200,000 – \$249,999
335 <input type="checkbox"/> \$250,000 – \$299,999	340 <input type="checkbox"/> \$300,000 – \$349,999	345 <input type="checkbox"/> \$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** 39

(b) Total expenditure on compensation for part-time or part-year employees in the fiscal period. **380** \$ 410,949

3 Total expenditure on all compensation in the fiscal period. **390** \$ 1,973,766

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)
CanadaHelps.org	Yes
PayPal Giving Fund Canada	Yes

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"/>	

Non-cash gifts **Schedule 5**

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

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

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

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

Detailed financial information **Schedule 6**

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

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

Statement of financial position

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

Assets:	Liabilities:
Cash, bank accounts, and short-term investments 4100 \$ 325,385	Accounts payable and accrued liabilities 4300 \$ 109,741
Amounts receivable from non-arm's length persons 4110 \$ 95	Deferred revenue 4310 \$ 938,144
Amounts receivable from all others 4120 \$ 163,839	Amounts owing to non-arm's length persons 4320 \$ 178,258
Investments in non-arm's length persons 4130 \$	Other liabilities 4330 \$ 255,658
Long-term investments 4140 \$	Total liabilities (add lines 4300 to 4330) ... 4350 \$ 1,481,801
Inventories 4150 \$ 2,074	Amount included in lines 4150, 4155, 4160, 4165 and 4170 not used in charitable activities 4250 \$
Land and buildings in Canada 4155 \$ 1,198,156	
Other capital assets in Canada 4160 \$ 397,826	
Capital assets outside Canada 4165 \$	
Accumulated amortization of capital assets 4166 \$ (492,590)	
Other assets 4170 \$ 23,792	
10 year gifts 4180 \$	
Total assets (add lines 4100 to 4170) 4200 \$ 1,618,577	

Statement of operations

Revenue:

Total eligible amount of all gifts for which the charity has issued or will issue tax receipts 4500 \$ 48,366	
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 \$ 814,613	
Total other gifts received for which a tax receipt was not issued by the charity (excluding amounts at lines 4575 and 4630) 4530 \$ 67,007	
Total revenue received from federal government 4540 \$ 9,691	
Total revenue received from provincial/territorial governments 4550 \$ 1,621,337	
Total revenue received from municipal/regional governments 4560 \$ 82,802	
Total tax-receipted revenue from all sources outside of Canada (government and non-government) 4571 \$	
Total non tax-receipted revenue from all sources outside Canada (government and non-government) 4575 \$	
Total interest and investment income received or earned 4580 \$ 23	
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 \$ 218,153	
Total non tax-receipted revenues received for memberships, dues and association fees 4620 \$	
Total non tax-receipted revenue from fundraising 4630 \$	
Total revenue from sale of goods and services (except to any level of government in Canada) 4640 \$ 61,486	
Other revenue not already included in the amounts above 4650 \$ 28,773	
Specify type(s) of revenue included in the amount reported at 4650 4655 Clubhouse rebuild contributions	
Total revenue (add lines 4500, 4510 to 4560, 4575, 4580, and 4600 to 4650) 4700 \$ 2,952,251	

Expenditures:

Advertising and promotion	4800 \$	6,746
Travel and vehicle expenses	4810 \$	49,118
Interest and bank charges	4820 \$	12,898
Licences, memberships, and dues	4830 \$	11,002
Office supplies and expenses	4840 \$	74,200
Occupancy costs	4850 \$	311,051
Professional and consulting fees	4860 \$	94,223
Education and training for staff and volunteers	4870 \$	38,936
Total expenditure on all compensation (enter the amount reported at line 390 in Schedule 3, if applicable)	4880 \$	1,973,766
Fair market value of all donated goods used in charitable activities	4890 \$	
Purchased supplies and assets	4891 \$	298,620
Amortization of capitalized assets	4900 \$	49,942
Research grants and scholarships as part of charitable activities	4910 \$	
All other expenditures not included in the amounts above (excluding gifts to qualified donees)	4920 \$	11,801
Specify type(s) of expenditures included in the amount reported at 4920	4930	Client subsidies
Total expenditures before gifts to qualified donees (add lines 4800 to 4920)	4950 \$	2,932,303
Of the amounts at lines 4950:		
(a) Total expenditures on charitable activities	5000 \$	2,740,323
(b) Total expenditures on management and administration	5010 \$	191,449
(c) Total expenditures on fundraising	5020 \$	531
(d) Total other expenditures included in line 4950	5040 \$	
Total amount of gifts made to all qualified donees	5050 \$	
Total expenditures (add lines 4950 and 5050)	5100 \$	2,932,303

Other financial information

Permission to accumulate property:

Only registered charities that have written permission to accumulate should complete this section.

- Enter the amount accumulated for the fiscal period, including income earned on accumulated funds **5500** \$
- Enter the amount disbursed for the fiscal period for the specified purpose **5510** \$

Permission to reduce disbursement quota:

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

5750 \$

Property not used in charitable activities:

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

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



Canada Revenue Agency / Agence du revenu du Canada

Protected B when completed

Directors/Trustees and Like Officials Worksheet

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:

7

Charity name:
CANADIAN MENTAL HEALTH ASSOCIATION OF NOR

Business number:
131377061RR0001

Return for fiscal period ending (YYYY/MM/DD):
2,0,2,2 | 0,3 | 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: <u>Wayow</u> First name: <u>Jeffrey</u> Initial: _____ Term ▶ Start date (Y/M/D): <u>2,0,1,5</u> <u>1,0</u> <u>0,1</u> End date (Y/M/D): _____ _____ _____ Position: <u>President</u> At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Residential address - Street no. and name: <u>7746 Lemoyner Place</u> City <u>Prince George</u> Prov/Terr: <u>BC</u> Postal code: <u>V2N3N1</u> Phone number: <u>2,5,0,-</u> <u>5,6,4,-</u> <u>8,6,4,4</u> Date of birth (Y/M/D) <u>1,9,8,7,0,6,0,2</u>
Last name: <u>Kurc</u> First name: <u>Andrew</u> Initial: _____ Term ▶ Start date (Y/M/D): <u>2,0,1,9</u> <u>1,0</u> <u>0,1</u> End date (Y/M/D): _____ _____ _____ Position: <u>Secretary</u> At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Residential address - Street no. and name: <u>1601 Gorse St</u> City <u>Prince George</u> Prov/Terr: <u>BC</u> Postal code: <u>V2L1G5</u> Phone number: <u>2,5,0,-</u> <u>5,6,4,-</u> <u>8,6,4,4</u> Date of birth (Y/M/D) <u>1,9,7,0,0,1,0,1</u>
Last name: <u>Schmidt</u> First name: <u>Glen</u> Initial: _____ Term ▶ Start date (Y/M/D): <u>2,0,1,9</u> <u>1,0</u> <u>0,1</u> End date (Y/M/D): _____ _____ _____ Position: <u>Director</u> At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Residential address - Street no. and name: <u>14170 Allison Cres</u> City <u>Prince George</u> Prov/Terr: <u>BC</u> Postal code: <u>V2N5B2</u> Phone number: <u>2,5,0,-</u> <u>5,6,4,-</u> <u>8,6,4,4</u> Date of birth (Y/M/D) <u>1,9,5,2,0,6,2,8</u>
Last name: <u>Mansour</u> First name: <u>Nadia</u> Initial: _____ Term ▶ Start date (Y/M/D): <u>2,0,2,0</u> <u>1,1</u> <u>2,6</u> End date (Y/M/D): _____ _____ _____ Position: <u>Director</u> At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Residential address - Street no. and name: <u>7861 St. Mary Place</u> City <u>Prince George</u> Prov/Terr: <u>BC</u> Postal code: <u>V2N7A5</u> Phone number: <u>2,5,0,-</u> <u>5,6,4,-</u> <u>8,6,4,4</u> Date of birth (Y/M/D) <u>2,0,0,2,1,1,1,5</u>
Last name: <u>Lang</u> First name: <u>Joseph</u> Initial: _____ Term ▶ Start date (Y/M/D): <u>2,0,2,1</u> <u>0,9</u> <u>0,1</u> End date (Y/M/D): _____ _____ _____ Position: <u>Director</u> At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Residential address - Street no. and name: <u>13363 281 Road</u> City <u>Charlie Lake</u> Prov/Terr: <u>BC</u> Postal code: <u>V0C1H0</u> Phone number: <u>2,5,0,-</u> <u>5,6,4,-</u> <u>8,6,4,4</u> Date of birth (Y/M/D) <u>1,9,7,0,0,1,0,1</u>
Last name: <u>Kawchuk</u> First name: <u>Marlo</u> Initial: _____ Term ▶ Start date (Y/M/D): <u>2,0,2,1</u> <u>0,9</u> <u>0,1</u> End date (Y/M/D): _____ _____ _____ Position: <u>Director</u> At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Residential address - Street no. and name: <u>304-1910 Renwick Cres</u> City <u>Prince George</u> Prov/Terr: <u>BC</u> Postal code: <u>V2M1Y4</u> Phone number: <u>2,5,0,-</u> <u>5,6,4,-</u> <u>8,6,4,4</u> Date of birth (Y/M/D) <u>1,9,6,7,0,5,1,8</u>
Last name: <u>Javaherdashti</u> First name: <u>Arsham</u> Initial: _____ Term ▶ Start date (Y/M/D): <u>2,0,2,1</u> <u>0,9</u> <u>0,1</u> End date (Y/M/D): _____ _____ _____ Position: <u>Director</u> At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Residential address - Street no. and name: <u>1782 Harper Dr</u> City <u>PrinceGeorge</u> Prov/Terr: <u>BC</u> Postal code: <u>V2M2Y8</u> Phone number: <u>2,5,0,-</u> <u>5,6,4,-</u> <u>8,6,4,4</u> Date of birth (Y/M/D) <u>1,9,7,0,0,1,0,1</u>
Last name: _____ First name: _____ Initial: _____ Term ▶ Start date (Y/M/D): _____ _____ _____ End date (Y/M/D): _____ _____ _____ Position: _____ At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No	Residential address - Street no. 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.

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

At 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 canada.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.

T3010 Summary for CANADIAN MENTAL HEALTH ASSOCIATION OF NORTHERN BC

Identification

Fiscal period ending: 20220331 Address: 1152 3RD AVENUE Email _____
 BN/Registration number: 131377061 Phone () - _____
 City PRINCE GEORGE, BC Website _____

Financial Information

Compensation

# of full time positions	300 =	22
# of part time positions	370 =	39
Total expenditures		
part-time	380 =	410,949
all staff	390 =	1,973,766

Other Activity

Total amount		
expenditures outside CAN	200 =	
CIDA projects	230 =	
tax-receipted gifts	580 =	
Fundraisers		
gross revenue collected	5450 =	9,391
paid to/retained by	5460 =	531

Summary of Financial Information

Total assets	4200 =	1,618,577	Total revenue	4700 =	2,952,251
Total liabilities	4350 =	1,481,801	Total expenditures	5100 =	2,932,303

Notes

Summary 5 Year for CANADIAN MENTAL HEALTH ASSOCIATION OF NORTHERN BC

T3010 Fiscal period ending:

Details of charitable activities	Current Year	1st Preceding Year	2nd Preceding Year	3rd Preceding Year	4th Preceding Year
Activity outside Canada					
Total expenditures outside Canada	200				
CIDA projects	230				
Compensation					
Number of full-time positions	300	22	28	28	19
Number of part-time positions	370	39	21	36	25
Total expenditures for part-time staff	380	410,949	145,526	188,200	228,930
Total expenditures for all staff	390	1,973,766	1,966,768	1,725,049	1,458,330
Gifts in kind					
Total amount tax-receipted gifts in kind	580				
Political activities					
Total amount - political activities	5030				
Total amount of gifts - qualified donees	5031				
Received outside CAN - political activity	5032				
External fundraising					
Gross revenue collected by fundraisers	5450	9,391	13,994		
Amounts paid to/retained by fundraisers	5460	531	957		
Summary of Financial Position					
Total assets	4200	1,618,577	1,448,449	839,103	720,912
Total liabilities	4350	1,481,801	1,331,621	829,381	682,445
Total revenue	4700	2,952,251	2,779,070	2,416,761	2,234,069
Total expenditures	5100	2,932,303	2,671,966	2,453,547	2,207,565