

Agence du revenu du Canada

### **Registered Charity Information Return**

Se	tion A: Identification				
•	To help you fill out this form, refer to Guide T4033,	Completing the Registered Charity Information	Return. It can be found at <u>cana</u>	da.ca/cra-for	ms.
Note	: Even if a charity is inactive, an information return r	nust be filed to maintain its registered status.			
Con	plete the following:				
1.	Charity name:	CL	IENT CC	PY	
	AIDS New Brunswick Inc./SIDA Nouveau-Bru	unswick Inc.			
2.	Return for fiscal period ending: 3. B	N/registration number:	4. Web address (if applicat	ole):	
	Year Month Day 2   0   2   4   0   3   3   1	1877 9040 RR 0001	https://aidsnb.com/		
A1	Was the charity in a subordinate position to a head <b>If yes</b> , give the name and BN/registration number of	•	1510	Yes	X No
	Name		BN (9 digits, 2 letters, 4 digits. Exa	imple: 12345678	39RR0001)
A2	Has the charity wound-up, dissolved, or terminated	operations?	1570	Yes	X No
А3	Is the charity designated as a public foundation or p	private foundation?	1600	Yes	X No
	If yes, you must complete Schedule 1, Foundation detail page.	is. To confirm the charity's designation, go to $\underline{\mathfrak{g}}$	canada.ca/charities-list and re	efer to the cha	arity's
Sec	tion B: Directors/trustees and like officials				
В1	All charities must complete Form T1235, Directors/available to the public.	Trustees and Like Officials Worksheet. Only the	public information section of the	he worksheet	is
	For charities subject to the Ontario Corporations	s Act			
	As of May 15, 2021, the Canada Revenue Agency r Services. For more information on filing an Ontario a	no longer collects this information on behalf of th	ne Ontario Ministry of Governmentes	ent and Cons	umer
for y	: If you would like these individuals to have the authour Business Number (BN). For more information, gonization" and see "Change director."	ority to communicate with the CRA on behalf of to canada.ca/charities-giving, select "Operat	your charity, their name must a ting a registered charity," then "	lso appear as Making a cha	an owner nge to your
Sec	tion C: Programs and general information				
C1	Was the charity active during the fiscal period? If no, explain why in the "Ongoing programs" space		1800	X Yes	No
C2	Describe all <b>ongoing</b> and <b>new</b> charitable programs documents). "Programs" includes:	during this fiscal period that furthered the chari	ty's purpose(s) (as defined in its	governing	
	(1) charitable activities that the charity carries out or				
	(2) qualifying disbursements that the charity makes Charities making qualifying disbursements should discontributions of its volunteers in carrying out its active.	escribe the types of organizations they support.	The charity may also use this s	space to desc	ribe the
	Do not include the names of employees or voluntee		Tioure.		
	<b>Do not</b> describe fundraising activities in this space.				
Do n	ot attach additional sheets of paper or annual re	ports.			
AIDS Hepa	oing programs  New Brunswick Inc. is a provincial organization that aims to promote  titis C and other sexually transmitted and blood borne infections in Ne  ation, and support initiatives.	and support the health and well-being of people living with and by Brunswick through the provision of prevention,	affected by HIV/AIDS while helping to rec	duce the spread o	f HIV,
	osite and resources presentations and health fairs, Work with commu- nichi and Bathurst	nity partners Tto provide emergency services, a needle exchan	ge program and naloxon distribution for pe	eople at risk in Fre	edericton,
	programs				
Alexantrast					

orga	anizations described in the Income Tax Act.	well as	certain othe	er
C3	Did the charity make gifts or transfer funds to qualified donees or other organizations, excluding grants to non-qualified donees?	2000	Yes	X No
	Important: If yes, you must complete Form T1236, Qualified donees worksheet/Amounts provided to other organization	S.		
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	X No
	Important: If yes, you must complete Schedule 2, Activities outside Canada.			
C5	Public policy dialogue and development activities			
	This question has been removed.			
	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 used during the fiscal period:	all fundr	aising metho	ods that it
	2500 Advertisements/print/radio/ TV commercials 2570 Sales 2620	elephon	e/TV solicita	ations
	2510	Ournam	ent/sporting	events
	2520 Collection also flows			
	2540 Door to deer collicitation		lated marke	ting
	2550 Drawallattarias	Other		
	2550 Draws/lotteries 2600 Targeted corporate donations/sponsorships	fy:		
	2560 Fundraising dinners/galas/concerts 2610 Targeted contacts			
C7	Did the charity pay external fundraisers?	2700	Yes	X No
	If yes, you must complete the following lines, and complete Schedule 4, Confidential data, Table 1.			
		5450 \$	5	0
	(2) Enter the amount paid to analytic tandrated by the tandrated s.	5460 \$	3	0
	(c) Select the method of payment to the fundraiser:			
	2730         Commissions         2750         Finder's fee         2770	Ho	noraria	
	2740         Bonuses         2760         Set fee for services         2780	Oth	ner	
	2790 Specify:			
	(d) Did the fundrings incure toy receipts an help of the shariful?	2800	☐ Yes	П No
00	(a) and an analysis to the solution of the original solutions and the original solutions are solutions and the original solutions and the original solutions are solutions are solutions.	2000		
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	X No
C9	Did the charity incur any expenses for compensation of employees during the fiscal period?	3400	X Yes	No
C10	Did the charity receive any donations or gifts of any kind valued at \$10,000 or more from any donor that was <b>not</b> resident in Canada and was <b>not</b> any of the following:	3900	Yes	X No
	a Canadian citizen, nor			
	employed in Canada, nor			
	<ul> <li>carrying on a business in Canada, nor</li> <li>a person having disposed of taxable Canadian property?</li> </ul>			
	Important: If yes, you must complete Schedule 4, Confidential data, Table 2, for each donation of \$10,000 or more.			
PERMIT	_	4000		[] N
211	Did the charity receive any non-cash gifts for which it issued tax receipts?	4000	Yes	x No
212		5800	Yes	X No
213		5810	Yes	X No
C14	and any other control of account of the property. (Checket of permission account	5820	Yes	X No
15		5830	Yes	X No
	Side the charty have direct partitions and nothings at any time during the fiscal period?	405 CAL 28		

### 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.

Sho	w all amounts to the nearest single Canadian dollar. Do not enter "See attached financial statements." All releva	nt fields	must be fille	d 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:	F-100-100-100-100-100-100-100-100-100-10		
	Did the charity own land and/or buildings?	4050	Yes	No
	Total assets (including land and buildings)	4200	\$	0
	Total liabilities	4350	\$	0
	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	\$	0
	Total amount received from other registered charities	4510	\$	0
	Total other gifts received for which a tax receipt was <b>not</b> issued by the charity (excluding amounts at lines 4575 and 4630)	4530	\$	0
	Did the charity receive any revenue from any level of government in Canada?	4565	Yes	☐ No
	If yes, total amount received.	4570	\$	0
	Total tax-receipted revenue from all sources outside of Canada (government and non-government)			
	Total <b>non</b> tax-receipted revenue from all sources outside of Canada (government and non-government)	4575	\$	0
	Total <b>non</b> tax-receipted revenue from fundraising	4630	\$	0
	Total revenue from sale of goods and services (except to any level of government in Canada)	4640	\$	0
	Other revenue not already included in the amounts above	4650	\$	0
	Total revenue (add lines 4500, 4510 to 4570, and 4575 to 4650)	4700	\$	0
<b>)4</b>	Expenditures:	poner versions		
	Professional and consulting fees	4860	\$	0
	Travel and vehicle expenses.	4810	\$	0
	All other expenditures not already included in the amounts above (excluding qualifying disbursements)	4920	\$	0
	Total expenditures (excluding qualifying disbursements) (add lines 4860, 4810, and 4920)	4950	\$	0
	Of the amount at line 4950:			
	(a) Total expenditures on charitable activities			
	(b) Total expenditures on management and administration			
	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	\$	0

### 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) Linda Thompson-Brown	Signature
Position in charity Executive Director	 Phone number 506 455-2625

### Section F: Confidential data

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.

	Phys	ical address of the charity	Address fo	or the charity's books and records
Complete street address	Suite 203-440	Wilsey Road	Suite 203-44	0 Wilsey Road
City	Fredericton		Fredericton	
Province or territory and postal code	NB	E3B 7G5	NB	E3B 7G5

F2 Name and address of individual who completed this return.

Name				
Company name (if applicable) Shannon & Buffett LLP				
Complete street address 535 Beaverbrook Court Suite 110				
City, province or territory, and postal code Fredericton	NB	E3B 1X6		
Phone number 506 458-9300		Is this the same individual who certified in Section E above?	Yes	X 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.

X 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.

	oundations			Schedul	e 1
Did the foundation acquire control of a corporation?			10	00 Yes	No
Did the foundation incur any debts other than for current ope or in administering charitable activities?				10 Yes	No
(a) What was the total value of all restricted funds held at the	e end of the fiscal period?	?	11	11 \$	0
(b) Of that amount, what amount was the foundation not per	rmitted to spend due to a	funder's written t	rust or direction?	12 \$	0
For private foundations only:					
Did the foundation hold any shares, rights to acquire shares non-qualified investment?				20 Yes	No
Did the foundation own more than 2% of any class of shares If yes, you must complete and attach Form T2081, Excess 0				Yes Yes	No
	ties outside Canada			Schedul	e 2
Important: If you complete this section, you must answer yes to	question C4.				
For more information, go to canada.ca/charities-giving and se	e Guidance CG-002, Can	nadian registere	d charities carrying or	activities outsid	le Canada.
1 Total expenditures on activities/programs/projects carried on	n outside Canada, excludi	ng qualifying dis	bursements 20	00 \$	0
Were any of the charity's financial resources spent on prograrrangement including a contract, agency agreement, or joir (excluding qualifying disbursements)?	nt venture to any other ind	dividual or organi	zation	0 Yes	No
If yes, provide details of the amount reported in question 1 or				izations in the follo	owing table:
Name of individual/organization		activities w	ode where the ere carried out end of Schedule 2)	Amount Show amounts to Canadian d	the nearest
Important: If you entered information in the table above, you mus					
Using the table below, enter the countries outside Canada w	where the charity itself car	ried on programs	s or devoted any of its r	resources.	
			postanci .	DESCRIPTION OF THE PROPERTY OF	
Were any projects undertaken outside Canada funded by G	lobal Affairs Canada?		60730000		No
If yes, what was the total amount the charity spent under thi	is arrangement?		ENGINEER CO.		0
Were any of the charity's activities outside of Canada carried	d out by employees of the	charity?	Manager		∐ No
Were any of the charity's activities outside of Canada carried	d out by volunteers of the	charity?	GRANGES .		∐ No
7 Did the charity export goods as part of its charitable activitie			26	Yes Yes	No
If yes, list the items exported, their destination, the country of	code, and their value.				
Item exported	Destination (city	y/region)	Country code	Value (C/	AN \$)

### Country codes

AF-Afghanistan CU-Cuba AL-Albania CY-Cyprus DZ-Algeria DK-Denmark AO-Angola DO-Dominican Republic AR-Argentina EC-Ecuador AM-Amenia EG-Egypt SV-El Salvador AZ-Azerbaijan BD-Bangladesh ET-Ethiopia BY-Belarus FR-France BT-Bhutan GA-Gabon BO-Bolivia GM-Gambia BA-Bosnia and Herzegovina GE-Georgia BW-Botswana **DE-Germany** BR-Brazil GH-Ghana BN-Brunei Darussalam GT-Guatemala BG-Bulgaria GY-Guyana BI-Burundi HT-Haiti KH-Cambodia HN-Honduras CM-Cameroon IN-India CF-Central African Republic ID-Indonesia TD-Chad IR-Iran CL-Chile IQ-Iraq CN-China IL-Israel CO-Colombia

PS-Israeli Occupied Territories

IT-Italy

JM-Jamaica

JP-Japan

JO-Jordan

KE-Kenya

KZ-Kazakhstan

KP-North Korea KR-South Korea KW-Kuwait KG-Kyrgyzstan LA-Laos LB-Lebanon LR-Liberia MK-Macedonia MG-Madagascar MY-Malaysia ML-Mali MU-Mauritius MX-Mexico MN-Mongolia ME-Montenegro MZ-Mozambique MM-Myanmar (Burma) NA-Namibia NL-Netherlands NI-Nicaragua NE-Niger NG-Nigeria OM-Oman PK-Pakistan PA-Panama PE-Peru PH-Philippines PL-Poland

QA-Qatar

RE-Réunion

RO-Romania RU-Russia RW-Rwanda SA-Saudi Arabia RS-Serbia SL-Sierra Leone SG-Singapore SO-Somalia ES-Spain LK-Sri Lanka SD-Sudan SY-Syrian Arab Republic TJ-Tajikistan TZ-United Republic of Tanzania TH-Thailand TL-Timor-Leste TR-Turkey UG-Uganda UA-Ukraine GB-United Kingdom US-United States of America **UY-Uruguay** UZ-Uzbekistan VE-Venezuela VN-Vietnam YE-Yemen ZM-Zambia ZW-Zimbabwe

### Use the following codes for countries not listed above:

QS-Other countries in Africa

KM-Comoros

CR-Costa Rica

CI-Côte d'Ivoire

HR-Croatia

CG-Republic of Congo

QR-Other countries in Asia and Oceania

CD-Democratic Republic of Congo

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		and the second second	e egyő élen köztéség Megyőréssők élentesség	Schedule 3
mportant: If you complete this section, you must	answer <b>yes</b> to question C9.				
<ol> <li>(a) Enter the number of permanent, full-time represent the number of positions the ch not include independent contractors. Do</li> </ol>	e, compensated positions in the fiscal perior arity had including both managerial position not enter a dollar amount	is and others, ai	nd should	300	
(b) For the <b>ten (10)</b> highest compensated, position within each of the following annual comp	ermanent, full-time positions enter the <b>num</b> ensation categories. <b>Do not</b> tick the boxes;		s that are		
305 9 \$1 - \$39,999	310 1 \$40,000 - \$79,999	31	5 0 \$80,	000 – \$119,9	99
320 0 \$120,000 - \$159,999	325 0 \$160,000 - \$199,999	33	0 \$200	0,000 - \$249,	999
335 0 \$250,000 - \$299,999	340 0 \$300,000 - \$349,999	34	5 0 \$350	0,000 and ove	ır
(a) Enter the <b>number</b> of part-time or part-ye	ar (for example, seasonal) employees the c	harity employed	during	370	
the fiscal period. (b) Total expenditure on compensation for page 1	art-time or part-year employees in the fisca			380 \$	29,58
Total expenditure on all compensation in the	fiscal period.			390 \$	309,93
	Confidential data		1. 16. 17. 7. 4		Schedule 4
portant: If you complete this section, you must	answer <b>yes</b> to question C10.			kinda arabiyli ili da da taribiyli ili	
partments and agencies). Information about external fundraisers ter the name(s) and arm's length status of each	external fundraiser.				
Na	ime (confidential)				igth? Yes/No dential)
nformation about donors not resident in Car					
carrying on business in Canada, nor a person having disposed of taxable Canadia ter the name of each donor and the value of the lity, charity, non-profit organization), a government	gift in the table below. Select whether the	donor was an or	ganization (for e	example a bu	siness, corporate
		Type of	donor (confide	ential)	
Name (confid	lential)	Organization	Government	Individual	Value (CAN \$)
		Control of the second		75729 - 7597 - 753.25	Schedule 5
portant: If you complete this section, you must	Non-cash gifts answer <b>yes</b> to question C11.				Scriedule 3
Select all types of non-cash gifts received for					
500 Artwork/wine/jewellery	525 Ecological properties			ublicly traded mmodities/m	
505 Building materials	530 Life insurance policies		\$15.500 (C) 5/16	onmodities/m ooks	utuai iunus
510 Clothing/furniture/food	535 Medical equipment/supp	lies	560 0	ther	
515 Vehicles	540 Privately-held securities		565 Specif	y:	
520 Cultural properties	545 Machinery/equipment/computers/software				
Enter the total amount of tax-receipted non-c				580 \$	

a da la companya da	Detail	ed fina	ncial informat	ion		Schedul	e 6
Fill out this schedule if <b>any</b> of the following applies to (a) The charity's revenue exceeded \$100,000. (b) The amount of all property (for example, investr (c) The charity had permission to accumulate funds	ments, i	rental p		used in charitable activities was more than \$25	,000.		
Was the financial information reported below prepare	d on an	accrua	ıl or cash basis	3? 40	20 X	Accrual	Cash
Statement of financial position							
Show all amounts to the nearest single Canadian	dollar.	Do not	enter "see at	tached financial statements." All relevant fic	elds mus	t be fille	d out.
Assets:				Liabilities:			
Cash, bank accounts, and short-term investments	4100	\$	212,635	Accounts payable and accrued liabilities	4300	\$	9,372
Cash and bank				Deferred revenue	4310	\$	0
accounts				Amounts owing to non-arm's length persons	4320	\$	0
investments				Other liabilities	4330	\$	0
Amounto receivable non mon-anna length persons	4110	\$	7,771	Total liabilities (add lines 4300 to 4330)	4350	\$	9,372
Amounts receivable from all others	4120	\$	0				
investments in non-ann s length persons	4130	\$	0				
Long-term investments	4140 4150	\$	0				
inventories	10.00	\$	0				
Land and buildings in Canada	4133	Ф	0	Amount included in lines 4150, 4155, 4160, 4165 and 4170 not used in	1000	<u></u>	
Used for charitable programs or administration				charitable activities	4250	\$	0
Used for other purposes							
Other capital assets in Carlada	4160	\$	38,424				
Capital assets outside Canada	4165	\$	0				
Accumulated amortization of capital assets	4166	\$	(5,891)				
Other addets	4170	\$	2,953				
Impact investments 4190 \$ 0							
Total assets (add lines 4100, 4110 to 4155, and 4160 to 4170)	4200	\$	255,892				
Statement of operations							
Revenue:					Green and and		
Total eligible amount of all gifts for which the charity h	nas issu	ied or w	vill issue tax red	SERVICE STREET, STREET	4500	\$	0
Total eligible amount of tax-receipted tuition fees				5610 \$ 0	Vernous		
Total amount received from other registered charities					4510		0
Total other gifts received for which a tax receipt was r	n <b>ot</b> issu	ed by the	he charity (exc	luding amounts at lines 4575 and 4630)	4530	\$	50
Total revenue received from federal government					4540	\$	162,697
Total revenue received from provincial/territorial gove	mment	S			4550	\$	287,926
Total revenue received from municipal/regional gover					4560	\$	0
Total tax-receipted revenue from all sources outside on non-government)				4571 \$ 0			
Total <b>non</b> tax-receipted revenue from all sources outs	side Cai	nada (g	overnment and		4575	\$	0
Total interest and investment income from impact investment	estment	ts		Participation of the Control of the			
Total interest and investment income from persons no	ot at am	n's leng	th	4577 \$ 0	\$1.60E \$2.00E		
Total interest and investment income received or earn	ned			<u></u>	4580	\$	1,511
Gross proceeds from disposition of assets				4590 \$ 0	00 1924 V C 1980		
Net proceeds from disposition of assets (show a neg	ative ar	mount v	vith brackets)		4600	\$	00
Gross income received from rental of land and/or buil-	dings				4610	\$	0
Total <b>non</b> tax-receipted revenues received for member	erships,	dues a	ind association	fees	4620	\$	0
Total <b>non</b> tax-receipted revenue from fundraising					4630	\$	0
Total revenue from sale of goods and services (except	ot to any	y level c	of government	in Canada)	4640	\$	64,031
Other revenue not already included in the amounts at	oove		1000		4650	\$	0
Specify type(s) of revenue included in the amount rep	orted a	t 4650	4655			T <sub>0</sub>	
Total revenue (add lines 4500, 4510 to 4560, 4575,					4700	\$	516,215

Expenditures:		
Advertising and promotion	4800 \$	3,369
Travel and vehicle expenses.	4810 \$	28,620
Interest and bank charges.	4820 \$	228
Licences, memberships, and dues	4830 \$	0
Office supplies and expenses.	4840 \$	7,559
Occupancy costs	4850 \$	40,019
Professional and consulting fees	4860 \$	12,638
Education and training for staff and volunteers	4870 \$	0
Total expenditure on all compensation (enter the amount reported at line 390 in Schedule 3, if applicable)	4880 \$	309,931
Fair market value of all donated goods used in charity's own activities.	4890 \$	0
Purchased supplies and assets	4891 \$	0
Amortization of capitalized assets	4900 \$	5,891
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 \$	50,705
Specify type(s) of expenditures included in the amount reported at 4920.  Telephone, Internet, medical, client dev		
Total expenditures before qualifying disbursements (add lines 4800 to 4920)	4950 \$	458,960
Of the amounts at lines 4950:		
(a) Total expenditures on charitable activities. 5000 \$ 339,448		
(b) Total expenditures on management and administration 5010 \$ 105,857		
(c) Total expenditures on fundraising		
(d) Total other expenditures included in line 4950 \$ 12,274		
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 \$	458,960
Total experiences (and titles 4550, 5045 and 5050)		100,000
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
	055599-05055200	
Permission to reduce disbursement quota:	State of the State	
If the charity has received approval to make a reduction to its disbursement quota, enter the amount for the fiscal period	5750 \$	0
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 <b>beginning</b> of the fiscal period	5900 \$	0
The 24 months before the <b>end</b> 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 fisc	cal period
Average value of property not used in charitable activities or administration (line	5900 from your return)
If permission to accumulate property has been granted, enter the total amount as specified purpose (add all amounts from lines 5500 minus all amounts at lines 55 permission to accumulate property period)	510 from all returns to date covered by the
Line 805 minus line 810 (if negative, enter 0)	815 \$ 0
If line 815 is \$1,000,000 or less	If line 815 is over \$1,000,000
	Line 815 minus \$1,000,000
	Line 825 multiplied by 5%
Multiply line 815 by 3.5%	Line 830 plus \$35,000
Enter the amount from line 820 or line 835. This is your charity's disbursement question for the current fiscal period	uota requirement 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)	
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 sho	205
If a shortfall exists (line 865 is negative), your charity can draw on disburse shortfall. If no excesses are available to draw on, your charity can try to sp to cover the shortfall.	ement excesses from the five previous fiscal periods to help it meet its end enough the following year to create an excess that it can carry back
Step 2. Estimating the disbursement quota requirement for the next fiscal p	period
Average value of property not used in charitable activities or administration prior return)	to the next fiscal period (line 5910 from your 870 \$ 0
If line 870 is \$1,000,000 or less	If line 870 is over \$1,000,000
	Line 870 minus \$1,000,000
	Line 880 multiplied by 5%
Multiply line 870 by 3.5%	Line 885 plus \$35,000

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

Protected B when completed

# Directors/Trustees and Like Officials Worksheet

Canada Revenue Agency

Agence du revenu du Canada

Directors/trustees and like

You <b>must</b> give us complete information for each director officials are persons who govern a registered charity. Se	frustee and like official who, at any time during the fiscal period of the teverse for information on filling out this form.	nis return, was a member of the charity's board of directo	ors/trustees
Total number of directors/trustees and like officials:	Charity name:	Business number:	Return for f

Return for fiscal period ending (YYYY/MM/DD): 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.calcharities-giving, select "Operating a registered charity," then "Making a change to your organization" and see "Change director." 2,0,2,4,0,3,3,1 Business number: AIDS New Brunswick Inc./SIDA Nouveau-Brunswick Inc Charity name:

Public information		Confidential data
Lastname: Edwards Firstname: James	Initial:	Residential address - Street number and name: 4-105 A Princess Street
Term ▶ Start date (Y/M/D):   2   0   2   3   0   4   0   1   End date (Y/M/D):		City: Saint John Prov/Terr: NB Postal code:   E   2   L   1   K
Position: Director At arm's length with other Directors?	No X Yes No	Phone number   5   0   6   -   4   6   9   -   0   2   0   8   Date of birth (Y/M/D):   1   9   6   6   0   2   1
Last name: Efford First name: Chad	Initial:	Residential address – Street number and name: 1-170 Ross Terrace
Term ▶ Start date (Y/M/D): 2 0 2 3 0 4 0 1 End date (Y/M/D): Position: Director At arm's length with other Directors?	X Yes No	City: Fredricton NB         Prov/Terr: NB         Postal code:         E   2   A   8   B           Phone number           5   0   6   -   2   6   1   -   5   5   6   2   Date of birth (Y/M/D):           1   9   7   9   0   1   2
Last name: Martin First name: Vince	Initial:	Residential address – Street number and name: 837 Shediac Road
Term         Start date (Y/M/D):         2         0         2         3         0         4         0         1         End date (Y/M/D):         Position:           Position:         Director         At arm's length with other Directors?	X Yes No	City: Moncton         Prov/Terr: NB         Prov/Terr: NB         Postal code:   E   1   A   5   X             Phone number           5   0   6   -   8   8   9   -   1   8   0   4           Date of birth (Y/M/D):   1   9   6   2   0   9   2
Last name: Wilkins First name: Trent	Initial:	Residential address – Street number and name: 75 Rennick Road
Term ► Start date (Y/M/D): 2 0 2 3 0 4 0 1 End date (Y/M/D): Position: Director?	X Yes	City:         Moncton         Prov/Terr:         NB         Postal code:         E   1   G   7   Y             Phone number           5   0   6   -   8   7   5   -   1   2   0   1   Date of birth (Y/M/D);           1   9   6   7   0   9   1
Last name: Sevy First name: Brian	Initial:	7 Rothesav Road
Term ▶ Start date (Y/M/D):         2         3         0         4         0         1         End date (Y/M/D):         Position:           Position:         Director         At arm's length with other Directors?	X Yes	City: Rothesay         Prov/Terr: NB         Postal code:         E   2   E   5   V           Phone number           5   0   6   -   6   4   6   -   0   8   9   6   Date of birth (Y/M/D);           1   9   6   7   0   8   1
Last name: Leblanc First name: Destiny	Initial:	Residential address – Street number and name: 251 Loch Lomond Road
Term         ▶ Start date (Y/M/D):         2         3         0         4         0         1         End date (Y/M/D):         Position:           Position:         Director         At arm's length with other Directors?	X Yes No	City:         Saint John         Prov/Terr.         NB         Prov/Terr.         NB         Protein (Y/M/D):           1   9   9   5   0   8   1
Last name: Hubbard First name: Sara	Initial:	Residential address – Street number and name: 32 Girouard Ln
Term         ▶ Start date (Y/M/D):         2         3         0         4         0         1         End date (Y/M/D):           Position:         Director         At arm's length with other Directors?	× × × × × × × × × × × × × × × × × × ×	City: Saint John       Prov/Terr: NB       Prov/Terr: NB       Postal code: E 2 S 3 A         Phone number       5 0 6 - 6 3 9 - 8 3 3 3 Date of birth (YM/D): 1 9 7 4 0 1 1
Last name: Thorpe First name: Amelia	Initial:	Residential address – Street number and name: 147 Pine Street
Term         ▶ Start date (Y/M/D):         2         0         2         3         0         4         0         1         End date (Y/M/D):                     Position:         Director         At arm's length with other Directors?	No   No   No   No   No   No   No   No	City: Frederiction         Prov/Terr: NB         Postal code:         E   3   A   3   A             Phone number           6   4   7   -   4   6   1   -   4   1   5   5           Date of birth (Y/M/D):           1   9   8   9   1   2   2
Last name: Clift First name: Murray	Initial:	Residential address – Street number and name: 170 Joyce Avenue #20
Term ▶ Start date (Y/M/D): 2 0 2 3 0 4 0 1 End date (Y/M/D): Position: Director Office of the control of the c	X Yes No	City:         Moncton         Prov/Terr:         NB         Postal code:         E   1   A   0   N           Phone number           9   0   2   - 2   2   9   -   4   9   6   9   Date of birth (Y/M/D);           1   9   5   7   0   7   2   2   2   2   3   3   3   3   3   3

Canada

(Ce formulaire est disponible en français.)

Protected B when completed

# Directors/Trustees and Like Officials Worksheet

Agence du revenu du Canada Canada Revenue Agency 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:	nd like officials	: Charity name:		Business number: Return for fiscal period ending (YYYY/MM/IDD):
Note: If you would like these individuals to have the authority to communicate with the to canada.ca/charities-giving, select "Operating a registered charity," then "Making a	uals to have the ct "Operating a	l sauthority to communicate with the CF registered charity," then "Making a ch	RA on behalf of your char ange to your organizatio	CRA on behalf of your charity, their name must also appear as an owner for your Business Number (BN). For more information, go change to your organization" and see "Change director."
Public information				Confidential data
Last name: Connors	First name:	me: Mike	Initial:	Residential address – Street number and name: 47 Kanes Lane
Term ▶ Start date (Y/M/D): 2 0	2   3   0   4	0 1 End date (Y/M/D):		City: Sunny Corner   Prov/Terr: NB   Postal code:   E   9   E   1   H   6
Position: Director		At arm's length with other Directors?	X Yes No	Phone number   5   0   6   -   3   5   2   -   6   9   2   9   Date of birth (Y/M/D):   1   9   6   7   1   0   0   6
Last name:	First name:	me.	Initial:	Residential address – Street number and name:
Term ▶ Start date (Y/M/D):		End date (Y/M/D):		City: Prov/Terr: Postal code:
Position:		At arm's length with other Directors?	Yes	Phone number     -     Date of birth (Y/M/D):
Last name:	First name:	me:	Initial:	Residential address – Street number and name:
Term ▶ Start date (Y/M/D):		End date (Y/M/D):		City: Prov/Terr: Prov/Terr:
Position:		At arm's length with other Directors?	Yes	Phone number     -     Date of birth (Y/M/D):
Last name:	First name:	me:	Initial:	Residential address – Street number and name:
Term ▶ Start date (Y/M/D):		End date (Y/M/D):		City: Prov/Terr: Prov/Terr:
Position:	-	At arm's length with other Directors?	Yes No	Phone number           -     -     Date of birth (Y/M/D):
Last name:	First name:	me:	Initial:	Residential address – Street number and name:
Term ▶ Start date (Y/M/D):		End date (Y/M/D):		City: Prov/Terr Doctal code:
Position:		At arm's length with other Directors?	Yes	ne number                               Date of birth (Y/M
actoame	Tiret torin			Danidaminal address Change and comme
<u> </u>	10 -		Initial.	dential address - Street number and r
Term ▶ Start date (Y/M/D):		End date (Y/M/D):		City: Prov/Terr.
Position:		At arm's length with other Directors?	Yes No	Phone number           -       Date of birth (Y/M/D):
Last name:	First name:	ne:	Initial:	Residential address – Street number and name:
Term ▶ Start date (Y/M/D):		End date (Y/M/D):		City: Prov/Terr: Prov/Terr:
Position:		At arm's length with other Directors?	Yes	Phone number           -       Date of birth (Y/M/D):
Last name:	First name:	me:	Initial:	Residential address – Street number and name:
Term ▶ Start date (Y/M/D):		End date (Y/M/D):		City: Prov/Terr. Prov/Terr.
Position:		At arm's length with other Directors?	Yes	Phone number           -     -     Date of birth (Y/M/D):
Lastname:	First name:	me:	Initial:	Residential address – Street number and name:
Term ▶ Start date (Y/M/D):		End date (Y/M/D):		City: Prov/Terr: Postal code:
Position:		At arm's length with other Directors?	Yes No	Phone number           -     -     Date of birth (Y/M/D):
Page 2 of 3			(Ce formulaire est dis	(Ce formulaire est disponible en français.)

# 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.