



Canada Revenue
Agency

Agence du revenu
du Canada

OTTAWA ON K1A 0L5

**REGISTERED CANADIAN AMATEUR
ATHLETIC ASSOCIATION INFORMATION
RETURN**

000019

CANADIAN OLYMPIC COMMITTEE
COMITE OLYMPIQUE CANADIEN
JUDY CRUTE
900-21 ST CLAIR AVE
TORONTO ON M4T 1L9

RECEIVED

TORONTO

Return for Fiscal Period Ending		
20	13	12 31
Year	Month	Day
Is this the first return filed by this association?		
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
If "No", has the fiscal period changed from the last return filed?		
Yes <input type="checkbox"/> No <input type="checkbox"/>		
Is this the final return to be filed by this association?		
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
If "Yes", please attach an explanation.		



15 106864614 RR 0001 2013-12-31 0234724

If the address shown above is incorrect or a more permanent address can be provided, print the necessary corrections below:

Name

Address (Number, Street, Apt. No., P.O. Box or R.R. No.)

Province or territory

Postal code

Charities Directorate
Direction des organismes de bienfaisance

RECEIVED / REÇU

NOTE:

To minimize the possibility of the annual mailing of the personalized Registered Canadian Amateur Athletic Association Information Return going astray, it is important that, where possible, a permanent mailing address be provided (i.e., address of the actual, physical location of the association or permanent P.O. Box number).

Instructions

1. Ensure that the name and address are correct. To correct pre-printed information on this form, please use the area provided. Any changes (except to the contact information above) must be explained in an attachment to this return.
2. Complete the boxes (above right) to indicate the end of the association's fiscal period.
3. Attach FINANCIAL STATEMENTS for the fiscal period covered by this return. These should include a statement of revenue and expenditures for the fiscal period and a statement of assets and liabilities as of the end of the fiscal period. The statements should indicate the different sources of revenue in sufficient detail to show how funds were spent or invested.
4. Attach a list of the names, addresses, and occupations or lines of business of the association's current directors.
5. Attach a list of the names and the official positions of the people who are authorized to issue official receipts for the association.
6. Attach a note that fully explains what replacement procedure is followed in the event of lost or spoiled receipts.
7. Within six months from the end of the fiscal period of the association, mail or deliver a completed return and all required documents to:

Charities Directorate
Canada Revenue Agency
Ottawa ON K1A 0L5

Information Required

1. Have any changes not previously reported been made in the association's governing documents? If yes, please attach a certified copy of the changes. Yes ☐ No ☒
2. Have complete books and records been kept (including duplicate copies of receipts) which fully substantiate all financial transactions during the fiscal period? If no, please attach an explanation. Yes ☒ No ☐
3. Please indicate the total amount for which the association issued official donation receipts in this fiscal period. \$44 862.57
4. Are the receipt forms used to acknowledge payments that are NOT gifts clearly distinguishable from official donation receipts which bear the BN/Registration Number? If no, please attach an explanation. Yes ☒ No ☐
5. Did the association issue official donation receipts showing a date in the previous calendar year for donations that were mailed or otherwise submitted after the end of the calendar year? If yes, please attach an explanation. Yes ☐ No ☒
6. Have official donation receipts been issued to acknowledge donations in a form other than cash or cheque - e.g., goods, services rendered, etc.? If yes, please attach a list of these gifts and their value as shown on the official donation receipt. Yes ☐ No ☒
7. Has any amount donated to the association been returned to the donor during the year? If yes, please attach an explanation. Yes ☐ No ☒
- 8 a. During the fiscal period, did the association accept any gifts with the express or implied condition that such gifts were to be used for the benefit of another person, club, society or association? If yes, please attach an explanation. Yes ☐ No ☒
- b. Did the association issue an official donation receipt to acknowledge such a gift? Yes ☐ No ☐

Certification



To be signed by two directors of the association

① I, Wayne Russell of [redacted] Address [redacted]
Name of director whose signature appears below. (Print)

2. I, Marcel Aubert of [redacted] Address [redacted]
Name of director whose signature appears below. (Print)

HEREBY CERTIFY that the information given in this return and in all statements attached is, to the best of my knowledge, correct and complete.

(Note: It is a serious offense to make false or deceptive statements.)

① Signature of Director 		Position with the Association <u>Treasurer</u>	
Home telephone number [redacted]	Business telephone number [redacted]	Date <u>June 25, 2014</u>	
② Signature of Director 		Position with the Association <u>President</u>	
Home telephone number [redacted]	Business telephone number [redacted]	Date <u>June 25, 2014</u>	

Canadian Olympic Committee							
Board of Directors							
Liability Insurance							
2014-2015							
Updated May 21, 2014							
Surname	First Name	Position	Organization	Street	City	Province	Postal Code
1 Aubut	Marcel	President					
2 Brisson	Therese	Non Officer					
3 Crooks	Charmaine	Non Officer					
4 Deacon	Martha	Non Officer					
5 Dione	Deidra	AC Chair					
6 Eames	Tony	Non Officer					
7 Edworthy	Gene A	Non Officer					
8 Gilmore	Kevin	Non Officer					
9 Hallett	William J	Non Officer					
10 Lawless	Peter	Coach Rep					
11 Peterson	Gordon	Vice President					
12 Pound	Richard	IOC					
13 Russell	Wayne	Treasurer					
14 Wickenheiser	Hayley	IOC					
15 Sieber	Walter	Non Officer					
16 Smith	Tricia	Vice President					
17 Van Koeverden	Adam	AC Rep					