

Agence du revenu
du Canada

**Registered Canadian Amateur
Athletic Association Information Return** **RCN**

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SALLE DU COURRIER

Identification

Name of association BIATHLON CANADA	
Address 100-1995 Olympic Way	
City Canmore	
Province or territory AB	Postal code T1W 2T6

Return for fiscal period ending

2019-04-30

Year Month Day

Is this the first return filed by this association?

Yes No

If "no," has the fiscal period changed from the last return filed?

Yes No

Is this the final return to be filed by this association?

Yes No

If "yes," please attach an explanation.

File number

BN/Registration number

13257 4104 RR0001

Is the address above the same mailing address as last year?

Yes No

If no, is the address above the new mailing address?

Yes No **Actions**

Delete the Identification area.

Delete the boxes (above right) to indicate the end of the association's fiscal period.

File FINANCIAL STATEMENTS for the fiscal period covered by this return. These should include a statement of revenue and expenditures for the 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 detail to show how funds were spent or invested.

File a list of the names, addresses, and occupations or lines of business of the association's current directors.

File a list of the names and the official positions of the people who are authorized to issue official receipts for the association.

File a note that fully explains what replacement procedure is followed in the event of lost or spoiled receipts.

File 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

Form authorized by the Minister of National Revenue.

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Information required

1. Have any changes not previously reported been made to 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. \$ _____

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, Gilliland, Bill Name of director whose signature appears below.
of [REDACTED] Address [REDACTED]

2. I, Dickson, Teresa Name of director whose signature appears below.
of [REDACTED] Address [REDACTED]

HEREBY CERTIFY that the information given in this return and in all attachments is, to the best of my knowledge, correct, complete and current.
(Note: It is a serious offense under the *Income Tax Act* to provide false or deceptive information.)

1. Signature of director	Position with the association
[REDACTED]	Director
Home telephone number	Business telephone number
[REDACTED]	
2. Signature of director	Position with the association
[REDACTED]	Director
Home telephone number	Business telephone number
[REDACTED]	

Biathlon Canada

Registered Canadian Amateur Athletic Association Information Return

Form T2-52

For the One month Ended April 30, 2019

ADDITIONAL INFORMATION TO SUPPLEMENT RESPONSES ON FORM

Instruction 3 – Financial Statements for the One Month Ended April 30, 2019 are attached

Instruction 4 – Form 1235 Directors/Trustees and Like Officials Worksheet is attached

Instruction 5

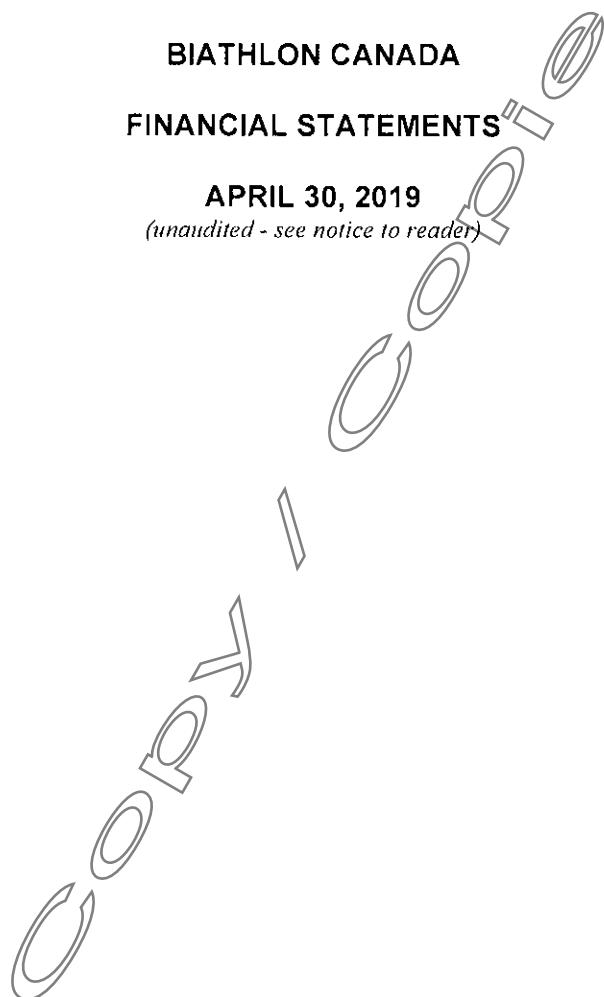
Heather Ambery (General Manager) is the only individual who has authority to issue official receipts for Biathlon Canada

Instruction 6

If a receipt is lost or spoiled the organization's procedure is to issue a replacement receipt. The replacement receipt includes all required information, the serial number of the original receipt, and a statement that it replaces the original receipt. The organization keeps a copy of the original receipt and marks it as cancelled. Please note that Biathlon Canada did not issue any official receipts in the period being reported on.

BIATHLON CANADA
FINANCIAL STATEMENTS

APRIL 30, 2019
(unaudited - see notice to reader)



NOTICE TO READER

On the basis of information provided by management, we have compiled the statement of financial position of Biathlon Canada as at April 30, 2019 and the statements of operations and changes in net assets for the one month then ended.

We have not performed an audit or a review engagement in respect of these financial statements and, accordingly, we express no assurance thereon.

Readers are cautioned that these statements may not be appropriate for their purposes.

Canmore, Alberta

Chartered Professional Accountants

BIATHLON CANADA
(Incorporated under the Canada Not-for-Profit Corporations Act)

STATEMENT OF FINANCIAL POSITION

APRIL 30, 2019

(unaudited - see notice to reader)

	ASSETS	2019
Current assets		
Cash	\$ 630,928	
Accounts receivable	237,753	
Prepaid expenses	6,913	
	<hr/>	
	875,594	
Property and equipment	58,785	
	<hr/>	
	\$ 934,379	
	LIABILITIES	
Current liabilities		
Accounts payable and accrued liabilities	\$ 491,885	
	NET ASSETS	
Invested in property and equipment	58,785	
Unrestricted equity in net assets	383,709	
	<hr/>	
	442,494	
	<hr/>	
	\$ 934,379	

BIATHLON CANADA
STATEMENT OF OPERATIONS
ONE MONTH ENDED APRIL 30, 2019
(unaudited - see notice to reader)

	2019
Revenues	
Membership and program fees	\$ 27,584
International Biathlon Union competition subsidies	244,248
Donations, fundraising, sponsorship and other revenue	7,687
Investment income	14,922
	<hr/>
	294,441
Expenses	
Administration	
General	22,235
Salaries and benefits	29,556
Domestic program	
Coaching	10,498
Officiating and events	7,488
High performance	
National coach and technicians salaries	91,218
National team competitions	105,289
National team training and program expenses	31,647
Marketing and promotions	1,755
	<hr/>
	299,686
Deficiency of revenues over expenses	\$ (5,245)

BIATHLON CANADA
STATEMENT OF CHANGES IN NET ASSETS
ONE MONTH ENDED APRIL 30, 2019
(unaudited - see notice to reader)

	Invested in Property and Equipment	Internally Restricted	Unrestricted	April 30 2019
Balance, beginning of period	\$ 58,785	\$ 113,939	\$ 275,015	\$ 447,739
Deficiency of revenues over expenditures	-	-	(5,245)	(5,245)
Transfer to unrestricted equity in net assets	-	(113,939)	113,939	-
Balance, end of period	<u>\$ 58,785</u>	<u>\$</u>	<u>\$ 383,709</u>	<u>\$ 442,494</u>

Directors/Trustees and Like Officials Worksheet

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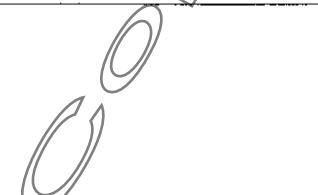
You must give us complete information for each director/trustee and like official who, at any time during the fiscal period of this return, was a member of the charity's board of directors/trustees. Directors/trustees and like officials are persons who govern a registered charity. See the reverse for information on filling out this form.

Total number of directors/trustees and like officials:

Place bar code label here

Public information			Confidential data
Last name: Mcleod	First name: Lyle	Initial: LM	
Term ► Start date (Y/M/D): 2018-06-18		End date (Y/M/D):	
Position: President		At arm's length with other Directors?	
<input checked="" type="checkbox"/> Yes		<input type="checkbox"/> No	
Last name: Dickson	First name: Teresa	Initial: TD	
Term ► Start date (Y/M/D): 2016-09-16		End date (Y/M/D):	
Position: Director		At arm's length with other Directors?	
<input checked="" type="checkbox"/> Yes		<input type="checkbox"/> No	
Last name: Dentry	First name: Sarah	Initial: SD	
Term ► Start date (Y/M/D): 2018-09-27		End date (Y/M/D):	
Position: Director		At arm's length with other Directors?	
<input checked="" type="checkbox"/> Yes		<input type="checkbox"/> No	
Last name: Pelletier	First name: Ron	Initial: RP	
Term ► Start date (Y/M/D): 2017-10-17		End date (Y/M/D):	
Position: Director		At arm's length with other Directors?	
<input checked="" type="checkbox"/> Yes		<input type="checkbox"/> No	
Last name: Jarvis	First name: Bruce	Initial: BJ	
Term ► Start date (Y/M/D): 2017-10-17		End date (Y/M/D):	
Position: Director		At arm's length with other Directors?	
<input checked="" type="checkbox"/> Yes		<input type="checkbox"/> No	

W2
"Jarvis"



Public information			Confidential data
Last name: Villeneuve	First name: Donald	Initial: DV	
Term ► Start date (Y/M/D): 2015-06-07		End date (Y/M/D):	
Position: Director	At arm's length with other Directors?		
	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Last name: Gilliland	First name: Bill	Initial: BG	
Term ► Start date (Y/M/D): 2018-09-27		End date (Y/M/D):	
Position: Director	At arm's length with other Directors?		
	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	

Approval code: 13001
Canada

T1235 E (19)

