



Canada Revenue  
Agency

Agence du revenu  
du Canada

Protected B when completed

## Registered Canadian Amateur Athletic Association Information Return

CA 223 000 714 066

### Identification

Name of association Canadian University Shooting Federation *	
Address 520 5 Ave SW *	
Suite 2500	
City Calgary	
Province or territory AB	Postal code T2P3R7

Return for fiscal period ending	
2   0   2   1   1   2   3   1	Year Month Day
Is this the first return filed by this association? Yes <input checked="" type="checkbox"/> No <input 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.	
File number	
BN/Registration number 774821888 R R 0001	

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

Yes ☐ No ☒

Is the mailing address above the new mailing address?

Yes ☒ No ☐

RECEIVED

Instructions

1. Complete the Identification area.

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 received.

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

Form authorized by the Minister of National Revenue.

NCR MAILROOM  
# 110  
SALLE DU COURRIER  
RCN


**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. \$ 207
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 (confidential). 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 (confidential). 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, David Fahlman of   
Name of director whose signature appears below.

2. I, Travis Mitchell of   
Name of director whose signature appears below.

Address (confidential)

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.)

Position with the association

President

Position with the association

Vice Chair Vice President

**RCAAA:**

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 and/or 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 social insurance number (SIN), personal tax information, and relevant financial and biographical information, which may be used to assess the overall risk of registration with respect to the obligations of registration as outlined in the Act and the common law. The SIN is collected pursuant to subsection 237 of the Act and is used for identification purposes.

The Canada Revenue Agency (CRA) will make this form and all attachments available to the public upon request and/or on the Charities Directorate website, except for information or data identified as confidential. Personal information may also be disclosed to the organization in question and/or its authorized representatives and other third parties pursuant to the disclosure provisions under Section 241 of the Act. Personal information may also be shared with other government departments and agencies under information-sharing agreements in accordance with the disclosure provisions under Section 241 of the Act. Incomplete or inaccurate information may result in a range of actions including suspension of tax-receipting privileges, up to and including revocation of registered status.

Information is described in Charities Program 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. Please be advised that 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 association to voluntarily inform directors and like officials that their personal information has been collected and disclosed to the CRA for the submission of its annual information return.

☒ I confirm that I have read the Privacy statement above.

Canada Revenue  
AgencyAgence du revenu  
du Canada**Directors/Trustees and Like Officials Worksheet****Protected B** when completed

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:

Charity name:

Business number:

Return for fiscal period ending (YYYY/MM/DD):

10

CANADIAN UNIVERSITY SHOOTING FEDERATION

774821888RR0001

2021-12-31

**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](https://canada.ca/charities-giving), select "Operating a registered charity," then "Making a change to your organization" and see "Change director."

Public information	Confidential data
<b>Last name:</b> BROWN <b>First name:</b> EMILY <b>Initial:</b> <b>Term ▶ Start date (Y/M/D):</b> 2021-01-01 <b>End date (Y/M/D):</b> 2021-12-31 <b>Position:</b> DIRECTOR <b>At arm's length with other Directors?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Last name:</b> DE GROOT <b>First name:</b> ALISON <b>Initial:</b> <b>Term ▶ Start date (Y/M/D):</b> 2021-01-01 <b>End date (Y/M/D):</b> 2021-12-31 <b>Position:</b> DIRECTOR <b>At arm's length with other Directors?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Last name:</b> FALHMAN <b>First name:</b> DAVID <b>Initial:</b> <b>Term ▶ Start date (Y/M/D):</b> 2021-01-01 <b>End date (Y/M/D):</b> 2021-12-31 <b>Position:</b> PRESIDENT <b>At arm's length with other Directors?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Last name:</b> HERZBERG <b>First name:</b> DEAN <b>Initial:</b> <b>Term ▶ Start date (Y/M/D):</b> 2021-01-01 <b>End date (Y/M/D):</b> 2021-12-31 <b>Position:</b> DIRECTOR <b>At arm's length with other Directors?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Last name:</b> HONOUR <b>First name:</b> SANDRA <b>Initial:</b> <b>Term ▶ Start date (Y/M/D):</b> 2021-01-01 <b>End date (Y/M/D):</b> 2021-12-31 <b>Position:</b> DIRECTOR <b>At arm's length with other Directors?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Public information		Confidential data	
Last name: MCHUGH	First name: MASON		
Initial:			
Term ► Start date (Y/M/D): 2021-01-01 End date (Y/M/D): 2021-12-31			
Position: DIRECTOR	At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Last name: MITCHEL	First name: TRAVIS		
Initial:			
Term ► Start date (Y/M/D): 2021-01-01 End date (Y/M/D): 2021-12-31			
Position: VICE-PRESIDENT	At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Last name: NENNER	First name: KEN		
Initial:			
Term ► Start date (Y/M/D): 2021-01-01 End date (Y/M/D): 2021-12-31			
Position: CHAIR	At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Last name: ZAVERY	First name: HATIM		
Initial:			
Term ► Start date (Y/M/D): 2021-01-01 End date (Y/M/D): 2021-12-31			
Position: DIRECTOR	At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Last name: HINAM	First name: PETER		
Initial:			
Term ► Start date (Y/M/D): 2021-01-01 End date (Y/M/D): 2021-12-31			
Position: DIRECTOR	At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Last name:	First name:	Residential address – Street number and name:	
Initial:		City:	Prov/Terr: Postal code:
Term ► Start date (Y/M/D): End date (Y/M/D):		Date of birth (Y/M/D):	
Position:	At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone number:	

Approval code: 13001

**Canadian University Shooting Federation Board Member List for Business Number 774821888 RR 0001**

**Board Members as of 1 October, 2022**

Name	Address	City	Province	Postal Code	Phone Number	Date of Birth YYYY/MM/DD	Postion within the CUSF	Years with CUSF	Line of Business outside CUSF
Mitchell Aschenbrenner							Director-at-large/Executive Director	1	
Emily Brown							Director	3	
David Fahiman							President	5	
Travis Mitchell							VP, Vice Chair	3	
Sandra Honour							Director	3	
Dean Herzberg							Director, Co-Founder	4	
Peter Hinman							Director	1	
Ken Nener							Board Chair, Co - Founder	5	
Hatim Zavery							Director/Communication Manager	2	
Mason Mchugh							Director/Clubs Manager,Co-Founder	5	

COPY / COPY

## COMPILATION ENGAGEMENT REPORT

To the directors of

### **THE CANADIAN UNIVERSITY SHOOTING FEDERATION**

On the basis of information provided by management, we have compiled the statement of financial position of **The Canadian University Shooting Federation** as at December 31, 2021, and the statement of operations and net assets for the year then ended, and Note 2, which describes the basis of accounting applied in the preparation of the compiled financial information ("financial information").

Management is responsible for the accompanying financial information, including the accuracy and completeness of the underlying information used to compile it and the selection of the basis of accounting.

We performed this engagement in accordance with Canadian Standard on Related Services (CSRS) 4200, *Compilation Engagements*, which requires us to comply with relevant ethical requirements. Our responsibility is to assist management in the preparation of the financial information.

We did not perform an audit engagement or a review engagement, nor were we required to perform procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an audit opinion or a review conclusion, or provide any form of assurance on the financial information.

Readers are cautioned that the financial information may not be appropriate for their purpose.

Cornwall, Ontario  


  
**CHARTERED PROFESSIONAL ACCOUNTANTS  
LICENSED PUBLIC ACCOUNTANTS**  


**CANADIAN UNIVERSITY SHOOTING FEDERATION**

**STATEMENT OF FINANCIAL POSITION**

**DECEMBER 31, 2021**

**ASSETS**

**CURRENT ASSETS**

Cash	\$ 37,096
Inventory	<u>3,765</u>

**\$ 40,861**

**LIABILITIES AND NET ASSETS**

**CURRENT LIABILITIES**

Accounts payable and accrued liabilities	\$ 3,389
Advances from directors	4,892
Deferred revenue	<u>18,821</u>
	<u>27,102</u>

**NET ASSETS**

Unrestricted	<u>13,759</u>
--------------	---------------

**\$ 40,861**

**CANADIAN UNIVERSITY SHOOTING FEDERATION**

**STATEMENT OF OPERATIONS AND NET ASSETS**

**YEAR ENDED DECEMBER 31, 2021**

	<b><u>January 1 to March 30</u></b>	<b><u>March 31 to December 31</u></b>	<b><u>Total 2021</u></b>
Revenue			
Sponsorships and fundraising	\$ 618	\$ 21,608	\$ 22,226
Memberships and registrations	<u>50</u>	<u>5,256</u>	<u>5,306</u>
	<u>668</u>	<u>26,864</u>	<u>27,532</u>
Expenses			
Advertising and promotion	874	3,565	4,439
Competitions and events	1,131	10,411	11,542
Insurance	-	2,016	2,016
Interest, bank charges and transaction fees	-	25	25
Office and general	-	1,277	1,277
Professional fees	-	1,695	1,695
Software Expense	<u>-</u>	<u>2,700</u>	<u>2,700</u>
	<u>2,005</u>	<u>21,689</u>	<u>23,694</u>
Excess of revenue over expenses	<u>(1,337)</u>	<u>5,175</u>	3,838
Net assets at beginning of year			<u>9,921</u>
Net assets at end of year			<b><u>\$ 13,759</u></b>



**CANADIAN UNIVERSITY SHOOTING FEDERATION**

**NOTES TO THE FINANCIAL STATEMENTS**

**YEAR ENDED DECEMBER 31, 2021**

**1. NATURE OF OPERATIONS**

The organization is incorporated without share capital under the Canada Not-for-profit Corporations Act. The organization's main purpose is to foster and encourage shooting sports and related activities at Canadian post secondary learning institutions. The organization obtained registered charity status effective March 31, 2021 and is exempt from income taxes. The organization maintains its head office in Calgary, Alberta.

**2. BASIS OF ACCOUNTING**

The basis of accounting to be applied in the preparation of the financial information is on the historical cost basis, reflecting cash transactions with the addition of:

- Inventories accounted for at cost
- Capital assets expensed in year of acquisition
- Accounts payable and accrued liabilities
- Contributions, donations, grants, registrations and sponsorship that specifically relate to expenditures that will be incurred in a future period are deferred
- The fair value of various volunteer services and materials donated to the organization cannot be reasonably estimated and accordingly are not recorded in the financial statements.



**Canadian University  
Shooting Federation**

*Learn. Compete. Educate.*

Suite 2500  
520 5th Ave SW  
Calgary, AB T2P 3R7

## Lost Receipt Policy

If it is not possible to obtain a duplicate receipt from the billing agency, the employee must submit a signed memorandum, approved by the President, Vice President or Admin Director, and stating:

- The amount of the expense. The description of the expense should be detailed as to the items purchased.
- The business purpose of the expense. The description of the business purpose should clearly spell out the benefit to the Canadian University Shooting Federation resulting from the expense
- That payment was made in full.
- That no receipt or cancelled check is available.
- That no other reimbursement of expense has been, or will be, sought or accepted from any source.

  
David Fahiman, President



**Canadian University  
Shooting Federation**

*Learn. Compete. Educate.*

Suite 2500  
520 5th Ave SW  
Calgary, AB T2P 3R7

## Invoicing Policy

The Canadian University Shooting Federation authorises three positions to officially invoice sponsors, donors, and other contractors.

██████████ - Admin Director  
Travis Mitchell - Vice President  
David Fahlman - President

██████████  
David Fahlman, President

COPY 1 COPY