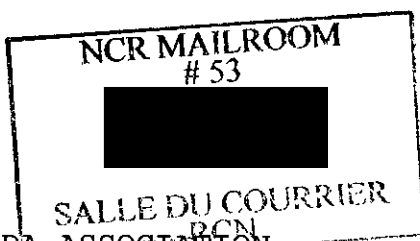




Canada Revenue
Agency

Agence du revenu
du Canada

OTTAWA ON K1A 0L5



HORSESHOE CANADA ASSOCIATION
GENERAL DELIVERY
MADDEN AB T0M 1L0

REGISTERED CANADIAN AMATEUR
ATHLETIC ASSOCIATION INFORMATION
RETURN

000003

Return for Fiscal Period Ending									
20		18		05		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 checked="" 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 89705 4078 RR 0001 2018-05-31 0496364

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

Corrected name

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

City

Province or territory

Postal code

_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|

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

Be sure that the name and address are correct. To correct pre-printed information on this form, please use the provided. Any changes (except to the contact information above) must be explained in an attachment to the return.

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

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.

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

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

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

Within six months from the end of the fiscal period of the association, mail or deliver a completed return and all required documents to:

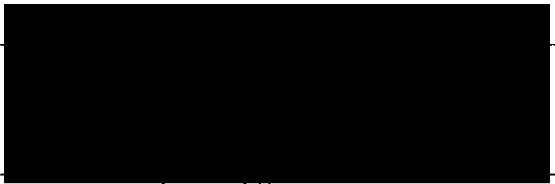
Charities Directorate
Canada Revenue Agency
Ottawa ON K1A 0L5

Information Required

1. Have any changes not previously reported been made 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. \$ 2
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

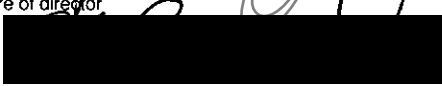







To be signed by two directors of the association

1. I, WALTER ARNOLD of 
Name of director whose signature appears below. (Print)

2. I, MARY HOLLOP of 
Name of director whose signature appears below. (Print)

Address

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 <u>PRESIDENT</u>	
Home telephone number 	Business telephone number 	Date 	
2. Signature of director 		Position with the association <u>TREASURER</u>	
Home telephone number 	Business telephone number 	Date 	

T5 slip. The accrued interest could also be recorded based on the annual GIC statement from the [REDACTED] bank.

Expenses:

This year, the expenses are again comparable to those of the prior year. Most expenses are supported by the bank statements, cheque stubs, related receipts and/or invoices. The association should enhance the practice of maintaining adequate documentation for all General & Administrative Expenses not directly related to the Championships' refunds, scorekeepers, judges and honoraria.

Summary:

Overall, I am satisfied the Balance Sheet and Income Statement for the Horseshoe Canada Association is in good order and fairly presents the financial positions and earnings of the Association for the period-ended May 31, 2018.

Yours sincerely,

[REDACTED]

Certified General Accountant

[REDACTED] Professional Corporation
Certified General Accountant

HORSESHOE CANADA

Comparative Income Statement

	Actual 01/06/2017 to 31/05/2018	Actual 01/06/2016 to 31/05/2017	Percent
REVENUE			
Sales Revenue			
Sales Inventory Game Related It...	2,038.00	442.00	361.09
Affiliation Fees	4,164.00	1,917.00	117.21
Donations - Corporate	200.00	200.00	0.00
Championships - Added Travel	0.00	2,000.00	-100.00
Operating Revenue from Host	6,500.00	9,500.00	-31.58
Championships - Entry fees	13,930.00	11,835.00	17.70
Net Sales	26,832.00	25,894.00	3.62
Other Revenue			
Interest Revenue	79.04	78.10	1.20
Total Other Revenue	79.04	78.10	1.20
TOTAL REVENUE	26,911.04	25,972.10	3.62
EXPENSE			
Cost of Goods Sold			
InventoryGame related items cost	1,580.36	194.86	711.02
Total Cost of Goods Sold	1,580.36	194.86	711.02
General & Administrative Expe...			
Accounting & Legal	200.00	220.00	-9.09
Business Fees & Licenses	20.00	0.00	0.00
Courier & Postage	0.00	35.33	-100.00
Championships - Refunds	140.00	560.00	-75.00
Championships - Scorekeepers/J...	3,820.00	2,650.00	44.15
Directors - Honorariums	1,400.00	1,400.00	0.00
Interest & Bank Charges	150.95	125.86	19.93
Office Supplies	28.69	1,662.41	-98.27
Tournament Supplies	100.00	234.36	-57.33
Awards	139.60	168.47	-17.14
Championships - Awards and tra...	16,065.00	15,457.90	3.93
Travel Directors	2,170.20	1,134.20	91.34
Web site	551.88	275.94	100.00
Total General & Admin. Expen...	24,786.32	23,924.47	3.60
TOTAL EXPENSE	26,366.68	24,119.33	9.32
NET INCOME	544.36	1,852.77	-70.62

HORSESHOE CANADA
Balance Sheet As at 31/05/2018

ASSET

Current Assets

GIC	6,665.55	
Chequing Bank Account	10,847.59	
Total Cash		17,513.14
Investments		0.00
Total Current Assets		17,513.14

Inventory Assets

Inventory Game Related Items	4,991.42	
Total Inventory Assets	4,991.42	

TOTAL ASSET	22,504.56
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LIABILITY

TOTAL LIABILITY	0.00
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EQUITY

Retained Earnings

Retained Earnings - Previous Year	21,960.20	
Current Earnings	544.36	
Total Retained Earnings	22,504.56	

TOTAL EQUITY	22,504.56
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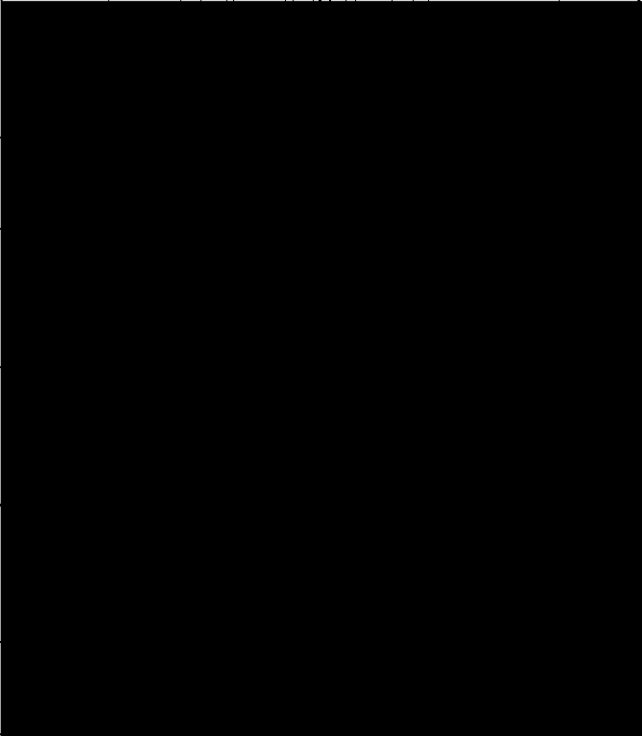
LIABILITIES AND EQUITY	22,504.56
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HORSESHOE CANADA ASSOCIATION

May 31, 2018

Additional Information

LIST OF DIRECTORS

POSITION	NAME	ADDRESS	OCCUPATION
President	Walter Arnold		
Vice President	Stephanie Day		
Secretary	Sheryl Arnold		
Treasurer	Mary Holley		
Public Relations	Jane Cordingley		
Tournament Director	Dianne Beck		

AUTHORIZED TO ISSUE RECEIPTS

President **Walter Arnold**

Treasurer **Mary Holley**

Lost or Spoiled Receipts Policy

New receipt will have a hand-written note indicating that it is a duplicate. The original receipt number will be referenced as "Duplicate, Replacing Receipt #".