

CH191930841435

## Registered Canadian Amateur Athletic Association Information Return

### Identification

Name of association World Dwarf Games 2017	
Address 6843 Ninth Line	
RR#1	
City Erin	
Province or territory Ontario	Postal code N0B1T0

Return for fiscal period ending							
2	0	1	8	1	2	3	1
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 checked="" 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 3							
BN/Registration number 787693490      R R      0001							

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

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

Yes       No

Yes       No

### 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 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

Form authorized by the Minister of National Revenue.



Protected B when completed

**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. \$ 0

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, Kathy Savage of [REDACTED]  
Name of director whose signature appears below.

2. I, Heather Anderson of [REDACTED]  
Name of director whose signature appears below.

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	<span style="background-color: black; color: black;">[REDACTED]</span>	Position with the association Director
Home telephone number	<span style="background-color: black; color: black;">[REDACTED]</span>	Business telephone number
		Date
2. Signature of director	<span style="background-color: black; color: black;">[REDACTED]</span>	Position with the association Director
Home telephone number	<span style="background-color: black; color: black;">[REDACTED]</span>	Business telephone number
		Date

Protected B when completed

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		Director	
Home telephone number	<input checked="" type="checkbox"/>	Business telephone number	Date
<span style="background-color: black; color: black;">[REDACTED]</span>			
2. Signature of director	<span style="background-color: black; color: black;">[REDACTED]</span>	Position with the association	
		Director	
Home telephone number		Business telephone number	Date
<span style="background-color: black; color: black;">[REDACTED]</span>			

World Dwarf Games 2017  
 BALANCE SHEET  
 AS AT DECEMBER 31, 2018

ASSETS

CURRENT ASSETS

CASH (BANK)

██████████ ACCOUNT

TAXES RECEIVABLE

80,395.77

80,395.77

80,395.77

LIABILITIES

CURRENT LIABILITIES

ACCOUNTS PAYABLE

TAXES PAYABLE (SOCIAL)

RETAINED EARNINGS

NET INCOME

85,539.69

(5,143.92)

80,395.77

TOTAL ASSETS

TOTAL LIABILITIES & EQUITY

80,395.77

# World Dwarf Games 2017

## INCOME STATEMENT

DECEMBER 2018

### REVENUE

DONATIONS

FUNDRAISING

REGISTRATION

ACCOMMODATION

INTEREST

### TOTAL REVENUE

### EXPENSES

VENUE

VOLUNTEERS

SPORTS & EVENTS

ADMINISTRATION & PROMOTION

997.03

ACCOMMODATION

INSURANCE

T-SHIRTS & BRACELETS

WEBSITE MAINTENACE

ATHLETE BURSARY

BANK CHARGES (INCLUDES [REDACTED])

4,000.00

146.89

### TOTAL EXPENSES

5,143.92

### NET INCOME

(5,143.92)