

sent Nov 20/20
signed Nov 10/20

Registered Charity Information Return

Protected B when completed

Section A: Identification

To help you fill out this form, refer to Guide T4033, Completing the Registered Charity Information Return. It can be found at canada.ca/cra-forms.

Note: Even if a charity is inactive, an information return must be filed to maintain its registered status.

Complete the following:

1. Charity name:

The Cridge Centre for the Family

2. Return for fiscal period ending:

Year	Month	Day
2020	03	31

3. BN/registration number:

108079419 R R 0001

4. Web address (if applicable):

www.cridge.org

A1 Was the charity in a subordinate position to a head body? 1510 Yes No
If yes, give the name and BN/registration number of the organization.

Name:

BN (9 digits, 2 letters, 4 digits. Example: 123456789RR0001)

A2 Has the charity wound-up, dissolved, or terminated operations? 1570 Yes No

A3 Is the charity designated as a public foundation or private foundation? 1600 Yes No

If yes, you must complete Schedule 1, Foundations. To confirm the charity's designation, go to the CRA's List of charities and refer to the charity's detail page.

Section B: Directors/trustees and like officials

B1 All charities must complete Form T1235, Directors/Trustees and Like Officials Worksheet. Only the public information section of the worksheet is available to the public. Charities subject to the Ontario Corporations Act must also complete Form RC232, Corporations Information Act Annual Return for Ontario Not-for-Profit Corporations.

Section C: Programs and general information

C1 Was the charity active during the fiscal period? 1800 Yes No
If no, explain why in the "Ongoing programs" space below at C2.

C2 Describe all ongoing and new charitable programs the charity carried on during this fiscal period to further its purpose(s) (as defined in its governing documents). "Programs" includes all of the charitable activities that the charity carries out on its own through employees or volunteers as well as through qualified donees and intermediaries. The charity may also use this space to describe the contributions of its volunteers in carrying out its activities, for example, number of volunteers and/or hours. Do not include the names of employees or volunteers. Grant-making charities should describe the types of organizations they support. Do not describe fundraising activities in this space.

Do not attach additional sheets of paper or annual reports.

Ongoing programs:

We operate a 77 unit Assisted Living Senior Centre. We operate a 24/7 home for brain injured men. We operate a Nursery, Day Care, Nature Preschool, School Age Care and a Summer Recreation Camp in our Child Care Centre. We provide support & services to young parents in the community. We run a transition house for women & children leaving abusive situations. We operate a two bed Corrections contract. We provide low-cost rental units for older women and adults with children & run an apartment building for low income and brain injury survivors. We provide services & counseling to our tenants, especially women & children who left abusive situations. We provide case management & community support for brain injury survivors living on their own and to FASD and Autism adults. We maintain a database for respite providers in the Greater Victoria area that parents can access. We run Respite Program that provides free hotel rooms or a dinner out for parents who have a special needs child so they can have a break.

New programs:

Registered charities may make gifts to qualified donees. Qualified donees are other registered Canadian charities, as well as certain other organizations described in the Income Tax Act.

C3 Did the charity make gifts or transfer funds to qualified donees or other organizations? **2000** Yes No
 If **yes**, you **must** complete Form T1236, Qualified donees worksheet/Amounts provided to other organizations.

C4 Did the charity carry on, fund, or provide any resources through employees, volunteers, agents, joint ventures, contractors, or any other individuals, intermediaries, entities, or means (other than qualified donees) for any activity/program/project outside Canada? **2100** Yes No
 If **yes**, you **must** complete Schedule 2, Activities outside Canada.

C5 Public policy dialogue and development activities

A registered charity may carry on public policy dialogue and development activities in furtherance of its stated charitable purposes but must never directly or indirectly support or oppose a political party or a candidate for public office. For more information, see Guidance CG-027, Public policy dialogue and development activities by charities.

(a) Did the charity carry on public policy dialogue and development activities during the fiscal period? **2400** Yes No
 If **yes**, you **must** complete Schedule 7, Public policy dialogue and development activities.

C6 If the charity carried on fundraising activities or engaged third parties to carry on fundraising activities on its behalf, select all fundraising methods that it used during the fiscal period:

- | | | |
|---|---|--|
| 2500 <input checked="" type="checkbox"/> Advertisements/print/radio/TV commercials | 2570 <input type="checkbox"/> Sales | 2620 <input type="checkbox"/> Telephone/TV solicitations |
| 2510 <input type="checkbox"/> Auctions | 2575 <input checked="" type="checkbox"/> Internet | 2630 <input checked="" type="checkbox"/> Tournament/sporting events |
| 2530 <input checked="" type="checkbox"/> Collection plate/boxes | 2580 <input checked="" type="checkbox"/> Mail campaigns | 2640 <input type="checkbox"/> Cause-related marketing |
| 2540 <input type="checkbox"/> Door-to-door solicitation | 2590 <input checked="" type="checkbox"/> Planned-giving programs | 2650 <input checked="" type="checkbox"/> Other |
| 2550 <input type="checkbox"/> Draws/lotteries | 2600 <input checked="" type="checkbox"/> Targeted corporate donations/sponsorships | 2660 Specify: <u>Newsletters</u> |
| 2560 <input type="checkbox"/> Fundraising dinners/galas/concerts | 2610 <input checked="" type="checkbox"/> Targeted contacts | |

C7 Did the charity pay external fundraisers? **2700** Yes No
 If **yes**, you **must** complete the following lines, and complete Schedule 4, Confidential data, Table 1.

(a) Enter the gross revenue collected by the fundraisers on behalf of the charity **5450** \$ _____
 (b) Enter the amounts paid to and/or retained by the fundraisers. **5460** \$ _____

(c) Select the method of payment to the fundraiser:

- | | | |
|--|---|--|
| 2730 <input type="checkbox"/> Commissions | 2750 <input type="checkbox"/> Finder's fee | 2770 <input type="checkbox"/> Honoraria |
| 2740 <input type="checkbox"/> Bonuses | 2760 <input type="checkbox"/> Set fee for services | 2780 <input type="checkbox"/> Other |
| 2790 Specify: _____ | | |

(d) Did the fundraiser issue tax receipts on behalf of the charity? **2800** Yes No

C8 Did the charity compensate any of its directors/trustees or like officials or persons not at arm's length from the charity for services provided during the fiscal period (other than reimbursement for expenses)? **3200** Yes No

C9 Did the charity incur any expenses for compensation of employees during the fiscal period? **3400** Yes No
 If **yes**, you **must** complete Schedule 3, Compensation.

C10 Did the charity receive any donations or gifts of any kind valued at \$10,000 or more from any donor that was **not** resident in Canada and was **not** any of the following: **3900** Yes No

- a Canadian citizen, nor
- employed in Canada, nor
- carrying on a business in Canada, nor
- a person having disposed of taxable Canadian property?

If **yes**, you **must** complete Schedule 4, Confidential data, Table 2, for each donation of \$10,000 or more.

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- C11** Did the charity receive any non-cash gifts for which it issued tax receipts? **4000** Yes No
If yes, you must complete Schedule 5, Non-cash gifts.
- C12** Did the charity acquire a non-qualifying security? **5800** Yes No
- C13** Did the charity allow any of its donors to use any of its property? (except for permissible uses) **5810** Yes No
- C14** Did the charity issue any of its tax receipts for donations on behalf of another organization? **5820** Yes No
- C15** Did the charity have direct partnership holdings at any time during the fiscal period? **5830** Yes No

Section D: Financial information

Fill out either Section D or Schedule 6, Detailed financial information.

If any of the following applies to the charity, complete Schedule 6 instead of Section D:

- (a) The charity's revenue exceeds \$100,000.
- (b) The amount of all property (for example, investments, rental properties) not used in charitable activities was more than \$25,000.
- (c) The charity had permission to accumulate funds during this fiscal period.

Compensation Schedule 3

1 (a) Enter the **number** of permanent, full-time, compensated positions in the fiscal period. This number should represent the number of positions the charity had including both managerial positions and others, and should not include independent contractors. **Do not** enter a dollar amount. 300

(b) For the **ten (10)** highest compensated, permanent, full-time positions enter the **number of positions** that are within each of the following annual compensation categories. **Do not** tick the boxes, use numbers.

305 <input type="checkbox"/> \$1 – \$39,999	310 <input type="checkbox" value="3"/> \$40,000 – \$79,999	315 <input type="checkbox" value="6"/> \$80,000 – \$119,999
320 <input type="checkbox" value="1"/> \$120,000 – \$159,999	325 <input type="checkbox"/> \$160,000 – \$199,999	330 <input type="checkbox"/> \$200,000 – \$249,999
335 <input type="checkbox"/> \$250,000 – \$299,999	340 <input type="checkbox"/> \$300,000 – \$349,999	345 <input type="checkbox"/> \$350,000 and over

2 (a) Enter the **number** of part-time or part-year (for example, seasonal) employees the charity employed during the fiscal period. 370

(b) Total expenditure on compensation for part-time or part-year employees in the fiscal period. 380 \$

3 Total expenditure on all compensation in the fiscal period. 390 \$

Non-cash gifts Schedule 5

1 Select all types of non-cash gifts received for which a tax receipt was issued:

500 <input checked="" type="checkbox"/> Artwork/wine/jewellery	525 <input type="checkbox"/> Ecological properties	550 <input type="checkbox"/> Publicly traded securities/ commodities/mutual funds
505 <input type="checkbox"/> Building materials	530 <input type="checkbox"/> Life insurance policies	555 <input checked="" type="checkbox"/> Books
510 <input checked="" type="checkbox"/> Clothing/furniture/food	535 <input type="checkbox"/> Medical equipment/supplies	560 <input type="checkbox"/> Other
515 <input type="checkbox"/> Vehicles	540 <input type="checkbox"/> Privately-held securities	565 Specify: _____
520 <input type="checkbox"/> Cultural properties	545 <input checked="" type="checkbox"/> Machinery/equipment/ computers/software	

2 Enter the total amount of tax-receipted non-cash gifts 580 \$

Fill out this schedule if any of the following applies to the charity:

- (a) The charity's revenue exceeded \$100,000.
- (b) The amount of all property (for example, investments, rental properties) not used in charitable activities was more than \$25,000.
- (c) The charity had permission to accumulate funds during this fiscal period.

Was the financial information reported below prepared on an accrual or cash basis? 4020 Accrual Cash

Statement of financial position

Show all amounts to the nearest single Canadian dollar. Do not enter "see attached financial statements." All relevant fields must be filled out.

Assets:

Cash, bank accounts, and short-term investments	4100	\$	1,932,400
Amounts receivable from non-arm's length persons	4110	\$	
Amounts receivable from all others	4120	\$	144,814
Investments in non-arm's length persons	4130	\$	
Long-term investments	4140	\$	2,547,034
Inventories	4150	\$	1,299
Land and buildings in Canada	4155	\$	21,253,992
Other capital assets in Canada	4160	\$	1,867,421
Capital assets outside Canada	4165	\$	
Accumulated amortization of capital assets	4166	\$	- 9,302,165
Other assets	4170	\$	2,699,287
10 year gifts	4180	\$	344,098
Total assets (add lines 4100 to 4170)	4200	\$	21,144,082

Liabilities:

Accounts payable and accrued liabilities	4300	\$	2,850,290
Deferred revenue	4310	\$	3,063,451
Amounts owing to non-arm's length persons	4320	\$	
Other liabilities	4330	\$	8,646,935
Total liabilities (add lines 4300 to 4330)	4350	\$	14,560,676
Amount included in lines 4150, 4155, 4160, 4165 and 4170 not used in charitable activities	4250	\$	

Statement of operations

Revenue:

Total eligible amount of all gifts for which the charity has issued or will issue tax receipts	4500	\$	625,476
Total eligible amount of tax-receipted tuition fees	5610	\$	
Total amount of 10 year gifts received	4505	\$	19,800
Total amount received from other registered charities	4510	\$	127,866
Total other gifts received for which a tax receipt was not issued by the charity (excluding amounts at lines 4575 and 4630)	4530	\$	20,763
Total revenue received from federal government	4540	\$	82,132
Total revenue received from provincial/territorial governments	4550	\$	4,631,792
Total revenue received from municipal/regional governments	4560	\$	
Total tax-receipted revenue from all sources outside of Canada (government and non-government)	4571	\$	
Total non tax-receipted revenue from all sources outside Canada (government and non-government)	4575	\$	
Total interest and investment income received or earned	4580	\$	- 285,204
Gross proceeds from disposition of assets	4590	\$	
Net proceeds from disposition of assets (show a negative amount with brackets)	4600	\$	
Gross income received from rental of land and/or buildings	4610	\$	2,449,390
Total non tax-receipted revenues received for memberships, dues and association fees	4620	\$	2,150
Total non tax-receipted revenue from fundraising	4630	\$	25,899
Total revenue from sale of goods and services (except to any level of government in Canada)	4640	\$	1,345,756
Other revenue not already included in the amounts above	4650	\$	588,626
Specify type(s) of revenue included in the amount reported at 4650	4655		Deferred & Miscellaneous income
Total revenue (add lines 4500, 4510 to 4560, 4575, 4580, and 4600 to 4650)	4700	\$	9,614,646

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Expenditures:

Advertising and promotion	4800	\$	55,091
Travel and vehicle expenses	4810	\$	92,053
Interest and bank charges	4820	\$	270,868
Licences, memberships, and dues	4830	\$	16,832
Office supplies and expenses	4840	\$	168,030
Occupancy costs	4850	\$	1,137,569
Professional and consulting fees	4860	\$	142,929
Education and training for staff and volunteers	4870	\$	45,664
Total expenditure on all compensation (enter the amount reported at line 390 in Schedule 3, if applicable)	4880	\$	5,607,990
Fair market value of all donated goods used in charitable activities	4890	\$	
Purchased supplies and assets	4891	\$	1,614,430
Amortization of capitalized assets	4900	\$	715,832
Research grants and scholarships as part of charitable activities	4910	\$	
All other expenditures not included in the amounts above (excluding gifts to qualified donees)	4920	\$	5,000
Specify type(s) of expenditures included in the amount reported at 4920	4930	Insurance Premium	
Total expenditures before gifts to qualified donees (add lines 4800 to 4920)	4950	\$	9,872,288

Of the amounts at lines 4950:

(a) Total expenditures on charitable activities	5000	\$	8,799,898	
(b) Total expenditures on management and administration	5010	\$	984,244	
(c) Total expenditures on fundraising	5020	\$	83,148	
(d) Total other expenditures included in line 4950	5040	\$	5,000	
Total amount of gifts made to all qualified donees	5050	\$	5,225	
Total expenditures (add lines 4950 and 5050)	5100	\$	9,877,513	

Other financial information

Permission to accumulate property:

Only registered charities that have written permission to accumulate should complete this section.

• Enter the amount accumulated for the fiscal period, including income earned on accumulated funds	5500	\$	
• Enter the amount disbursed for the fiscal period for the specified purpose	5510	\$	

Permission to reduce disbursement quota:

If the charity has received approval to make a reduction to its disbursement quota, enter the amount for the fiscal period	5750	\$	
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Property not used in charitable activities:

Enter the average value of property not used for charitable activities or administration during:

• The 24 months before the beginning of the fiscal period	5900	\$	5,690,676
• The 24 months before the end of the fiscal period	5910	\$	5,794,804



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: 9

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Public information																	
Last name: Cridge		First name: Michael						Initial: E.									
Term ▶ Start date (Y/M/D):		2	0	1	3	0	9	End date (Y/M/D):		2	0	1	9	0	9	3	0
Position: Director		At arm's length with other Directors?						<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
Last name: Dorrington		First name: Claudia						Initial: J.									
Term ▶ Start date (Y/M/D):		2	0	1	7	0	9	End date (Y/M/D):		2	0	5	1	1	1	1	1
Position: Director		At arm's length with other Directors?						<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
Last name: Ellis		First name: Lynne						Initial: A.									
Term ▶ Start date (Y/M/D):		2	0	1	5	0	9	End date (Y/M/D):		2	0	1	1	1	1	1	1
Position: Secretary		At arm's length with other Directors?						<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
Last name: Fuller		First name: Valerie						Initial: M.									
Term ▶ Start date (Y/M/D):		2	0	1	7	0	9	End date (Y/M/D):		2	0	5	1	1	1	1	1
Position: President		At arm's length with other Directors?						<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
Last name: Mann		First name: Gerald						Initial: A.									
Term ▶ Start date (Y/M/D):		2	0	1	9	1	1	End date (Y/M/D):		2	0	4	1	1	1	1	1
Position: Director		At arm's length with other Directors?						<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
Last name: Parton		First name: Carol						Initial: L.									
Term ▶ Start date (Y/M/D):		2	0	1	3	0	9	End date (Y/M/D):		2	0	3	0	1	9	0	9
Position: Director		At arm's length with other Directors?						<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
Last name: Peters		First name: Kenneth						Initial: M.									
Term ▶ Start date (Y/M/D):		2	0	1	9	0	9	End date (Y/M/D):		2	0	3	0	1	9	0	9
Position: Director		At arm's length with other Directors?						<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
Last name: Phillips		First name: Delmar						Initial:									
Term ▶ Start date (Y/M/D):		2	0	1	8	0	9	End date (Y/M/D):		2	0	1	8	0	9	1	7
Position: Treasurer		At arm's length with other Directors?						<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
Last name: Price		First name: Janis						Initial: M.									
Term ▶ Start date (Y/M/D):		2	0	1	6	0	9	End date (Y/M/D):		2	0	6	0	9	2	6	6
Position: Director		At arm's length with other Directors?						<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									

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Last name: Spray		First name: Mary-Jane				Initial:	
Term ▶ Start date (Y/M/D):	2	0	1	9	3	0	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: Wellman		First name: Ann				Initial: E.	
Term ▶ Start date (Y/M/D):	2	0	1	8	0	9	End date (Y/M/D):
Position: Vice-President	At arm's length with other Directors?					<input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No
Last name: Zanon		First name: Tony				Initial: J.	
Term ▶ Start date (Y/M/D):	2	0	1	5	0	9	End date (Y/M/D):
Position: Director	At arm's length with other Directors?					<input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No

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Qualified donees worksheet / Amounts provided to other organizations

Registered charities can make gifts to qualified donees. Enter the required information for gifts made to each qualified donee or other organization. See the reverse for information on filling out this form.

Charity name: The Cridge Centre for the Family	BN: (9 digits, 2 letters, 4 digits. Example: 123456789RR0001) 108079419RR0001
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Total number of qualified donees/other organizations:

Name of organization: Constable Gerald Breese Centre for Traumatic Life Losses		Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
BN/Registration number: 720202720 RR 0001	City and Prov/Terr: Victoria BC	Country: Canada	
Amount of non-cash gifts	\$	Total amount of gifts	\$ 200.00

Name of organization: Cornerstone Youth Society		Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
BN/Registration number: 885573139 RR 0001	City and Prov/Terr: Victoria BC	Country: Canada	
Amount of non-cash gifts	\$	Total amount of gifts	\$ 5,000.00

Name of organization: Greater Victoria Coalition to End Homelessness Society		Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number: 842615221 RR 0001	City and Prov/Terr: Victoria BC	Country: Canada	
Amount of non-cash gifts	\$	Total amount of gifts	\$ 25.00

Name of organization:		Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number: RR	City and Prov/Terr:	Country:	
Amount of non-cash gifts	\$	Total amount of gifts	\$

Name of organization:		Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number: RR	City and Prov/Terr:	Country:	
Amount of non-cash gifts	\$	Total amount of gifts	\$

Name of organization:		Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number: RR	City and Prov/Terr:	Country:	
Amount of non-cash gifts	\$	Total amount of gifts	\$