



## Registered Charity Information Return

### 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](http://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 Congregation of Ascension/St. John's**

2. Return for fiscal period ending:

Year	Month	Day
2	0	24
1	2	31

3. BN/registration number:

**108084658 RR 0112**

4. Web address (if applicable):

**www.valleyanglicans.ca**

**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 <b>Incorporated Synod of the Anglican Diocese of Ottawa</b>	BN (9 digits, 2 letters, 4 digits. Example: 123456789RR0001) <b>108084658RR0030</b>
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**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 [canada.ca/charities-list](http://canada.ca/charities-list) 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.

**For charities subject to the Ontario Corporations Act.**

As of May 15, 2021, the Canada Revenue Agency no longer collects this information on behalf of the Ontario Ministry of Government and Consumer Services. For more information on filing an Ontario annual information return, visit [ontario.ca/businessregistry](http://ontario.ca/businessregistry).

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

### 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 during this fiscal period that furthered the charity's purpose(s) (as defined in its governing documents). "Programs" includes:

(1) charitable activities that the charity carries out on its own through employees, volunteers, or intermediaries, and

(2) qualifying disbursements that the charity makes through gifts to qualified donees or grants to non-qualified donees (grantees).

Charities making qualifying disbursements should describe the types of organizations they support. 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.

**Do not** describe fundraising activities in this space.

**Do not attach additional sheets of paper or annual reports.**

Ongoing programs <b>Weekly worship services Christian ministry and mission in the Ottawa Valley Supporting local, regional, and international ministry</b>
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, excluding grants to non-qualified donees? ..... **2000**  Yes  No

**Important:** 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 (excluding qualifying disbursements) for any activity/program/project outside Canada? ..... **2100**  Yes  No

**Important:** If yes, you must complete Schedule 2, Activities outside Canada.

**C5** Public policy dialogue and development activities

This question has been removed.

**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:

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

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

**Important:** 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?

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

**C11** Did the charity receive any non-cash gifts for which it issued tax receipts? ..... **4000**  Yes  No

**Important:** 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

Registered charities may make grants to non-qualified donees (grantees) as described in the Income Tax Act.

C16	Did the charity make qualifying disbursements by way of grants to non-qualified donees (grantees) in the fiscal period? .....	5840	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	If yes, you must complete lines 5841, 5842 and 5843.			
	Did the charity make grants to any grantees totalling more than \$5,000 in the fiscal period? .....	5841	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	If yes, you must complete Form T1441, Qualifying Disbursements: Grants to Non-Qualified Donees (Grantees).			
	Enter the number of grantees that received grants totalling \$5,000 or less in the fiscal period.....	5842		
	Enter the total amount paid to grantees that received grants totalling \$5,000 or less in the fiscal period .....	5843	\$	
C17	In the 24 months before the beginning of the fiscal period, did the average value of your charity's property (cash, investments, capital property or other assets) not used directly in its charitable activities or administration:			
	(a) exceed \$100,000, if the charity is designated as a charitable organization; or	5850	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(b) exceed \$25,000, if the charity is designated as a public or private foundation?.....			
	If yes, you must complete Schedule 8 – Disbursement quota			
C18	Did the charity hold any donor advised funds (DAF) during the fiscal period? .....	5860	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	If yes, provide the following:			
	(a) Total number of accounts held at the end of the fiscal period .....	5861		
	(b) Total value of all accounts held at the end of the fiscal period.....	5862	\$	
	(c) Total value of donations to DAF accounts received during the fiscal period .....	5863	\$	
	(d) Total value of qualifying disbursements from DAFs during the fiscal period .....	5864	\$	

**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.

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

**D1** Was the financial information reported below prepared on an accrual or cash basis? ..... **4020**  Accrual  Cash

**D2 Summary of financial position:**

Using the charity's own financial statements, enter the following:

Did the charity own land and/or buildings? ..... **4050**  Yes  No**Total assets (including land and buildings)** ..... **4200** **\$ 25,632****Total liabilities** ..... **4350** **\$ 0**Did the charity borrow from, loan to, or invest assets with any non-arm's length persons? ..... **4400**  Yes  No**D3 Revenue:**Did the charity issue tax receipts for gifts? ..... **4490**  Yes  NoIf **yes**, enter the total eligible amount of all gifts for which the charity has issued or will issue tax receipts ..... **4500** **\$ 37,636**Total amount received from other registered charities ..... **4510** **\$ 0**Total other gifts received for which a tax receipt was **not** issued by the charity (excluding amounts at lines 4575 and 4630) ..... **4530** **\$ 0**Did the charity receive any revenue from any level of government in Canada? ..... **4565**  Yes  NoIf **yes**, total amount received ..... **4570** **\$ 0**Total tax-receipted revenue from all sources outside of Canada (government and non-government) ..... **4571** **\$ 0**Total **non** tax-receipted revenue from all sources outside of Canada (government and non-government) ..... **4575** **\$ 0**Total **non** tax-receipted revenue from fundraising ..... **4630** **\$ 1,890**Total revenue from sale of goods and services (except to any level of government in Canada) ..... **4640** **\$ 0**Other revenue not already included in the amounts above ..... **4650** **\$ 110****Total revenue (add lines 4500, 4510 to 4570, and 4575 to 4650)** ..... **4700** **\$ 39,636****D4 Expenditures:**Professional and consulting fees ..... **4860** **\$ 0**Travel and vehicle expenses ..... **4810** **\$ 80**All other expenditures not already included in the amounts above (excluding qualifying disbursements) ..... **4920** **\$ 37,156**Total expenditures (excluding qualifying disbursements) (add lines 4860, 4810, and 4920) ..... **4950** **\$ 37,236**

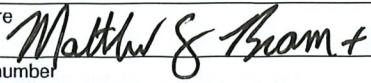
Of the amount at line 4950:

(a) Total expenditures on charitable activities ..... **5000** **\$ 37,152**(b) Total expenditures on management and administration ..... **5010** **\$ 84**Total amount of grants made to all non-qualified donees (grantees) ..... **5045** **\$ 0**Total amount of gifts made to all qualified donees ..... **5050** **\$ 3,800****Total expenditures (add lines 4950, 5045, and 5050)** ..... **5100** **\$ 41,036**

**Section E: Certification**

This return **must** be signed by a person who has authority to sign on behalf of the charity. It is a serious offence under the Income Tax Act to provide false or deceptive information.

I certify that the information given on this annual return and any attachment is, to the best of my knowledge, correct, complete, and current.

Name (print) <b>Matthew Brown</b>	Signature 	
Position in charity <b>Incumbent</b>	Date <b>2025-06-21</b>	Phone number <b>613-687-9123</b>

**Section F: Confidential data**

**F1** Enter the physical address of the charity and the address in Canada for the charity's books and records. Post office box numbers and rural routes are not sufficient.

	Physical address of the charity	Address for the charity's books and records
Complete street address	<b>36 Mill Street</b>	<b>68 Renfrew Street</b>
City	<b>Killaloe</b>	<b>Pembroke</b>
Province or territory and postal code	<b>Ontario K0J2A0</b>	<b>Ontario K8A5R6</b>

**F2** Name and address of individual who completed this return.

Name <b>Gillian Hoyer</b>		
Company name (if applicable)		
Complete street address <b>1179 Victoria Street</b>		
City, province or territory, and postal code <b>Petawawa, Ontario, K8H2E6</b>		
Phone number <b>613-687-9123</b>	Is this the same individual who certified in Section E above?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Privacy statement**

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

The Canada Revenue Agency (CRA) will make the information on this annual information return available to the public on the Charities Directorate website, except for information identified as confidential. Personal information may also be disclosed under information-sharing agreements and in accordance with section 241 of the Act. Incomplete or inaccurate information may result in compliance measures including revocation of registered status.

Personal information is described in personal information bank 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. 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 organization to voluntarily inform its directors and like officials that it has collected and disclosed their personal information to the CRA.

I confirm that I have read the Privacy statement above.

**Checklist**

A charity's complete annual information return includes:

- Form T3010, Registered Charity Information Return, and all applicable schedules
- a copy of the charity's financial statements
- Form T1235, Directors/Trustees and Like Officials Worksheet
- Form T1236, Qualified donees worksheet/Amounts provided to other organizations (if applicable)
- Form T2081, Excess Corporate Holdings Worksheet for Private Foundations (if applicable)
- Form T1441, Qualifying Disbursements: Grants to Non-Qualified Donees (Grantees) (if applicable)

If financial statements are not included, the charity's **registration may be revoked**.

Foundations		Schedule 1
1	Did the foundation acquire control of a corporation?.....	100 <input type="checkbox"/> Yes <input type="checkbox"/> No
2	Did the foundation incur any debts other than for current operating expenses, purchasing or selling investments, or in administering charitable activities?.....	110 <input type="checkbox"/> Yes <input type="checkbox"/> No
3	(a) What was the total value of all restricted funds held at the end of the fiscal period?.....	111 \$ _____
	(b) Of that amount, what amount was the foundation not permitted to spend due to a funder's written trust or direction? _____	112 \$ _____

## For private foundations only:

4	Did the foundation hold any shares, rights to acquire shares, or debts owing to it that meet the definition of a non-qualified investment?.....	120 <input type="checkbox"/> Yes <input type="checkbox"/> No
5	Did the foundation own more than 2% of any class of shares of a corporation at any time during the fiscal period? .....	130 <input type="checkbox"/> Yes <input type="checkbox"/> No

If yes, you must complete and attach Form T2081, Excess Corporate Holdings Worksheet for Private Foundations.

Activities outside Canada		Schedule 2
Important:	If you complete this section, you must answer yes to question C4.	

For more information, go to [canada.ca/charities-giving](http://canada.ca/charities-giving) and see Guidance CG-002, Canadian registered charities carrying on activities outside Canada.

1	Total expenditures on activities/programs/projects carried on outside Canada, excluding qualifying disbursements .....	200 \$ _____
2	Were any of the charity's financial resources spent on programs outside of Canada under any kind of an arrangement including a contract, agency agreement, or joint venture to any other individual or organization (excluding qualifying disbursements)?.....	210 <input type="checkbox"/> Yes <input type="checkbox"/> No

If yes, provide details of the amount reported in question 1 on line 200, that the charity transferred to these individuals or organizations in the following table:

Name of Individual/organization	Country code where the activities were carried out (see list at the end of Schedule 2)	Amount (\$) Show amounts to the nearest Canadian dollar

Important: If you entered information in the table above, you must answer yes in line 210.

3	Using the table below, enter the countries outside Canada where the charity itself carried on programs or devoted any of its resources.

4	Were any projects undertaken outside Canada funded by Global Affairs Canada?.....	220 <input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, what was the total amount the charity spent under this arrangement? .....	230 \$ _____
5	Were any of the charity's activities outside of Canada carried out by employees of the charity?.....	240 <input type="checkbox"/> Yes <input type="checkbox"/> No
6	Were any of the charity's activities outside of Canada carried out by volunteers of the charity? .....	250 <input type="checkbox"/> Yes <input type="checkbox"/> No
7	Did the charity export goods as part of its charitable activities? .....	260 <input type="checkbox"/> Yes <input type="checkbox"/> No

If yes, list the items exported, their destination, the country code, and their value.

Item exported	Destination (city/region)	Country code	Value (CAN \$)

**Country codes**

AF-Afghanistan	CU-Cuba	KP-North Korea	RO-Romania
AL-Albania	CY-Cyprus	KR-South Korea	RU-Russia
DZ-Algeria	DK-Denmark	KW-Kuwait	RW-Rwanda
AO-Angola	DO-Dominican Republic	KG-Kyrgyzstan	SA-Saudi Arabia
AR-Argentina	EC-Ecuador	LA-Laos	RS-Serbia
AM-Armenia	EG-Egypt	LB-Lebanon	SL-Sierra Leone
AZ-Azerbaijan	SV-El Salvador	LR-Liberia	SG-Singapore
BD-Bangladesh	ET-Ethiopia	MK-Macedonia	SO-Somalia
BY-Belarus	FR-France	MG-Madagascar	ES-Spain
BT-Bhutan	GA-Gabon	MY-Malaysia	LK-Sri Lanka
BO-Bolivia	GM-Gambia	ML-Mali	SD-Sudan
BA-Bosnia and Herzegovina	GE-Georgia	MU-Mauritius	SY-Syrian Arab Republic
BW-Botswana	DE-Germany	MX-Mexico	TJ-Tajikistan
BR-Brazil	GH-Ghana	MN-Mongolia	TZ-United Republic of Tanzania
BN-Brunel Darussalam	GT-Guatemala	ME-Montenegro	TH-Thailand
BG-Bulgaria	GY-Guyana	MZ-Mozambique	TL-Timor-Leste
BI-Burundi	HT-Haiti	MM-Myanmar (Burma)	TR-Turkey
KH-Cambodia	HN-Honduras	NA-Namibia	UG-Uganda
CM-Cameroun	IN-India	NL-Netherlands	UA-Ukraine
CF-Central African Republic	ID-Indonesia	NI-Nicaragua	GB-United Kingdom
TD-Chad	IR-Iran	NE-Niger	US-United States of America
CL-Chile	IQ-Iraq	NG-Nigeria	UY-Uruguay
CN-China	IL-Israel	OM-Oman	UZ-Uzbekistan
CO-Colombia	PS-Israeli Occupied Territories	PK-Pakistan	VE-Venezuela
KM-Comoros	IT-Italy	PA-Panama	VN-Vietnam
CD-Democratic Republic of Congo	JM-Jamaica	PE-Peru	YE-Yemen
CG-Republic of Congo	JP-Japan	PH-Philippines	ZM-Zambia
CR-Costa Rica	JO-Jordan	PL-Poland	ZW-Zimbabwe
CI-Côte d'Ivoire	KZ-Kazakhstan	QA-Qatar	
HR-Croatia	KE-Kenya	RE-Réunion	

**Use the following codes for countries not listed above:**

QS-Other countries in Africa  
 QR-Other countries in Asia and Oceania  
 QM-Other countries in Central and South America  
 QP-Other countries in Europe  
 QO-Other countries in the Middle East  
 QN-Other countries in North America

## Compensation

## Schedule 3

**Important:** If you complete this section, you **must** answer **yes** to question C9.

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="text" value=""/>	\$1 – \$39,999	310 <input type="text" value=""/>	\$40,000 – \$79,999	315 <input type="text" value=""/>	\$80,000 – \$119,999
320 <input type="text" value=""/>	\$120,000 – \$159,999	325 <input type="text" value=""/>	\$160,000 – \$199,999	330 <input type="text" value=""/>	\$200,000 – \$249,999
335 <input type="text" value=""/>	\$250,000 – \$299,999	340 <input type="text" value=""/>	\$300,000 – \$349,999	345 <input type="text" value=""/>	\$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** **\$ 17,533**

3 Total expenditure on all compensation in the fiscal period. .... **390** **\$ 21,033**

## Confidential data

## Schedule 4

**Important:** If you complete this section, you **must** answer **yes** to question C10.

The information in this schedule is for the CRA's use and may be shared as permitted by law (for example, with certain other government departments and agencies).

## 1. Information about external fundraisers

Enter the name(s) and arm's length status of each external fundraiser.

Name (confidential)	At arm's length? Yes/No (confidential)

## 2. Information about donors not resident in Canada

Complete this schedule to report any gift of any kind valued at \$10,000 or more received from any donor that was **not** resident in Canada and was **not** any of the following:

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

Enter the name of each donor and the value of the gift in the table below. Select whether the donor was an organization (for example a business, corporate entity, charity, non-profit organization), a government or an individual.

Name (confidential)	Type of donor (confidential)			Value (CAN \$)
	Organization	Government	Individual	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## Non-cash gifts

## Schedule 5

**Important:** If you complete this section, you **must** answer **yes** to question C11.

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

500 <input 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 type="checkbox"/> Books
510 <input 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 <input type="checkbox"/> Specify: _____
520 <input type="checkbox"/> Cultural properties	545 <input type="checkbox"/> Machinery/equipment/computers/software	

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

## Detailed financial information

## Schedule 6

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	<b>4100</b>	\$ _____
Cash and bank accounts	<b>4101</b>	\$ _____
Short-term Investments	<b>4102</b>	\$ _____
Amounts receivable from non-arm's length persons	<b>4110</b>	\$ _____
Amounts receivable from all others	<b>4120</b>	\$ _____
Investments in non-arm's length persons	<b>4130</b>	\$ _____
Long-term investments	<b>4140</b>	\$ _____
Inventories	<b>4150</b>	\$ _____
Land and buildings in Canada	<b>4155</b>	\$ _____
Used for charitable programs or administration	<b>4157</b>	\$ _____
Used for other purposes	<b>4158</b>	\$ _____
Other capital assets in Canada	<b>4160</b>	\$ _____
Capital assets outside Canada	<b>4165</b>	\$ _____
Accumulated amortization of capital assets	<b>4166</b>	\$ _____
Other assets	<b>4170</b>	\$ _____
Impact investments	<b>4190</b>	\$ _____
<b>Total assets</b> (add lines 4100, 4110 to 4155, and 4160 to 4170)	<b>4200</b>	\$ _____

## Liabilities:

Accounts payable and accrued liabilities	<b>4300</b>	\$ _____
Deferred revenue	<b>4310</b>	\$ _____
Amounts owing to non-arm's length persons	<b>4320</b>	\$ _____
Other liabilities	<b>4330</b>	\$ _____
<b>Total liabilities (add lines 4300 to 4330)</b>	<b>4350</b>	\$ _____

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	<b>4500</b>	\$ _____
Total eligible amount of tax-receipted tuition fees	<b>5610</b>	\$ _____
Total amount received from other registered charities	<b>4510</b>	\$ _____
Total other gifts received for which a tax receipt was <b>not</b> issued by the charity (excluding amounts at lines 4575 and 4630)	<b>4530</b>	\$ _____
Total revenue received from federal government	<b>4540</b>	\$ _____
Total revenue received from provincial/territorial governments	<b>4550</b>	\$ _____
Total revenue received from municipal/regional governments	<b>4560</b>	\$ _____
Total tax-receipted revenue from all sources outside of Canada (government and non-government)	<b>4571</b>	\$ _____
Total non tax-receipted revenue from all sources outside Canada (government and non-government)	<b>4575</b>	\$ _____
Total interest and investment income from impact investments	<b>4576</b>	\$ _____
Total interest and investment income from persons not at arm's length	<b>4577</b>	\$ _____
Total interest and investment income received or earned	<b>4580</b>	\$ _____
<b>Gross proceeds</b> from disposition of assets	<b>4590</b>	\$ _____
<b>Net proceeds</b> from disposition of assets (show a negative amount with brackets)		
Gross income received from rental of land and/or buildings	<b>4600</b>	\$ _____
Total non tax-receipted revenues received for memberships, dues and association fees	<b>4610</b>	\$ _____
Total non tax-receipted revenue from fundraising	<b>4620</b>	\$ _____
Total revenue from sale of goods and services (except to any level of government in Canada)	<b>4630</b>	\$ _____
Other revenue not already included in the amounts above	<b>4640</b>	\$ _____
Specify type(s) of revenue included in the amount reported at 4650	<b>4655</b>	\$ _____
<b>Total revenue (add lines 4500, 4510 to 4560, 4575, 4580, and 4600 to 4650)</b>	<b>4700</b>	\$ _____

**Expenditures:**

Advertising and promotion .....	4800	\$ _____
Travel and vehicle expenses.....	4810	\$ _____
Interest and bank charges.....	4820	\$ _____
Licences, memberships, and dues.....	4830	\$ _____
Office supplies and expenses.....	4840	\$ _____
Occupancy costs .....	4850	\$ _____
Professional and consulting fees .....	4860	\$ _____
Education and training for staff and volunteers .....	4870	\$ _____
Total expenditure on all compensation (enter the amount reported at line 390 in Schedule 3, if applicable) .....	4880	\$ _____
Fair market value of all donated goods used in charity's own activities.....	4890	\$ _____
Purchased supplies and assets .....	4891	\$ _____
Amortization of capitalized assets.....	4900	\$ _____
Research grants and scholarships as part of charity's own activities .....	4910	\$ _____
All other expenditures not included in the amounts above (excluding qualifying disbursements) .....	4920	\$ _____
Specify type(s) of expenditures included in the amount reported at 4920.....	4930	_____
Total expenditures before qualifying disbursements (add lines 4800 to 4920) .....	4950	\$ _____

Of the amounts at lines 4950:

(a) Total expenditures on charitable activities.....	5000	\$ _____
(b) Total expenditures on management and administration .....	5010	\$ _____
(c) Total expenditures on fundraising .....	5020	\$ _____
(d) Total other expenditures included in line 4950.....	5040	\$ _____

Total amount of grants made to all non-qualified donees (grantees).....	5045	\$ _____
Total amount of gifts made to all qualified donees .....	5050	\$ _____
<b>Total expenditures (add lines 4950, 5045 and 5050) .....</b>	5100	\$ _____

**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	\$ _____
--	------	----------

**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 <b>beginning</b> of the fiscal period .....	5900	\$ _____
• The 24 months before the <b>end</b> of the fiscal period .....	5910	\$ _____

## Disbursement quota

## Schedule 8

**Important:** If you complete this section, you **must** answer **yes** to question C17.

For more information, go to [Canada.ca/charities-disbursement-quota](http://Canada.ca/charities-disbursement-quota).

## Step 1. Calculating the disbursement quota requirement for the current fiscal period

Average value of property not used in charitable activities or administration (line 5900 from your return) ..... **805** \$ \_\_\_\_\_

If permission to accumulate property has been granted, enter the total amount accumulated less all disbursements made for the specified purpose (add all amounts from lines 5500 minus all amounts at lines 5510 from all returns to date covered by the permission to accumulate property period) ..... **810** \$ \_\_\_\_\_

Line 805 minus line 810 (if negative, enter 0) ..... **815** \$ \_\_\_\_\_

If line 815 is \$1,000,000 or less

Multiply line 815 by 3.5% ..... **820** \$ \_\_\_\_\_

If line 815 is over \$1,000,000

Line 815 minus \$1,000,000 ..... **825** \$ \_\_\_\_\_

Line 825 multiplied by 5% ..... **830** \$ \_\_\_\_\_

Line 830 plus \$35,000 ..... **835** \$ \_\_\_\_\_

Enter the amount from line 820 or line 835. This is your charity's disbursement quota requirement for the current fiscal period ..... **840** \$ \_\_\_\_\_

Total expenditures on charitable activities (line 5000 of your return) ..... **845** \$ \_\_\_\_\_

Total amount of grants made to non-qualified donees (line 5045 of your return) ..... **850** \$ \_\_\_\_\_

Total amount of gifts made to qualified donees (line 5050 of your return) ..... **855** \$ \_\_\_\_\_

Add lines 845 to line 855 ..... **860** \$ \_\_\_\_\_

Line 860 minus line 840. This is your charity's disbursement quota excess or shortfall for the current fiscal period ..... **865** \$ \_\_\_\_\_

If a shortfall exists (line 865 is negative), your charity can draw on disbursement excesses from the five previous fiscal periods to help it meet its shortfall. If no excesses are available to draw on, your charity can try to spend enough the following year to create an excess that it can carry back to cover the shortfall.

## Step 2. Estimating the disbursement quota requirement for the next fiscal period

Average value of property not used in charitable activities or administration prior to the next fiscal period (line 5910 from your return) ..... **870** \$ \_\_\_\_\_

If line 870 is \$1,000,000 or less

Multiply line 870 by 3.5% ..... **875** \$ \_\_\_\_\_

If line 870 is over \$1,000,000

Line 870 minus \$1,000,000 ..... **880** \$ \_\_\_\_\_

Line 880 multiplied by 5% ..... **885** \$ \_\_\_\_\_

Line 885 plus \$35,000 ..... **890** \$ \_\_\_\_\_

The amount shown at line 875 or line 890 is your charity's estimated disbursement quota requirement for the next fiscal period.





### 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.

**Important:** If you submit this form, you **must** answer **Yes** to question C3 in Form T3010 Charities information return for the same fiscal period.

Charity name: <b>The Congregation of Ascension/St. John's</b>	BN: (9 digits, 2 letters, 4 digits. Example: 123456789RR0001) <b>108084658RR0112</b>
--	---

Return for fiscal period ending: 

Year	Month	Day
2	0	2
4	1	2
3	3	1

Total number of qualified donees/other organizations: 

6
---

Name of organization: <b>Robbie Dean Family Counselling Centre</b>			Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/Registration number: <b>808289284 RR 0001</b>	City and Prov/Terr: <b>Pembroke ON</b>	Country: <b>Canada</b>	
Amount of non-cash gifts \$		Total amount of gifts	\$ <b>450.00</b>
<hr/>			
Name of organization: <b>Bernadette McCann House for Women Inc.</b>			Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/Registration number: <b>118803774 RR 0001</b>	City and Prov/Terr: <b>Pembroke ON</b>	Country: <b>Canada</b>	
Amount of non-cash gifts \$		Total amount of gifts	\$ <b>800.00</b>
<hr/>			
Name of organization: <b>Jabez Blanket Ministry International</b>			Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/Registration number: <b>860988377 RR 0001</b>	City and Prov/Terr: <b>Killaloe ON</b>	Country: <b>Canada</b>	
Amount of non-cash gifts \$		Total amount of gifts	\$ <b>150.00</b>
<hr/>			
Name of organization: <b>Teen Challenge Canada Eastern Ontario Men's Centre</b>			Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/Registration number: <b>108066663 RR 0001</b>	City and Prov/Terr: <b>Renfrew ON</b>	Country: <b>Canada</b>	
Amount of non-cash gifts \$		Total amount of gifts	\$ <b>900.00</b>
<hr/>			
Name of organization: <b>Operation Smile Canada</b>			Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/Registration number: <b>840643605 RR 0001</b>	City and Prov/Terr: <b>Markham ON</b>	Country: <b>Canada</b>	
Amount of non-cash gifts \$		Total amount of gifts	\$ <b>500.00</b>
<hr/>			
Name of organization: <b>Water First Education and Training Inc</b>			Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/Registration number: <b>838525269 RR 0001</b>	City and Prov/Terr: <b>Creemore ON</b>	Country: <b>Canada</b>	
Amount of non-cash gifts \$		Total amount of gifts	\$ <b>1,000.00</b>
<hr/>			

### **Completing the Qualified donees worksheet / Amounts provided to other organizations**

List the name of each organization that received a gift from the charity. Do not list the name of an organization more than once. Do not enter names of persons who have received a benefit from the charity. For example, do not list the names of students who received a scholarship from the charity.

**Name of organization:** Enter the full name of the organization that received a gift from the charity.

**Associated charity:** Tick **Yes** if the organization is associated with the charity. Associated charities are two or more registered charities that have applied for and received this designation from the Charities Directorate. For more information, go to [canada.ca/charities-giving](http://canada.ca/charities-giving), select A to Z index of topics for charities, then Glossary, and see Associated Charities.

**BN/registration number:** Give the organization's complete business number (BN), if it has one. A BN is assigned to organizations that have accounts with the Canada Revenue Agency.

**City and Province/Territory:** Enter the city, town, village, or other municipality and province or territory of the organization that received a gift from the charity. If the organization is outside the country, enter its full mailing address, including the country.

**Amount of non-cash gifts:** Enter the amount of all non-cash gifts the charity made to the organization. Amounts must be the fair market value of the gifts in Canadian dollars. Examples of non-cash gifts are property, such as land, artwork, equipment, securities, pharmaceuticals, and cultural and ecological property. For more information on fair market value, go to [canada.ca/charities-giving](http://canada.ca/charities-giving), select A to Z index, and see Determining fair market value of non-cash gifts.

**Total amount of gifts:** Enter the total amount of all gifts (including non-cash gifts) given to the organization. Amounts must be in Canadian dollars.

**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.

 Charity name: **3**

Total number of directors/trustees and like officials:

**The Congregation of Ascension/St. John's**

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

**Public information**

Public information												Confidential data											
Last name: <b>Brown</b>	First name: <b>Matthew</b>	Initial: <b>J</b>	Residential address – Street number and name: <b>1179 Victoria St.</b>																				
Term ► Start date (Y/M/D): <b>2   0   2   2   0   5   1</b>	End date (Y/M/D): <b>3</b>		City: <b>Petawawa</b>	Prov/Terr: <b>ON</b>	Postal code: <b>K   8   H   2   E   6</b>																		
Position: <b>Incumbent</b>	At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											Phone number	<b>6   1   3   -   6   8   7   -   9   1   2   3</b>	Date of birth (Y/M/D): <b>1   9   8   5   0   1   2   0</b>									
Last name: <b>Fulcher</b>	First name: <b>Susan</b>	Initial: <b></b>	Residential address – Street number and name: <b>2596 Round Lake Rd</b>																				
Term ► Start date (Y/M/D): <b>2   0   2   2   0   2   7</b>	End date (Y/M/D): <b>7</b>		City: <b>Round Lake Centre</b>	Prov/Terr: <b>ON</b>	Postal code: <b>K   0   J   2   A   0</b>																		
Position: <b>Rector's Warden</b>	At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											Phone number	<b>3   4   3   -   5   4   4   -   7   6   6   4</b>	Date of birth (Y/M/D): <b></b>									
Last name: <b>Sullivan</b>	First name: <b>Daniel</b>	Initial: <b></b>	Residential address – Street number and name: <b>299 Red Rock Rd.</b>																				
Term ► Start date (Y/M/D): <b>2   0   2   4   0   2   5</b>	End date (Y/M/D): <b>5</b>		City: <b>Killaloe</b>	Prov/Terr: <b>ON</b>	Postal code: <b>K   0   J   2   A   0</b>																		
Position: <b>People's Warden</b>	At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											Phone number	<b>6   1   3   -   7   5   7   -   2   2   8   9</b>	Date of birth (Y/M/D): <b>1   9   8   5   0   9   2   7</b>									
Last name: <b></b>	First name: <b></b>	Initial: <b></b>	Residential address – Street number and name:																				
Term ► Start date (Y/M/D): <b></b>	End date (Y/M/D): <b></b>		City: <b></b>	Prov/Terr: <b></b>	Postal code: <b></b>																		
Position: <b></b>	At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No											Phone number	<b>-   -   -   -   -   -   -   -   -   -   -   -</b>	Date of birth (Y/M/D): <b></b>									
Last name: <b></b>	First name: <b></b>	Initial: <b></b>	Residential address – Street number and name:																				
Term ► Start date (Y/M/D): <b></b>	End date (Y/M/D): <b></b>		City: <b></b>	Prov/Terr: <b></b>	Postal code: <b></b>																		
Position: <b></b>	At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No											Phone number	<b>-   -   -   -   -   -   -   -   -   -   -   -</b>	Date of birth (Y/M/D): <b></b>									
Last name: <b></b>	First name: <b></b>	Initial: <b></b>	Residential address – Street number and name:																				
Term ► Start date (Y/M/D): <b></b>	End date (Y/M/D): <b></b>		City: <b></b>	Prov/Terr: <b></b>	Postal code: <b></b>																		
Position: <b></b>	At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No											Phone number	<b>-   -   -   -   -   -   -   -   -   -   -   -</b>	Date of birth (Y/M/D): <b></b>									
Last name: <b></b>	First name: <b></b>	Initial: <b></b>	Residential address – Street number and name:																				
Term ► Start date (Y/M/D): <b></b>	End date (Y/M/D): <b></b>		City: <b></b>	Prov/Terr: <b></b>	Postal code: <b></b>																		
Position: <b></b>	At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No											Phone number	<b>-   -   -   -   -   -   -   -   -   -   -   -</b>	Date of birth (Y/M/D): <b></b>									
Last name: <b></b>	First name: <b></b>	Initial: <b></b>	Residential address – Street number and name:																				
Term ► Start date (Y/M/D): <b></b>	End date (Y/M/D): <b></b>		City: <b></b>	Prov/Terr: <b></b>	Postal code: <b></b>																		
Position: <b></b>	At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No											Phone number	<b>-   -   -   -   -   -   -   -   -   -   -   -</b>	Date of birth (Y/M/D): <b></b>									
Last name: <b></b>	First name: <b></b>	Initial: <b></b>	Residential address – Street number and name:																				
Term ► Start date (Y/M/D): <b></b>	End date (Y/M/D): <b></b>		City: <b></b>	Prov/Terr: <b></b>	Postal code: <b></b>																		
Position: <b></b>	At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No											Phone number	<b>-   -   -   -   -   -   -   -   -   -   -   -</b>	Date of birth (Y/M/D): <b></b>									
Last name: <b></b>	First name: <b></b>	Initial: <b></b>	Residential address – Street number and name:																				
Term ► Start date (Y/M/D): <b></b>	End date (Y/M/D): <b></b>		City: <b></b>	Prov/Terr: <b></b>	Postal code: <b></b>																		
Position: <b></b>	At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No											Phone number	<b>-   -   -   -   -   -   -   -   -   -   -   -</b>	Date of birth (Y/M/D): <b></b>									
Last name: <b></b>	First name: <b></b>	Initial: <b></b>	Residential address – Street number and name:																				
Term ► Start date (Y/M/D): <b></b>	End date (Y/M/D): <b></b>		City: <b></b>	Prov/Terr: <b></b>	Postal code: <b></b>																		
Position: <b></b>	At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No											Phone number	<b>-   -   -   -   -   -   -   -   -   -   -   -</b>	Date of birth (Y/M/D): <b></b>									

 Return for fiscal period ending (YYYY/MM/DD): **2 | 0 | 2 | 4 | 1 | 2 | 3 | 1**

 Business number: **108084658 R R 012**

## Completing the Directors/Trustees and Like Officials Worksheet

### Public information

Information from this column is available to the public.

Enter the last name, first name, and initial of the director/trustee or like official.

#### Term:

**Start date:** Enter the date the person started in the position.

**End date:** Enter the date the person left the position. If the person has not left the position, leave this field blank.

**Position:** Enter the title of the position being held. Each position is generally identified in an organization's governing documents (for example, president, treasurer, secretary). A registered charity may have other officials that have governing powers similar to those of a director or trustee. For example, a religious leader with some governing authority would be considered a like official.

**At arm's length with other directors:** Tick **Yes** if the person is at arm's length with all other directors/trustees or like officials.

At arm's length is a concept that describes a relationship in which two persons act independently of each other and are not related. Related persons are individuals who are related to each other by blood, marriage or common-law partnership, or adoption. It is also possible that individuals not related by a family connection, but by close business relations, may still be considered not at arm's length. For more information on arm's length, go to [canada.ca/charities-giving](http://canada.ca/charities-giving), select "A to Z index of topics for charities," search for "Charities and giving glossary" and see "arm's length."

### Confidential data

Information from this column will stay confidential and will not be made available to the public except in circumstances in which the release of any or all of the information is required by law or, in certain circumstances, permitted by law.

**Term:**  
According to the Income Tax Act, circumstances in which the law requires or permits such information to be disclosed include a court order, warrant, or subpoena issued for a criminal proceeding under an act of Parliament or a legal proceeding relating to the administration or enforcement of the Income Tax Act, the Canada Pension Plan, the Unemployment Insurance Act, or the Employment Insurance Act, or any other act of Parliament or law of a province that allows a tax or duty to be imposed or collected.

Other circumstances in which we are required or permitted by law to disclose certain records include a request made under the authority of the Auditor General Act, a warrant issued by the Canadian Security Intelligence Service Act, and enquiries from the Department of Finance Canada for information to form or evaluate fiscal policy.

**Residential address:** In the proper spaces, enter the full home address, including the street number, street name, city (which could be a town, village, or other municipality), province or territory, and postal code of each director/trustee or like official.

**Phone number:** Enter the telephone number at which the person can be reached during the day.

**Date of birth:** Enter the person's date of birth so that the CRA is better able to identify the individuals who are responsible for managing the charity.

If the director/trustee or like official lives outside the country, enter the person's full mailing address, including the country.

## The Church of Ascension Killaloe / St.John's Tramore: 2024 Financials & 2025 Budget

Opening Balance: \$20,740.95

		2023 Actual	2024 Budget	2024 Actuals	2025 Budget
<b>Income</b>					
Offerings	Envelope Offerings	\$51,450.00	\$42,000.00	\$37,635.28	
	Open Offerings	\$492.00	\$600	\$0.00	
	<b>Offerings total</b>	<b>\$51,942.00</b>	<b>\$42,600.00</b>	<b>\$37,635.28</b>	<b>\$ 40,000.00</b>
Outreach	In Offerings	\$1,500.00	\$1,500	\$0.00	
	Outreach Sunday	\$1,545.00	\$1,500	\$0.00	
	Other	\$1,000	\$1,000	\$1,889.89	
	<b>Fundraisers Total</b>	<b>\$4,045.00</b>	<b>\$4,000</b>	<b>\$1,889.89</b>	<b>\$ 2,000.00</b>
Daily Devotionals/Calendars		\$95.00	\$50.00	\$0.00	
GIC Interest		\$50.62	\$50.00	\$50.00	
US Exchange		\$85.70	\$50.00	\$0.00	
HST Refund		\$1,298.30	\$750.00	\$60.11	
In Memorium (CTF Deposit)		\$100.00	\$50.00	\$0.00	\$ 5,000.00
Canada Helps		\$508.80	\$200.00	\$0.00	
<b>TOTAL INCOME</b>		<b>\$68,126.42</b>	<b>\$47,760.00</b>	<b>\$39,635.28</b>	<b>\$ 47,000.00</b>

GIC 2024
\$6,292.33

		2023 Actual	2024 Budget	2024 Actuals	2025 Budget
<b>Expenses</b>					
Central Account		\$30,693.96	\$31,880.53	\$31,991.77	\$ 31,811.09
Property	Snow Removal	\$1,140.00	\$1,200	\$544.00	\$ 1,200.00
	Yard Maintenance	\$300.00	\$600.00	\$0.00	\$ 600.00
	Church Cleaning	\$2,050.00	\$2,000.00	\$2,000.00	\$ 2,000.00
	Church Resoration	\$40.00	\$300.00	\$0.00	\$ 500.00
	Misc	\$124.04	\$150.00	\$322.62	\$ 300.00
	<b>Property total</b>	<b>\$3,654.04</b>	<b>\$4,250</b>	<b>\$2,066.62</b>	<b>\$ 4,600.00</b>
Building	Vault	\$100.00	\$100.00	\$100.00	\$ 100.00
	Water	\$100.00	\$100.00	\$100.00	\$ 100.00
	Sewage	\$438.00	\$500.00	\$472.15	\$ 500.00
	Hydro	\$810.81	\$900.00	\$1,170.51	\$ 1,500.00
	Heating Oil	\$3,464.33	\$4,000.00	\$4,274.78	\$ 4,500.00
	Furnace	\$0.00	\$500.00	\$0.00	\$ 500.00
	Supplies	\$254.53	\$300.00	\$0.00	\$ 250.00
	<b>Building Total</b>	<b>\$5,167.67</b>	<b>\$6,400.00</b>	<b>\$6,117.44</b>	<b>\$ 7,450.00</b>
Other	Administrative Supplies	\$46	\$300	\$0.00	\$ 50.00
	Bank Charges	\$336.21	\$200.00	\$83.50	\$ 100.00
	Music	\$0.00	\$100.00	\$100.00	
	Organist	\$1,000.00	\$1,500.00	\$1,500.00	\$ 1,500.00
	Discretionary	\$0.00	\$100.00	\$0.00	\$ 250.00
	HST	\$623.92	\$650.00	\$694.44	\$ 700.00
	Misc/Gifts	\$132.96	\$300.00	\$0.00	\$ 200.00
	CTF Deposit	\$0.00	\$0.00	\$0.00	\$ 5,000.00
<b>Other Total</b>		<b>\$2,139.09</b>	<b>\$3,150.00</b>	<b>\$2,377.94</b>	<b>\$ 7,900.00</b>
Outreach	Water First	\$1,000.00		\$1,000.00	
	Operalion Smile	\$500.00		\$500.00	
	Robble Dean Centre	\$450.00		\$450.00	
	Tools for Schools	\$750.00		\$0.00	
	Bernadette McCann	\$450.00		\$800.00	
	Rev. Charles	\$2,000.00		\$0.00	\$ 2,000.00
	Jabez Blanket	\$150.00		\$150.00	
	Teen Challenge	\$900.00		\$900.00	
	Other	\$1,433.93		\$0.00	
	<b>Outreach Total</b>	<b>\$7,633.93</b>	<b>\$7,400.00</b>	<b>\$3,800.00</b>	<b>TBD by Vestry</b>
<b>Total Expenses</b>		<b>\$49,288.69</b>	<b>\$53,080.53</b>	<b>\$41,036.33</b>	<b>\$ 53,761.09</b>

(\$2K Contribution made in 2025 for 2024)

Closing Balance: \$19,339.90

