

Signed + sent
September 21, 2018



23 2018-03-31 10807 9419 RR 0001 0299198

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.

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

If you did not receive a barcode label to attach to the return, complete the following:

1. Charity name:

The Cridge Centre for the Family

2. Return for fiscal period ending:

Year: 2018, Month: 03, Day: 31

3. BN/registration number:

108079419 RR 0001

4. Web address (if applicable):

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

Name: _____ BN (if applicable) _____

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-WS, Director/Officer Worksheet and Ontario Corporations Information Act Annual Return.

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 In the space below, describe all ongoing and new charitable programs the charity carried on 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:

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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 Political Activities

A registered charity may pursue political activities only if the activities are non-partisan, related to its charitable purposes, and limited in extent. A political activity is any activity that explicitly communicates to the public that a law, policy or decision of any level of government inside or outside Canada should be retained, opposed, or changed.

(a) Did the charity carry on any political activities during the fiscal period, including making gifts to qualified donees that were intended for political activities? **2400** Yes No
 If **yes**, you must complete Schedule 7, Political Activities, Tables 1 and 2.

(b) Total amount spent by the charity on these political activities. **5030** \$

(c) Of the amount at line 5030, the total amount of gifts made to qualified donees. **5031** \$

(d) Total amount received from outside Canada that was directed to be spent on political activities. **5032** \$
 If you entered an amount on line 5032 you must complete Schedule 7, Political Activities, Table 3.

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 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 type="checkbox"/> Planned-giving programs | 2650 <input checked="" type="checkbox"/> Other |
| 2550 <input type="checkbox"/> Draws/lotteries | 2600 <input 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 gifts in kind (non-cash gifts) for which it issued tax receipts? **4000** Yes No
If **yes**, you must complete Schedule 5, Gifts in kind.
- 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.

Skip this section if any of the following applies to the charity:

- (a) The charity's revenue exceeds \$100,000.
- (b) The amount of all property (for example, investments, rental properties) not used in charitable activities is more than \$25,000.
- (c) The charity has 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="5"/> \$40,000 – \$79,999	315 <input type="checkbox" value="4"/> \$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** \$

Gifts in kind

Schedule 5

1 Select all types of gifts in kind received for which a tax receipt was issued:

500 <input checked="" type="checkbox"/> Artwork/wine/jewellery	525 <input type="checkbox"/> Ecological properties	550 <input checked="" 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 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 gifts in kind. **580** \$

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

- (a) The charity's revenue exceeds \$100,000.
- (b) The amount of all property (for example, investments, rental properties) not used in charitable activities is more than \$25,000.
- (c) The charity has 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	\$ 1,535,140
Amounts receivable from non-arm's length persons	4110	\$
Amounts receivable from all others	4120	\$ 132,810
Investments in non-arm's length persons	4130	\$
Long-term investments	4140	\$ 2,826,642
Inventories	4150	\$ 1,315
Land and buildings in Canada	4155	\$ 20,208,666
Other capital assets in Canada	4160	\$ 1,702,540
Capital assets outside Canada	4165	\$
Accumulated amortization of capital assets	4166	\$ - 7,949,478
Other assets	4170	\$ 2,599,835
10 year gifts	4180	\$ 324,144
Total assets (add lines 4100 to 4170)	4200	\$ 21,057,470

Liabilities:

Accounts payable and accrued liabilities	4300	\$ 2,444,733
Deferred revenue	4310	\$ 2,796,671
Amounts owing to non-arm's length persons	4320	\$
Other liabilities	4330	\$ 9,326,631
Total liabilities (add lines 4300 to 4330)	4350	\$ 14,568,035

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 issued tax receipts	4500	\$ 181,275
Total eligible amount of tax-receipted tuition fees	5610	\$
Total amount of 10 year gifts received	4505	\$
Total amount received from other registered charities	4510	\$ 91,024
Total other gifts received for which a tax receipt was not issued by the charity (excluding amounts at lines 4575 and 4630)	4530	\$ 32,589
Total revenue received from federal government	4540	\$ 97,216
Total revenue received from provincial/territorial governments	4550	\$ 3,871,557
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	\$ 92,329
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	\$ 2,420,475
Total non tax-receipted revenues received for memberships, dues and association fees	4620	\$ 1,975
Total non tax-receipted revenue from fundraising	4630	\$ 30,615
Total revenue from sale of goods and services (except to any level of government in Canada)	4640	\$ 1,489,676
Other revenue not already included in the amounts above	4650	\$ 514,273
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	\$ 8,823,004

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Expenditures:

Advertising and promotion	4800	\$	69,951
Travel and vehicle expenses	4810	\$	77,206
Interest and bank charges	4820	\$	280,996
Licences, memberships, and dues	4830	\$	17,966
Office supplies and expenses	4840	\$	158,441
Occupancy costs	4850	\$	1,035,024
Professional and consulting fees	4860	\$	140,565
Education and training for staff and volunteers	4870	\$	36,110
Total expenditure on all compensation (enter the amount reported at line 390 in Schedule 3, if applicable)	4880	\$	4,825,888
Fair market value of all donated goods used in charitable activities	4890	\$	16,186
Purchased supplies and assets	4891	\$	1,531,306
Amortization of capitalized assets	4900	\$	622,072
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	\$	5,528
Specify type(s) of expenditures included in the amount reported at 4920	4930	Returned grant & insurance premium	
Total expenditures before gifts to qualified donees (add lines 4800 to 4920)	4950	\$	8,817,239

Of the amounts at lines 4950 and 5031 (reported at C5 Political Activities (c)):

(a) Total expenditures on charitable activities	5000	\$	7,892,033
(b) Total expenditures on management and administration	5010	\$	842,795
(c) Total expenditures on fundraising	5020	\$	76,884
(d) Total expenditures on political activities, inside or outside Canada, from question C5 (b)	5030	\$	
(e) Total other expenditures included in line 4950	5040	\$	5,528
Total amount of gifts made to all qualified donees	5050	\$	4,226
Total expenditures (add lines 4950 and 5050)	5100	\$	8,821,465

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
- Enter the amount disbursed for the fiscal period for the specified purpose

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

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
- The 24 months before the **end** of the fiscal period



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You must return this sheet with your information return as it is an integral part of your return. When you sign your Registered Charity Information Return, you are also confirming the information on this sheet.

- This basic information sheet contains information that we have on file for the charity.
- For your convenience, you may make changes to the information on this form where a box is provided.
- To make changes to any other information, you must send us a written request with appropriate documentation.

Designation: Charitable Organization Fiscal period end: 03-31 Registration date: 1967-01-01 BN/registration number: 10807 9419 RR 0001

Telephone number:
(250) 384-8058

Fax number:
(250) 384-5267

Email address:
LZWICK@CRIDGE.ORG

Web site address:
WWW.CRIDGE.ORG

Public contact name or position:
SHELLEY MORRIS

Names the charity is known by other than its registered name:

Telephone number
Fax number
Email address:
Web site address:
Public contact name or position:
Names the charity is known by other than its registered name:

Program areas:

The three primary areas in which the charity is now carrying on programs to achieve its charitable purposes are listed below. The program areas are ranked according to the percentage of time and resources devoted to each program area. (See the guide for a description of programs and field codes.)

Rank	Description	Field code	% of emphasis
1	Housing for seniors, low-income, & those with	A1	45
2	Day care/after-school care	H9	15
3	Emergency shelter	A10	10

Program areas:

If the charity's primary areas of activity for the fiscal period ending 2018-03-31 were different from those for the previous fiscal period, correct the information in the box below. (See the guide for a description of programs and field codes.)

Rank	Description	Field code	% of emphasis
1			
2			
3			

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 n 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:		First name:						Initial:				
Cridge		Michael						E.				
Term ▶ Start date (Y/M/D):		2	0	1	3	0	9	2	3	End date (Y/M/D):		
Position:		President						At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Last name:		Dorrington						Initial: J.				
Term ▶ Start date (Y/M/D):		2	0	1	7	0	9	2	5	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:		Ellis						Initial: A.				
Term ▶ Start date (Y/M/D):		2	0	1	5	0	9	2	1	End date (Y/M/D):		
Position:		Secretary						At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Last name:		Fuller						Initial: M.				
Term ▶ Start date (Y/M/D):		2	0	1	7	0	9	2	5	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:		McNabb						Initial: A.				
Term ▶ Start date (Y/M/D):		2	0	1	1	1	0	0	3	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:		Parton						Initial: L.				
Term ▶ Start date (Y/M/D):		2	0	1	3	0	9	2	3	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:		Phillips						Initial:				
Term ▶ Start date (Y/M/D):		2	0	1	1	1	0	0	3	End date (Y/M/D):		
Position:		President						At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Last name:		Price						Initial: M.				
Term ▶ Start date (Y/M/D):		2	0	1	6	0	9	2	6	End date (Y/M/D):		
Position:		Treasurer						At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Last name:		Pryor						Initial:				
Term ▶ Start date (Y/M/D):		2	0	1	3	0	9	2	3	End date (Y/M/D):		
Position:		Vice-President						At arm's length with other Directors? <input type="checkbox"/> Yes <input type="checkbox"/> No				

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Last name: Rand		First name: David										Initial: A.						
Term ▶	Start date (Y/M/D):	2	0	1	4	0	9	2	2	End date (Y/M/D):	2	0	1	7	0	9	2	5
Position: Director																		
At arm's length with other Directors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																		
Last name: Spray		First name: Mary Jane										Initial: _____						
Term ▶	Start date (Y/M/D):	2	0	1	2	0	9	1	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: Zanon		First name: Tony										Initial: J.						
Term ▶	Start date (Y/M/D):	2	0	1	5	0	9	2	1	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.

Total number of qualified donees/other organizations: 5

Name of organization: Colwood Pentecostal Church		Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/Registration number: 118868645 RR 0001	City and Prov/Terr: Victoria BC	Country: Canada
Amount of gifts in kind \$	Total amount of gifts \$ 1,815.00	
Was any part of the gift intended for political activities? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, enter amount \$		
Name of organization: Emmanuel Baptist Church Victoria		Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/Registration number: 107302804 RR 0001	City and Prov/Terr: Victoria BC	Country: Canada
Amount of gifts in kind \$	Total amount of gifts \$ 1,235.62	
Was any part of the gift intended for political activities? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, enter amount \$		
Name of organization: Greater Victoria School District		Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/Registration number: 106799927 RR 0001	City and Prov/Terr: Victoria BC	Country: Canada
Amount of gifts in kind \$	Total amount of gifts \$ 150.00	
Was any part of the gift intended for political activities? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, enter amount \$		
Name of organization: The Federation of Community Social Services Society of British Columbia		Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/Registration number: 898839790 RR 0001	City and Prov/Terr: Victoria BC	Country: Canada
Amount of gifts in kind \$	Total amount of gifts \$ 1,000.00	
Was any part of the gift intended for political activities? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, enter amount \$		
Name of organization: Greater Victoria Coalition to End Homelessness		Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/Registration number: 842615221 RR 0001	City and Prov/Terr: Victoria BC	Country: Canada
Amount of gifts in kind \$	Total amount of gifts \$ 25.00	
Was any part of the gift intended for political activities? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, enter amount \$		
Name of organization:		Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No
BN/Registration number: RR	City and Prov/Terr:	Country:
Amount of gifts in kind \$	Total amount of gifts \$	
Was any part of the gift intended for political activities? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, enter amount \$		