Registered Charity Information Return

Section A: Identification	
To help you fill out this form, refer to Guide T4033, Completing the Registered Charity Information R	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: 3. BN/registration number:	4. Web address (if applicable):
Year Month Day 2 0 2 1 0 3 3 1 108079419 RR 0001	www.cridge.org
Was the charity in a subordinate position to a head body? If yes, give the name and BN/registration number of the organization.	1510 Yes ✓ No
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
If yes, you must complete Schedule 1, Foundations. To confirm the charity's designation, go to cetail 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 th Services. For more information on filing an Ontario annual information return, visit ontario ca/busine.	ne Ontario Ministry of Government and Consumer ssregistry.
Note: If you would like these individuals to have the authority to communicate with the CRA on behalf of your Business Number (BN). For more information, go to canada.ca/charities-giving , select "Operation organization" and see "Change director."	your charity, their name must also appear as an owner ing a registered charity," then "Making a change to you
Section C: Programs and general information	
Was the charity active during the fiscal period? If no, explain why in the "Ongoing programs" space below at C2.	1800
Describe all ongoing and new charitable programs the charity carried on during this fiscal period to documents). "Programs" includes all of the charitable activities that the charity carries out on its own qualified donees and intermediaries. The charity may also use this space to describe the contributio example, number of volunteers and/or hours. Do not include the names of employees or volunteers organizations they support. Do not describe fundraising activities in this space.	n through employees or volunteers as well as through ons of its volunteers in carrying out its activities, for
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 mer Preschool, School Age Care and a Summer Recreation Camp in our Child Care Centre. We provid community. We run a transition house for women & children leaving abusive situations. We operatow-cost rental units for older women and adults with children. We provide services & counseling left abusive situations. We provide case management & community support for brain injury survitadults. We maintain a database for respite providers in the Greater Victoria area that parents can free hotel rooms or a dinner out for parents who have a special needs child so they can have a br	de support & services to young parents in the rate a two bed Corrections contract. We provide g to our tenants, especially women & children who ivors living on their own and to FASD and Autism access. We run Respitality Program that provides
New programs	

	istered charities may make gifts to qualified donees. Qualified donees are other registered Canadian charities, as well as certain other anizations described in the Income Tax Act.
СЗ	Did the charity make gifts or transfer funds to qualified donees or other organizations? 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 (other than qualified donees) for any activity/ program/project outside Canada? Yes You
	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:
	2500 Advertisements/print/radio/ TV commercials 2570 Sales 2620 Telephone/TV solicitations
	2510 Auctions 2575 Internet 2630 Tournament/sporting events
	2530 Collection plate/boxes 2580 Mail campaigns 2640 Cause-related marketing
	2540 Door-to-door solicitation 2590 Planned-giving programs 2650 Other
	2550 Draws/lotteries 2600 Targeted corporate donations/sponsorships 2600 Specify: Newsletter
	2560 Fundraising dinners/galas/concerts 2610 Targeted contacts
C7	Did the charity pay external fundraisers? 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. (b) Enter the amounts paid to and/or retained by the fundraisers.
	(c) Select the method of payment to the fundraiser:
	2730 Commissions 2750 Finder's fee 2770 Honoraria
	2740 Bonuses 2760 Set fee for services 2780 Other
	2790 Specify:
	(d) Did the fundraiser issue tax receipts on behalf of the charity?
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)? Yes Volume
C9	Did the charity incur any expenses for compensation of employees during the fiscal period? 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:
	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.

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C11 Did the charity receive any non-cash gifts for which it issue		4000	✓ Yes	No
Important: If yes, you must complete Schedule 5, Non-6 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 pr	operty? (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 tin	ne during the fiscal period?	5830	Yes	✓ No
Maria de la companya del companya de la companya de la companya del companya de la companya de l				
Section D: Financial information				
Fill out either Section D or Schedule 6, Detailed financial inform	nation.			

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
Important: If you complete this section, you must a	nswer yes to question C9	
represent the number of positions the char	compensated positions in the fiscal period. This ity had including both managerial positions and of enter a dollar amount.	others, and should
(b) For the ten (10) highest compensated, per within each of the following annual comper	manent, full-time positions enter the number o nsation categories. Do not tick the boxes; use r	
305 \$1 - \$39,999	310 3 \$40,000 – \$79,999	315 6 \$80,000 – \$119,999
320 1 \$120,000 - \$159,999	\$160,000 - \$199,999	\$200,000 - \$249,999
\$250,000 - \$299,999	340 \$300,000 - \$349,999	345 \$350,000 and over
All a C a a literaturate of	(for example, seasonal) employees the charity	
(b) Total expenditure on compensation for par	t-time or part-year employees in the fiscal perio	380 \$ 1,995,407
Total expenditure on all compensation in the fi	iscal period.	390 \$ 6,147,606

	Non-cash gifts	Schedule 5
nportant: If you complete this section, you must	answer yes to question C11.	
Select all types of non-cash gifts received fo	or which a tax receipt was issued:	
500 Artwork/wine/jewellery	525 Ecological properties	550 Publicly traded securities/
505 Building materials	530 Life insurance policies	555 ✓ Books
510 Clothing/furniture/food	535 Medical equipment/supplies	560 Other
515 ✓ Vehicles	540 Privately-held securities	565 Specify:
520 Cultural properties	545 ✓ Machinery/equipment/ computers/software	
Enter the total amount of tax-receipted non-	cash qifts	580 \$ 4

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

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:		Liabilities:		
Cash, bank accounts, and short-term investments 4100	\$ 1,342,700	Accounts payable and accrued liabilities	4300	\$ 3,175,717
Amounts receivable from non-arm's length persons 4110	\$	Deferred revenue	4310	\$ 2,802,670
Amounts receivable from all others 4120	\$ 107,948	Amounts owing to non-arm's length persons	4320	\$
Investments in non-arm's length persons 4130	\$ 	Other liabilities	4330	\$ 8,153,177
Long-term investments 4140	\$ 4,040,404	Total liabilities (add lines 4300 to 4330)	4350	\$ 14,131,564
Inventories 4150	\$ 1,297			
Land and buildings in Canada 4158	\$ 21,253,992			
Other capital assets in Canada 4160	\$ 2,007,589			
Capital assets outside Canada 4169	\$			
Accumulated amortization of capital assets. 4166	\$ - 9,965,284	Amount included in lines 4150, 4155,		
Other assets 4170	\$ 3,569,977	4160, 4165 and 4170 not used in charitable activities	4250	\$
10 year gifts 4180 \$ 426,303	•	OTHER TRANSPORTER OF THE PROPERTY OF THE PROPE		
Total assets (add lines 4100 to 4170)	\$ 22,358,623			

Statement of operations

Revenue:		
Total eligible amount of all gifts for which the charity has issued or will issue tax receipts	4500	\$ 473,442
Total eligible amount of tax-receipted tuition fees		
Total amount of 10 year gifts received \$ 21,600		
Total amount received from other registered charities.	4510	\$ 74,653
Total other gifts received for which a tax receipt was not issued by the charity (excluding amounts at lines 4575 and 4630)	4530	\$ 42,237
Total revenue received from federal government	4540	\$ 241,447
Total revenue received from provincial/territorial governments	4550	\$ 5,820,296
Total revenue received from municipal/regional governments		\$
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	\$ 1,276,415
Gross proceeds from disposition of assets \$ 9,200		
Net proceeds from disposition of assets (show a negative amount with brackets)	4600	\$ (70,886)
Gross income received from rental of land and/or buildings	4610	\$ 2,331,176
Total non tax-receipted revenues received for memberships, dues and association fees	4620	\$ 2,250
Total non tax-receipted revenue from fundraising	4630	\$ 4,148
Total revenue from sale of goods and services (except to any level of government in Canada)	4640	\$ 1,011,405
Other revenue not already included in the amounts above.	4650	\$ 638,590
Specify type(s) of revenue included in the amount reported at 4650 Deferred & Miscellaneous income		
Total revenue (add lines 4500, 4510 to 4560, 4575, 4580, and 4600 to 4650)	4700	\$ 11,845,173

Expenditures:	- 4	4800 \$	35,111
Advertising and promotion		4810 \$	66,414
Travel and vehicle expenses		4820 \$	258,279
Interest and bank charges		4830 \$	16,589
Licences, memberships, and dues		4840 \$	194,227
Office supplies and expenses.		4850 \$	1,153,185
Occupancy costs		4860 \$	113,440
Professional and consulting fees		4870 \$	16,353
Education and training for staff and volunteers		4880 \$	6,147,606
Total expenditure on all compensation (enter the amount reported at line 390 in Schedule 3, if applicable)		4890 \$	0,147,000
Fair market value of all donated goods used in charitable activities		4891 \$	4 720 022
Purchased supplies and assets		4900 \$	1,730,923
Amortization of capitalized assets			743,205
Research grants and scholarships as part of charitable activities		4910 \$	E 000
All other expenditures not included in the amounts above (excluding gifts to qualified donees) Specify type(s) of expenditures included in the amount reported at 4920 Insurance Premium		4920 \$	5,000
Total expenditures before gifts to qualified donees (add lines 4800 to 4920)		4950 \$	10,480,332
Of the amounts at lines 4950:			
(a) Total expenditures on charitable activities 5000 \$	9,240,587		
(b) Total expenditures on management and administration 5010 \$	1,165,745		
(c) Total expenditures on fundraising 5020 \$	69,001		
(d) Total other expenditures included in line 4950 \$	5,000		
Total amount of gifts made to all qualified donees		5050 \$	12,725
Total expenditures (add lines 4950 and 5050)		5100 \$	10,493,057
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 pe	eriod	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 beginning of the fiscal period		5900 \$	5,794,804
The 24 months before the end of the fiscal period		5910 \$	6,480,551

Return for fiscal period ending (YYYY/MM/DD);

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Directors/Trustees and Like Officials Worksheet

storthustee 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 See the reverse for information on filling out this form.

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Business number: Charity name: Total number of directors/trustees and like officials:

The Cridge Centre for the Family

appear as an owner for your Business Number (BN), For more information, go tor," 2,0,2,1,0,3,3,1 108079419 R R 0001 Note: If you would like these individuals to have the and the and the angle of the second transfer of the second t

Public information		
Last name: Dorrington First name: Claudia	ia	Initial: J.
Term ▶ Start date (Y/M/D): 2 0 1 7 0 9 2 5 E	End date (Y/M/D):	
Position: Director At arm's le	At arm's length with other Directors?	✓ Yes No
Last name: Ellis First name: Lynne		Initial: A.
Term ▶ Start date (Y/M/D); 2 0 1 5 0 9 2 1 E	End date (Y/M/D):	
Position: Director At arm's le	At arm's length with other Directors?	V Yes No
Last name: Fuller First name: Valerie	o.	Initial: M.
Term ▶ Start date (Y/M/D); 2 0 1 7 0 9 2 5 E	End date (Y/M/D):	
Position: President At arm's le	At arm's length with other Directors?	✓ Yes No
Last name: Mann First name: Gerald	- Service	Initial: A.
Term ▶ Start date (Y/M/D): 2 0 1 9 1 1 0 4 E	End date (Y/M/D):	
Position: Director At arm's le	At arm's length with other Directors?	√ Yes No
Last name: Parton First name: Carol		Initial: L.
Term ▶ Start date (Y/M/D); 2 0 2 0 9 2 8 E	End date (Y/M/D):	-
Position: Director At arm's le	At arm's length with other Directors?	√ Yes No
Last name: Peters First name: Kenneth	ıtı	Initial: M.
Term ▶ Start date (Y/M/D); 2 0 1 9 0 9 3 0 E	End date (Y/M/D):	9
Position: Director At arm's le	At arm's length with other Directors?	Ves No
Last name: Phillips First name: Delmar	S.	Initial
Term ▶ Start date (Y/M/D): 2 0 1 8 0 9 1 7 E	End date (Y/M/D):	
Position: Director At arm's le	At arm's length with other Directors?	✓ Yes No
Last name: Price First name: Janis		Initial: M.
Term ▶ Start date (Y/M/D): 2 0 1 6 0 9 2 6 E	End date (Y/M/D):	
Position: Treasurer At arm's le	At arm's length with other Directors?	✓ Yes No
Last name: Spray First name: Mary Jane	lane	Initial:
Term ▶ Start date (Y/M/D). 2 0 1 9 0 9 3 0 E	0 End date (Y/M/D):	
C		

	FIRS	t narr	First name: Ann	듣		Initial: E.
Term ▶ Start date (Y/M/D): 2 0 1 8 0 9 1 7 End date (Y/M/D):	0 8	6	-	7	End date (Y/M/D):	
Position: Vice-President			Atar	I,s	At arm's length with other Directors?	Yes
				1]



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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.

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: The Cridge Centre for the Family			BN: (9 digits 10807941	, 2 letters, 4 digits, Examp 9RR0001	le: 123456789RR0001)
Return for fiscal period ending:	2 1 0 3 3 1				
Name of organization:				Associated charity:	
Cornerstone Youth Society				,	Yes ✓ No
BN/Registration number:	City and Prov/Terr:		Country		
885573139 RR 0001	Victoria BC		Canada		
Amount of non-cash gifts \$		Total amount of gifts		\$ 4,215.07	
Name of organization					
Name of organization:				Associated charity:	Yes ✓ No
Cowichan Therapeutic Riding Associati BN/Registration number:			0		
891723843 RR 0001	City and Prov/Terr: Duncan BC		Country: Canada		
	Duncan Bo		Callada		
Amount of non-cash gifts \$		Total amount of gifts		\$ 100.00	
Name of organization:				Associated charity:	
Pacific Centre Family Services Associa	tion			,	☐ Yes 🗸 No
BN/Registration number: 119075372 RR 0001	City and Prov/Terr: Victoria BC		Country: Canada	1	
Amount of non-cash gifts \$	4	Total amount of gifts		\$ 5,000.00	
Name of organization:				Associated charity:	
Victoria Single Parent Resource Centre	Society			Associated criamly.	Yes ✓ No
BN/Registration number:	City and Prov/Terr:		Country:		
107982472 RR 0001	Victoria BC		Canada		
Amount of non-cash gifts \$		Total amount of gifts		\$ 3,410.00	
Name of organization:				Associated charity:	Yes No
BN/Registration number: RR	City and Prov/Terr:		Country:		
Amount of non-cash gifts \$		Total amount of gifts		\$	
Name of organization:				Associated charity:	Yes No
BN/Registration number: RR	City and Prov/Terr:		Country:		
Amount of non-cash gifts \$		Total amount of gifts		\$	

