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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.

Complete the following:

1. Charity name:

The Cridge Centre for the Family

2. Return for fiscal period ending:

Year			Month			Day		
2	0	2	2	0	3	3	1	

3. BN/registration number:

108079419 R R 0001

4. Web address (if applicable):

www.cridge.org

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

Name

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

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

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

If **yes**, you **must** complete Schedule 1, Foundations. To confirm the charity's designation, go to 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.

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

Do not attach additional sheets of paper or annual reports.

Ongoing programs

We operate a 77 unit Assisted Living Senior Centre. We operate a 24/7 home for brain injured men. We operate a Nursery, Day Care, Nature Preschool, School Age Care and a Summer Recreation Camp in our Child Care Centre. We provide support & services to young parents in the community. We run a transition house for women & children leaving abusive situations. We operate a two bed Corrections contract. We provide low-cost rental units for older women, adults with children and refugees. 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 child with a disability so they can have a break.

New programs

The Cridge Centre for the Family

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
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? **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:

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

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

(a) Enter the gross revenue collected by the fundraisers on behalf of the charity. **5450** \$ _____

(b) Enter the amounts paid to and/or retained by the fundraisers. **5460** \$ _____

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

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

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

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

C9 Did the charity incur any expenses for compensation of employees during the fiscal period? **3400** Yes No
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.

The Cridge Centre for the Family

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

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	63									
	(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.											
	<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">305 <input type="checkbox"/> \$1 – \$39,999</td> <td style="width: 33%;">310 <input type="checkbox"/> \$40,000 – \$79,999</td> <td style="width: 33%;">315 <input type="checkbox"/> \$80,000 – \$119,999</td> </tr> <tr> <td>320 <input type="checkbox"/> \$120,000 – \$159,999</td> <td>325 <input type="checkbox"/> \$160,000 – \$199,999</td> <td>330 <input type="checkbox"/> \$200,000 – \$249,999</td> </tr> <tr> <td>335 <input type="checkbox"/> \$250,000 – \$299,999</td> <td>340 <input type="checkbox"/> \$300,000 – \$349,999</td> <td>345 <input type="checkbox"/> \$350,000 and over</td> </tr> </table>	305 <input type="checkbox"/> \$1 – \$39,999	310 <input type="checkbox"/> \$40,000 – \$79,999	315 <input type="checkbox"/> \$80,000 – \$119,999	320 <input type="checkbox"/> \$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		
305 <input type="checkbox"/> \$1 – \$39,999	310 <input type="checkbox"/> \$40,000 – \$79,999	315 <input type="checkbox"/> \$80,000 – \$119,999										
320 <input type="checkbox"/> \$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	43									
	(b) Total expenditure on compensation for part-time or part-year employees in the fiscal period.	380	\$ 1,657,938									
3	Total expenditure on all compensation in the fiscal period.	390	\$ 6,273,078									

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

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

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

Statement of financial position

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

Assets:

Cash, bank accounts, and short-term investments	4100	\$	1,269,602
Amounts receivable from non-arm's length persons	4110	\$	
Amounts receivable from all others	4120	\$	221,236
Investments in non-arm's length persons	4130	\$	
Long-term investments	4140	\$	4,072,469
Inventories	4150	\$	1,289
Land and buildings in Canada	4155	\$	21,253,992
Other capital assets in Canada	4160	\$	2,025,824
Capital assets outside Canada	4165	\$	
Accumulated amortization of capital assets	4166	\$	- 10,695,961
Other assets	4170	\$	3,932,335
10 year gifts	4180	\$	465,705
Total assets (add lines 4100 to 4170)	4200	\$	22,080,786

Liabilities:

Accounts payable and accrued liabilities	4300	\$	3,107,056
Deferred revenue	4310	\$	2,445,065
Amounts owing to non-arm's length persons	4320	\$	
Other liabilities	4330	\$	7,931,969
Total liabilities (add lines 4300 to 4330)	4350	\$	13,484,090
Amount included in lines 4150, 4155, 4160, 4165 and 4170 not used in charitable activities	4250	\$	

Statement of operations

Revenue:

Total eligible amount of all gifts for which the charity has issued or will issue tax receipts	4500	\$	640,063
Total eligible amount of tax-receipted tuition fees	5610	\$	
Total amount of 10 year gifts received	4505	\$	21,600
Total amount received from other registered charities	4510	\$	189,581
Total other gifts received for which a tax receipt was not issued by the charity (excluding amounts at lines 4575 and 4630)	4530	\$	37,276
Total revenue received from federal government	4540	\$	149,929
Total revenue received from provincial/territorial governments	4550	\$	5,266,186
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	\$	32,000
Total interest and investment income received or earned	4580	\$	602,068
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	\$	2,323,001
Total non tax-receipted revenues received for memberships, dues and association fees	4620	\$	2,025
Total non tax-receipted revenue from fundraising	4630	\$	4,313
Total revenue from sale of goods and services (except to any level of government in Canada)	4640	\$	1,348,033
Other revenue not already included in the amounts above	4650	\$	609,740
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	\$	11,204,215

The Cridge Centre for the Family

Expenditures:

Advertising and promotion	4800	\$	36,638
Travel and vehicle expenses	4810	\$	73,995
Interest and bank charges	4820	\$	260,965
Licences, memberships, and dues	4830	\$	18,248
Office supplies and expenses	4840	\$	185,747
Occupancy costs	4850	\$	1,194,452
Professional and consulting fees	4860	\$	166,496
Education and training for staff and volunteers	4870	\$	18,524
Total expenditure on all compensation (enter the amount reported at line 390 in Schedule 3, if applicable)	4880	\$	6,273,078
Fair market value of all donated goods used in charitable activities	4890	\$	
Purchased supplies and assets	4891	\$	1,899,692
Amortization of capitalized assets	4900	\$	730,677
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	\$	5,600
Specify type(s) of expenditures included in the amount reported at 4920	4930	Insurance Premiums	
Total expenditures before gifts to qualified donees (add lines 4800 to 4920)	4950	\$	10,864,112

Of the amounts at lines 4950:

(a) Total expenditures on charitable activities	5000	\$	9,612,712
(b) Total expenditures on management and administration	5010	\$	1,172,986
(c) Total expenditures on fundraising	5020	\$	72,814
(d) Total other expenditures included in line 4950	5040	\$	5,600
Total amount of gifts made to all qualified donees	5050	\$	1,735
Total expenditures (add lines 4950 and 5050)	5100	\$	10,865,847

Other financial information

Permission to accumulate property:

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

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

Permission to reduce disbursement quota:

If the charity has received approval to make a reduction to its disbursement quota, enter the amount for the fiscal period

5750	\$	_____
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Property not used in charitable activities:

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

• The 24 months before the beginning of the fiscal period	5900	\$	6,480,551
• The 24 months before the end of the fiscal period	5910	\$	7,344,393

The Cridge Centre for the Family

Directors/Trustees and Like Officials Worksheet

You must give us complete information for each director/trustee and like official who, at any time during the fiscal period of this return, was a member of the charity's board of directors/trustees. Directors/trustees and like officials are persons who govern a registered charity. See the reverse for information on filling out this form.

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

11

The Cridge Centre for the Family

Business number:

108079419 R R 0001

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

2 | 0 | 2 | 2 | 0 | 3 | 1

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, select "Operating a registered charity," then "Making a change to your organization" and see "Change director."

Public information

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

The Cridge Centre for the Family

Last name: Price		First name: Janis					Initial: M.	
Term ▶ Start date (Y/M/D):	2	0	1	6	0	9	End date (Y/M/D):	
Position: Treasurer	At arm's length with other Directors?					<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>
Last name: Spray		First name: Mary-Jane					Initial:	
Term ▶ Start date (Y/M/D):	2	0	1	9	0	3	End date (Y/M/D):	
Position: Secretary	At arm's length with other Directors?					<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>
Last name: Wellman		First name: Ann					Initial: E	
Term ▶ Start date (Y/M/D):	2	0	1	8	0	9	End date (Y/M/D):	
Position: President	At arm's length with other Directors?					<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>

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, 2 letters, 4 digits. Example: 123456789RR0001) 108079419RR0001
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Return for fiscal period ending:

Year	Month	Day
2 0 2 2	0 3	3 1

Total number of qualified donees/other organizations: 3

Name of organization: Burnside Gorge Community Association			Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
BN/Registration number: 135261972 RR 0001		City and Prov/Terr: Victoria BC		Country: Canada
Amount of non-cash gifts \$		Total amount of gifts \$ 1,255.00		
Name of organization: Canada Helps CanaDon			Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
BN/Registration number: 896568417 RR 0001		City and Prov/Terr: Toronto ON		Country: Canada
Amount of non-cash gifts \$		Total amount of gifts \$ 50.00		
Name of organization: Hands at Work in Africa (Canada) Society			Associated charity: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
BN/Registration number: 848314225 RR 0001		City and Prov/Terr: Calgary AB		Country: Canada
Amount of non-cash gifts \$		Total amount of gifts \$ 430.00		
Name of organization:			Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number: RR		City and Prov/Terr:		Country:
Amount of non-cash gifts \$		Total amount of gifts \$		
Name of organization:			Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number: RR		City and Prov/Terr:		Country:
Amount of non-cash gifts \$		Total amount of gifts \$		
Name of organization:			Associated charity: <input type="checkbox"/> Yes <input type="checkbox"/> No	
BN/Registration number: RR		City and Prov/Terr:		Country:
Amount of non-cash gifts \$		Total amount of gifts \$		