



THE DIOCESE OF BRANDON

Instructions for Completing the Annual Return Forms

Completed forms are to be returned to the Synod Office:

The Diocese of Brandon
403 13th Street
Brandon MB R7A 4P9

For assistance in completing the forms, please contact the Synod Office at 204-727-2380, or e-mail Greig Scott at finance@brandon.anglican.ca. Additional copies are available to download on our diocesan website: <http://www.dioceseofbrandon.org>.

The Annual Return form must be completed and returned to the Synod Office by **February 28, 2023**. Your assistance and cooperation in meeting this deadline is appreciated.

1. **Election/Appointment of Officers:**

This part of the Annual Return asks for the name and contact information of the Wardens, Secretary, Treasurer, Lay Readers, Eucharistic Administrants, and other contacts appointed at your Annual Meeting.

2. **Statistical Information:**

This section is for your congregation's statistics. The "Total Confirmed Persons" is used to determine the number of Synod delegates to which your parish is entitled. Please ensure that this number is completed as accurately as possible.

3. **SYNOD DELEGATES (Tri-annually)** The final page is for recording your parish lay delegates and alternates in a Synod year. Synod 2023 will be October, 2023.

4. **Financial Information:**

Page 1

A. Congregation Income [Do not include the principal of matured GIC's or other investments as income.]

1. For FAIR SHARE:

- a) Envelope including special service collections e.g. Easter, Christmas, etc.
- b) Undesignated donations for which a receipt is issued. Any specified donation for regular operations (e.g. heat bill, stipend) AND donations "In Memory Of" are subject to Fair Share and entered here. Only capital repair or fixture donations are exempt and entered on #4.
- c) Open (cash) offerings and general donation.
- d) Donations from parish associations: ACW, Men's Assn, etc. In Kind or In Cash must be included.
- e) Undesignated Fundraising (net) for general operating expenses is subject to fair share. Rental income for church properties is subject.
- f) Rentals of buildings to other users PLUS investment income from funds NOT in the DCTF.

2 & 3. Lines 2&3 are self-explanatory. Note that Net income from the DCTF is included here.

4. Designated Donations for capital projects (e.g., new roof, pews, heating system). This will not include donations for normal operations expenses such as furnace or plumbing repairs,

... broken windows, and miscellaneous maintenance items, etc. Money left in a will and fundraising for designated projects (furnace, accessibility, etc.) are included here.

- **Non- Capital related designated donations MAY be allowed by the diocese with pre-approval. For example: local relief efforts.**

- **Funds withdrawn from designated accounts ARE NOT TO BE REPORTED AS INCOME.**

5 & 6. Special Appeals include such items as PWRDF, Mustard Seed, Camp Fund. This should equal the line 12 expenditure: you have forwarded the same amount to the recipient. **Do Not** include special Easter and Christmas, Harvest Festival, etc.; they are to be reported as envelope or open income on section A, line 1.a).

PAGE 2

B. Expenditures

Clergy Expense, Lines 7-9

7. SINGLE POINT PARISH: Clergy salary, benefits/travel, housing and utility costs go on line 7.

- If you pay actual mileage directly to incumbent, report it on line 24.

8. MULTI POINT PARISH: Your share of stipend & benefits you contribute to your parish council.

9. Rectory repair, expenses & other misc. enter in #9.

General Operating

10. Loan Repayment – Include principal and interest in this figure.

21. Capital Repairs – Examples: re-shingling roof, building additions, new heating systems, structural repairs, insulation, new organ, renovations, etc.

23. “Vestry...” expenses would be any costs incurred by the meeting of vestry, supplies for meetings, or other administrative costs that are beyond the scope of charitable activities, and would be considered not entirely necessary by the CRA. Items related to worship services, (organist, honoraria, etc.) are not included here. This is important as it constitutes T3010 line 5010 “management and admin.” It does not include salary costs because they are considered part of the charitable activity costs (line 5000) assuring your disbursement quota is met.

SURPLUS/DEFICIT: The difference between totals A and B will be the surplus or deficit for the year. If it is a deficit, then place a bracket () around the resulting balance.

Page 3: A simplified T3010 CRA return. Consider using the fillable PDF form which has been set up to calculate all fields automatically for you, which you can simply transfer over to your T3010. If you choose manual entry, simply add up the “LINE NUMBERS” and enter them on the T3010.

Page 4: Information about the buildings that the Parish operates. Please complete this information as accurately as possible. It is especially important to have the replacement value and the insured value completed.

Please do not forget to indicate the amount of General Liability Insurance Coverage that the congregation has through a general insurance policy. For congregations participating in the Diocesan Insurance plan, the liability coverage is \$5,000,000.

Greig Scott CFP
Executive Financial Officer
The Diocese of Brandon.

Diocese of Brandon

Notice of Election/Appointment of Officers for 2023

Congregation/Parish: _____



Hover or click the ? for info.

City/Town: _____

Incumbent: _____

Please complete and return this form to the Synod Office by February 28, 2023

Incumbent's Warden:

Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home): _____

Fax (if available): _____ E-Mail: _____

People's Warden:

Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home): _____

Fax (if available): _____ E-Mail: _____

Treasurer:

Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home) _____

Fax (if available): _____ E-Mail: _____

Secretary:

Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home): _____

Fax (if available): _____ E-Mail: _____

Parish Council Chairperson (if applicable):

Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home): _____

Fax (if available): _____ E-Mail: _____

Parish Council Treasurer (if applicable):

Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home): _____

Fax (if available): _____ E-Mail: _____

SUNDAY SCHOOL SUPERINTENDENT:

Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

CAMP REPRESENTATIVE:

Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

PWRDF CONTACT :

Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

PARTNERS IN MISSION CONTACT:

Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

ACW PRESIDENT:

Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

MUSTARD SEED REP:

Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

ANGLICAN FELLOWSHIP OF PRAYER PARISH REP:

Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

STEWARDSHIP OFFICER:

Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____

LAY READERS:

1. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____
2. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____
3. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____
4. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____
5. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

EUCCHARISTIC ADMINISTRANTS:

1. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____
2. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____
3. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____
4. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

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**Diocese of Brandon
Annual Return – 2022 – Statistical Information**

Congregation/Parish: _____

City/Town: _____

Incumbent: _____

A. CONGREGATION STATISTICS

1. Total Members on Parish Roll (adults & children) _____

2. Total **ACTIVE** Members on Parish Roll (those who attend services or contribute,
or are identified with ACW, Sunday School, etc.) _____

3. Total Identifiable Givers
(as identified by the number of Charitable Donation Receipts issued during 2022) _____

Regular Givers: _____ One-Time Givers: _____

4. Confirmed persons on Parish Rolls _____

5. Average weekly attendance at Sunday Services _____

6. Total yearly Sunday attendance _____

7. Total Attendance for the year, including all Services of every kind _____

8. Average number of weekly communicants _____

9. Attendance for: Christmas Eve + Christmas Day (total) _____

Easter Day, including the Easter Vigil _____

Pentecost _____

2nd Sunday in September _____

Please complete and return this form to the Synod Office by February 28, 2023

B. PARISH RECORDS

- 1. Baptisms (Children _____ / Adults _____) _____
- 2. Confirmations (Children _____ / Adults _____) _____
- 3. Received from other Communion _____
- 4. Marriages _____
- 5. Funerals _____

C. ORGANIZATIONS AND GROUPS (Please record number of participants, not number of groups)

- 1. Anglican Church Women _____
- 2. Other Women's Groups _____
- 3. Men's Groups _____
- 4. Other Adult Groups _____
- 5. Youth Groups _____
- 6. Church Sponsored* Youth Groups (Cubs, Scouts, etc.) _____
- 7. Church Sponsored* Adult Groups. Enter number of groups not people. (A.A., etc.) _____

*Note: "Church-Sponsored" means the group does NOT pay for the use of the church hall or meeting room.

D. CHURCH SCHOOLS

- 1. Number of Schools _____
- 2. Number of Teachers _____
- 3. Number of Pupils _____
- 4. Average Sunday Attendance _____

**Diocese of Brandon
Notice of Election of Lay Delegates for 2023**

Congregation/Parish: _____

City/Town: _____

Incumbent: _____

Please complete and return this form to the Synod Office by February 28, 2023

I hereby certify that at the duly convened Annual/Special meeting of the Communicants of this Parish held on _____, 2023 the following persons, duly qualified, were elected Lay Delegates and Alternates, as noted, to the Synod of the Diocese of Brandon.

All synod delegate and alternate positions must be filled by persons who are at least 18 years of age, confirmed, and regular communicants in the Parish.

(Signed) _____ **Presiding Officer at Election**

DELEGATES:

1. Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home): _____

Fax (if available): _____ E-Mail: _____

2. Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home): _____

Fax (if available): _____ E-Mail: _____

3. Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home): _____

Fax (if available): _____ E-Mail: _____

4. Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home): _____

Fax (if available): _____ E-Mail: _____

Please see over for Alternates.

ALTERNATES:

- 1. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____
- 2. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____
- 3. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____
- 4. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

Note that the number of Lay Delegates permitted is governed by the “Confirmed Persons (aged 18 and over) on the Congregation Roll” as recorded on the Statistical Information form and according to the following table:

Confirmed Persons	Lay Delegates
6 to 50	1
51 to 101	2
102 to 201	3
202 to 301	4

Diocese of Brandon Annual Return SUMMARY – 2022 – Financial Information & T3010



FILLABLE FORM - Automatic Calculation 

Congregation/Parish: _____
 City/Town: _____
 Incumbent: _____



Please complete and return this form to the Synod Office by February 28, 2023
 This version automatically totals the T3010 return for you. You can save the filled form.

A. CONGREGATION INCOME (Note: Do *not* include matured investments or money transferred in.)

1. For FAIR SHARE:

- | | | | |
|---|------|--|---|
| a) Envelope Offering: including special services | 4500 | | |
| b) Undesignated Received: In Memory, operation exp. | 4500 | |  click the ? for info. |
| c) Open Offering (not received) | 4530 | | |
| d) Donations From Org's: Cash or "In Kind" (ACW, etc.) | 4650 | | |
| e) Undesignated Fundraising & Misc. Income | 4630 | | |
| f) Rental Income & Non-DCTF Investment income | 4650 | |  |
| g) Government Grants | 4570 | | |

SUBTOTAL GROSS INCOME SUBJECT TO FAIR SHARE: _____

- | | | | |
|---|------|--|---|
| 2. DCTF NET INCOME, GST Rebates. (cash rec'd only) | 4650 | |  |
| 3. Grants/Subsidies: Diocesan, Ang. Fndn. (rec'd from other charities) | 4510 | |  |
| 4. Grants From Government: designated use. | 4570 | | |
| 5. Received: Bequests, Capital Project Donations & Fundraising | 4500 | | |
| 6. FLOW THROUGH Received (PWRDF, special appeal, etc.) | 4500 | | |
| 7. Other - No Receipt Issued: <i>Special Appeals, Flow Through & Other</i> | 4530 | | |

(A) TOTAL INCOME: 4700 _____

The numbers beside the line items indicate where the amount is to be reported on the CRA T3010 CHARITY RETURN. Add the amounts with the same numbers and report them on the lines of the T3010. Multiple numbers beside a line item indicate all places where that amount is included.

Note that this "simplified" version of the T3010 applies only if your congregation's income is less than \$100,000. If yours exceeds \$100 K, you will be required to fill out SECTION D of the T3010.



B. EXPENDITURES

Clergy Expense (visiting clergy are not employees, enter on #22):

- 7. Salaries and benefits + travel if included on payroll _____
- 8. Multi-Point parish contribution to Parish Council _____
- 9. Housing & Utilities _____

SUBTOTAL Clergy Expenses: 4920, 5000 & 390 _____

General Operating:

- 10. Loan Repayment (including interest) 4920 _____
- 11. Fair Share 5050 _____
- 12. Special Appeal Gifts to other charities (PWRDF, Samaritan House, etc.) 5050 _____
- 13. Gifts to clergy / clergy honorariums 4920 _____
- 14. Fire and liability insurance 4920 _____
- 15. Property taxes 4920 _____
- 16. Utilities 4920 _____
- 17. Supplies 4920 _____
- 18. Caretaker, Grounds 4920 _____
- 19. Miscellaneous 4920 _____
- 20. Small Repairs (general maintenance) 4920 _____
- 21. Capital Repairs (major construction to building) 4920 _____
- 22. Organist honorariums, honorariums to visiting clergy 4920 _____
- 23. Vestry or council expenses: secretarial, admin., council travel, etc. 4920 & 5010 _____ 
- 24. Professional expenses (accountant, audit, lawyer) 4860 & 5010 _____
- 25. Travel ****ONLY if ACTUAL mileage paid directly to Incumbent** 4810 _____ 
- 26. Other (specify) _____ 4920 _____
- 27. Other (specify) _____ 4920 _____

(B) TOTAL EXPENSES: 5100 _____


SURPLUS/DEFICIT (A MINUS B): _____

INTERNAL USE ONLY

Calculation of NET Income Subject to Fair Share.

- 1. Gross Income Subject to Fair Share: _____
- 2. Allowable Deductions from Gross FS Income (items 7 & 8): _____
- 3. Allowable Capital Cost Deductible from Gross FS Income (per regulations): _____

Net Income Subject to Fair Share: _____

T3010 	
Section D: Income is under \$100,000. If over, complete Schedule 6	
Income	
4500: Receipted Income	
4510: Received from Other Charities	
4530: Non-receipted Income	
4630: Undesignated Fundraising	
4650: Other revenue	
4570: Revenue from Government (Grants. NO GST REBATES)	
Expense	
4860: Professional / Consulting Fees	
4810: Travel & Vehicle *	
4920: Expenses not included in above (NO Gifts to donee's)	
4950: Total expenses (NO Gifts to donee's)	
5000: Amount on Charitable Activities	
5010: Management and Admin Expenses	
5050: Gifts to Qualified Donee's (Fairshare, PWRDF, etc.)	
Schedule 3: Compensation (Zero if only have visiting clergy honorariums)	
390: Total compensation	

4650: GST rebate is included here. Do not put GST on line 4570 "Revenue from gov't."

4860 is included in 5010.

4810 is included in 5000.

4920: These amounts are also included in 5000.

***4810: ONLY IF NOT INCLUDED ON T4. Use this ONLY if you pay actual mileage to Incumbent directly.**

5000: Your incumbent's salary and benefits are included on this line, not line 5010. 5010 is costs of meetings, secretary salaries, auditor fees and other administrative expense.

5050: Fairshare, PWRDF, etc. is not included on 4950. You must fill in form T1236. The Diocese' B/N is 108061391 RR0001. PWRDF is 866434640 RR0001

SCHEDULE 3: Visiting clergy are NOT employees; do not include these costs on Sched. 3. We have verified this with the CRA.

C-1. Financial Assets: Please list all bank balances and Financial Assets as of Dec. 31st
 Include accounts receivable and amounts invested in the Diocesan Investments.

Chequing Accounts	4100	_____
Savings Accounts	4100	_____
Invested: Capital Available	4100	_____
Invested: Capital Restricted	4100	_____
GST Rebate Receivable	4120	_____
Other Accounts Receivable	4100	_____
Other Assets	4100	_____
	TOTAL:	_____

C-2. Liabilities: Please list all loans (including loans from the Diocese) and other liabilities
 (e.g. accounts payable) and indicate purpose (capital or operating) with balance owing
 as of December 31st:

_____	(Capital/Operating)	_____
_____	(Capital/Operating)	_____
_____	(Capital/Operating)	_____
_____	(Capital/Operating)	_____
	TOTAL: (Line 4350)	_____

D. BUILDING INSURANCE	4155 Estimated Replacement Value	Insured Value	Outstanding Indebtedness
1. Building #1 (e.g. church)			
2. Building #2 (e.g. hall)			
3. Building #3 (e.g. rectory)			
4. Furniture & Fixtures (contents)			

GENERAL LIABILITY COVERAGE IS WITH:

(AON Diocesan Policy or Parish Policy)

PROPERTY (FIRE) INSURANCE COVERAGE IS WITH:

LAST CHARITY RETURN WAS FILED BY:

For Fiscal Year Ended:

Parish Charity Number is:

Diocese of Brandon
Annual Return SUMMARY – 2022 – Financial Information & T3010
MANUAL FORM

Congregation/Parish: _____
 City/Town: _____
 Incumbent: _____

Please complete and return this form to the Synod Office by February 28, 2023

A. CONGREGATION INCOME (Note: Do *not* include matured investments or money transferred in.)

1. For FAIR SHARE:

- | | | |
|---|------|-------|
| a) Envelope Offering: including special services | 4500 | _____ |
| b) Undesignated Received: In Memory, operation exp. | 4500 | _____ |
| c) Open Offering (not received) | 4530 | _____ |
| d) Donations From Org's: Cash or "In Kind" (ACW, etc.) | 4650 | _____ |
| e) Undesignated Fundraising & Misc. Income | 4630 | _____ |
| f) Rental Income & Non-DCTF Investment income | 4650 | _____ |
| g) Government Grant | 4570 | _____ |

SUBTOTAL GROSS INCOME SUBJECT TO FAIR SHARE: _____

- | | | |
|---|------|-------|
| 2. DCTF NET INCOME, GST Rebates. (cash rec'd only) | 4650 | _____ |
| 3. Grants/Subsidies: Diocesan, Ang. Fndn. (rec'd from other charities) | 4510 | _____ |
| 4. Grants From Government: designated use. | 4570 | _____ |
| 5. Received: Bequests, Capital Project Donations & Fundraising | 4500 | _____ |
| 6. FLOW THROUGH Received (PWRDF, special appeal, etc.) | 4500 | _____ |
| 7. Other - No Receipt Issued: <i>Special Appeals, Flow Through & Other</i> | 4530 | _____ |

(A) TOTAL INCOME: 4700 _____

The numbers beside the line items indicate where the amount is to be reported on the CRA T3010 CHARITY RETURN. Add the amounts with the same numbers and report them on the lines of the T3010. Multiple numbers beside a line item indicate all places where that amount is included.

Note that this "simplified" version of the T3010 applies only if your congregation's income is less than \$100,000. If yours exceeds \$100 K, you will be required to fill out SECTION D of the T3010.

B. EXPENDITURES

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- 7. Salaries and benefits + travel if included on payroll _____
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- 9. Housing & Utilities _____

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General Operating:

- 10. Loan Repayment (including interest) 4920 _____
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- 13. Gifts to clergy / clergy honorariums 4920 _____
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- 21. Capital Repairs (major construction to building) 4920 _____
- 22. Organist honorariums, honorariums to visiting clergy 4920 _____
- 23. Vestry or council expenses: secretarial, admin., council travel, etc. 4920 & 5010 _____
- 24. Professional expenses (accountant, audit, lawyer) 4860 & 5010 _____
- 25. Travel ****ONLY if ACTUAL mileage paid directly to Incumbent** 4810 _____
- 26. Other (specify) _____ 4920 _____
- 27. Other (specify) _____ 4920 _____

(B) TOTAL EXPENSES: 5100 _____

SURPLUS/DEFICIT (A MINUS B): _____

INTERNAL USE ONLY

Calculation of NET Income Subject to Fair Share.

- 1. Gross Income Subject to Fair Share: _____
- 2. Allowable Deductions from Gross FS Income (items 7 & 8): _____
- 3. Allowable Capital Cost Deductible from Gross FS Income (per regulations): _____

Net Income Subject to Fair Share: _____

T3010	
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Expense	
4860: Professional / Consulting Fees	
4810: Travel & Vehicle *	
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4950: Total expenses	
5000: Amount on Charitable Activities	
5010: Management and Admin Expenses	
5050: Gifts to Qualified Donee's (Fairshare, PWRDF, etc.)	
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Savings Accounts	4100	_____
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Invested: Capital Restricted	4100	_____
GST Rebate Receivable	4120	_____
Other Accounts Receivable	4100	_____
Other Assets	4100	_____
	TOTAL:	_____

C-2. Liabilities: Please list all loans (including loans from the Diocese) and other liabilities
 (e.g. accounts payable) and indicate purpose (capital or operating) with balance owing
 as of December 31st:

_____	(Capital/Operating)	_____
_____	(Capital/Operating)	_____
_____	(Capital/Operating)	_____
_____	(Capital/Operating)	_____
	TOTAL: (Line 4350)	_____

D. BUILDING INSURANCE	4155 Estimated Replacement Value	Insured Value	Outstanding Indebtedness
1. Building #1 (e.g. church)			
2. Building #2 (e.g. hall)			
3. Building #3 (e.g. rectory)			
4. Furniture & Fixtures (contents)			

GENERAL LIABILITY COVERAGE IS WITH:
(AON Diocesan Policy or Parish Policy)

PROPERTY (FIRE) INSURANCE COVERAGE IS WITH:

LAST CHARITY RETURN WAS FILED BY:

For Fiscal Year Ended:

Parish Charity Number is:
