



ANNUAL RETURN FORM

Name of Person Completing Return Form: [Redacted]

Position of Person Completing Return Form: [Redacted]

Name of the Entity being reported on: Cayman Prep & High School

I. COMPLETE THE PRO-FORMA BALANCE SHEET below (Assets and Liabilities):

| ASSETS | \$ |
|-----------------------------|------------|
| Cash In Hand | [Redacted] |
| Cash at Bank | [Redacted] |
| Investments (Short term) | [Redacted] |
| Other Current Assets | [Redacted] |
| Total Current Assets | [Redacted] |
| Property | [Redacted] |
| Investments (Long Term) | [Redacted] |
| Other Fixed Assets | [Redacted] |
| Total Fixed Assets | [Redacted] |
| Total Assets | [Redacted] |
| LIABILITIES | [Redacted] |
| Current Loans | [Redacted] |
| Other Loans/Debts | [Redacted] |
| Other Liabilities | [Redacted] |
| Total Current Liabilities | [Redacted] |
| Mortgage | [Redacted] |
| Other Long Term Liabilities | [Redacted] |
| Total Long Term Liabilities | [Redacted] |
| Total Liabilities | [Redacted] |
| EQUITY | [Redacted] |
| Net Income | [Redacted] |



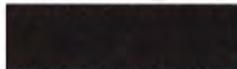
2. COMPLETE THE PRO-FORMA INCOME STATEMENT below (*Income and Expenses*):

| INCOME | \$ |
|--|----|
| Income received from the provision of goods and services | |
| Rental Income | |
| Interest on Income derived from investments | |
| Receipt of donations and money | |
| Award of grants | |
| Other income | |
| Gross Income | |
| EXPENSES | |
| Operating expenses | |
| Funds donated/contributed in accordance with NPO purpose | |
| Government Fees | |
| Other funds donated/contributed | |
| Other expenses | |
| Total Expenses | |
| Net Income (= GROSS INCOME – EXPENSES) | |

3. ANNUAL REVIEW THRESHOLD:

(If the figure you have reported for Gross Income above equals to or exceeds CI\$250,000 please complete this section.)

- A. Has the NPO sent 30% or more of your Gross Income overseas (circle appropriate answer)?



(If you have answered YES to question A above please complete questions B below).

- B. Please indicate on the line below the total amount of funds sent overseas by the NPO during the last financial year?



- C. What percentage of gross income does the amount indicated in question B above represent? (i.e. Amount reported in question B divided by Gross Income multiplied by 100)



D. Please indicate, on the line below, the name of the licensed accountant or duly qualified accountant the NPO has engaged to conduct the review of the financial statements.

[Redacted]

4. TEN LARGEST SOURCES OF CONTRIBUTIONS RECEIVED

| List the Ten Largest sources of sums Received: | | Amount |
|--|------------|------------|
| 1. | [Redacted] | [Redacted] |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| 10. | | |

Note: List the 10 largest sources of contributions received (i.e. Donations, grants, fund raising activities, etc) for the preceding year. (Note: Not necessary to list individual donors by name.)

5. TEN LARGEST APPLICATIONS OF CONTRIBUTIONS EXPENDED

| List the Ten Largest Applications of Contributions Expended: | | Amount |
|--|------------|------------|
| 1. | [Redacted] | [Redacted] |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| 10. | | |

Note: List the 10 largest sources of how contributions were applied/expended for the preceding year. (Note: Not necessary to list individuals who received contribution by name.)





**Non-Profit Organisation
ANNUAL RETURN FORM**

Name of the Entity being reported on: CAYMAN PREP & HIGH SCHOOL

Name of Person Completing Return Form: [REDACTED]

Position of Person Completing Return Form: [REDACTED]

Address/ Registered Office of the NPO 559 WALKERS ROAD, GRAND CAYMAN, CAYMAN ISLANDS

Email Address and Telephone numbers for the NPO: hsoffice@cayprep.edu.ky/ (345) 949 9115

Email Address and Telephone number for the Person Completing The Form: [REDACTED]

NPO Financial Year- Beginning: Sept 1st 2018 End: Aug 31st 2019

I. COMPLETE THE PRO-FORMA BALANCE SHEET below (Assets and Liabilities):

| ASSETS | \$ |
|----------------------------------|----|
| Cash in Hand | |
| Cash at Bank | |
| Investments (Short term) | |
| Other Current Assets | |
| Total Current Assets | |
| Property | |
| Investments (Long Term) | |
| Other Fixed Assets | |
| Total Fixed Assets | |
| Total Assets | |
| LIABILITIES | |
| Current Loans | |
| Other Loans/Debts | |
| Other Liabilities | |
| Total Current Liabilities | |



| | |
|------------------------------------|--|
| Mortgage | |
| Other Long Term Liabilities | |
| Total Long Term Liabilities | |
| Total Liabilities | |
| EQUITY | |
| Net Income | |
| Accumulated Surplus | |

2. COMPLETE THE PRO-FORMA INCOME STATEMENT below (Income and Expenses):

| INCOME | \$ |
|--|-----------|
| Income received from the provision of goods and services | |
| Rental Income | |
| Interest on income derived from investments | |
| Receipt of donations and money | |
| Award of grants | |
| Other income | |
| Gross Income | |
| EXPENSES | |
| Operating expenses | |
| Funds donated/contributed in accordance with NPO purpose | |
| Government Fees | |
| Other funds donated/contributed | |
| Other expenses | |
| Total Expenses | |
| Net Income (= GROSS INCOME – EXPENSES) | |

3. ANNUAL REVIEW THRESHOLD:

(If the figure you have reported for Gross Income above equals to or exceeds CI\$250,000 please complete this section.)

A. Has the NPO sent 30% or more of your Gross Income overseas (circle appropriate answer)?



(If you have answered YES to question A above please complete questions B below).

B. Please indicate on the line below the total amount of funds sent overseas by the NPO during the last financial year?

[REDACTED]

C. What percentage of gross income does the amount indicated in question B above represent? (i.e. Amount reported in question B divided by Gross Income multiplied by 100)

[REDACTED]

D. Please indicate, on the line below, the name of the licensed accountant or duly qualified accountant the NPO has engaged to conduct the review of the financial statements.

[REDACTED]

4. TEN LARGEST SOURCES OF CONTRIBUTIONS RECEIVED

| List the Ten Largest sources of sums Received: | | Amount |
|--|--|--------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| 10. | | |

Note: List the 10 largest sources of contributions received (i.e. Donations, crowd funding, grants, fund raising activities, etc.) for the preceding year. (Note: Not necessary to list individual donors by name.)

5. TEN LARGEST APPLICATIONS OF CONTRIBUTIONS EXPENDED

| List the Ten Largest Applications of Contributions Expended: | | Amount |
|--|--|--------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |



CONTROLLER DECLARATION

I, [REDACTED], controller of, Cayman Prep & High School,
(Your name) *(NPO name)*

1. Certify that the information provided is true to the best of my knowledge, and that there are has been no change of the material particulars of the NPO that have not been notified to the Registrar.
2. That no major occurrences have taken place that can negative impact on the reputation of the NPO and or the NPO Sector
3. That any and all matter that can be categorized as major has been reported to the Registrar of NPOs (if applicable).

[REDACTED]

Signature

10th Jan 2020

Date





Non-Profit Organisation
ANNUAL RETURN FORM

Name of the Entity being reported on: CAYMAN PREP & HIGH SCHOOL

Name of Person Completing Return Form: [REDACTED]

Position of Person Completing Return Form: [REDACTED]

Address/ Registered Office of the NPO 559 WALKERS ROAD, GRAND CAYMAN, CAYMAN ISLANDS

Email Address and Telephone numbers for the NPO: hsoffice@cayprep.edu.ky (345) 949 9115

Email Address and Telephone number for the Person Completing The Form: [REDACTED]

NPO Financial Year- Beginning: Sept 1st 2019 End: Aug 31st 2020

I. COMPLETE THE PRO-FORMA BALANCE SHEET below (Assets and Liabilities):

| ASSETS | \$ |
|----------------------------------|----|
| Cash in Hand | |
| Cash at Bank | |
| Investments (Short term) | |
| Other Current Assets | |
| Total Current Assets | |
| Property | |
| Investments (Long Term) | |
| Other Fixed Assets | |
| Total Fixed Assets | |
| Total Assets | |
| LIABILITIES | |
| Current Loans | |
| Other Loans/Debts | |
| Other Liabilities | |
| Total Current Liabilities | |



| | |
|-----------------------------|--|
| Mortgage | |
| Other Long Term Liabilities | |
| Total Long Term Liabilities | |
| Total Liabilities | |
| EQUITY | |
| Net Income | |
| Accumulated Surplus | |

2. COMPLETE THE PRO-FORMA INCOME STATEMENT below (Income and Expenses):

| INCOME | \$ |
|--|----|
| Income received from the provision of goods and services | |
| Rental Income | |
| Interest on income derived from investments | |
| Receipt of donations and money | |
| Award of grants | |
| Other income | |
| Gross Income | |
| EXPENSES | |
| Operating expenses | |
| Funds donated/contributed in accordance with NPO purpose | |
| Government Fees | |
| Other funds donated/contributed | |
| Other expenses | |
| Total Expenses | |
| Net Income (= GROSS INCOME – EXPENSES) | |

3. ANNUAL REVIEW THRESHOLD:

(If the figure you have reported for Gross Income above equals to or exceeds CI\$250,000 please complete this section.)

A. Has the NPO sent 30% or more of your Gross Income overseas (circle appropriate answer)?



(If you have answered YES to question A above please complete questions B below).

B. Please indicate on the line below the total amount of funds sent overseas by the NPO during the last financial year?

[REDACTED]

C. What percentage of gross income does the amount indicated in question B above represent? (i.e. Amount reported in question B divided by Gross Income multiplied by 100)

[REDACTED]

D. Please indicate, on the line below, the name of the licensed accountant or duly qualified accountant the NPO has engaged to conduct the review of the financial statements.

[REDACTED]

4. TEN LARGEST SOURCES OF CONTRIBUTIONS RECEIVED

| List the Ten Largest sources of sums Received: | | Amount |
|--|------------|------------|
| 1. | [REDACTED] | [REDACTED] |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| 10. | | |

Note: List the 10 largest sources of contributions received (i.e. Donations, crowd funding, grants, fund raising activities, etc.) for the preceding year. (Note: Not necessary to list individual donors by name.)

5. TEN LARGEST APPLICATIONS OF CONTRIBUTIONS EXPENDED

| List the Ten Largest Applications of Contributions Expended: | | Amount |
|--|------------|------------|
| 1. | [REDACTED] | [REDACTED] |
| 2. | | |
| 3. | | |
| 4. | | |



| | |
|-----|--|
| 5. | |
| 6. | |
| 7. | |
| 8. | |
| 9. | |
| 10. | |

Note: List the 10 largest sources of how contributions were applied/expended for the preceding year. (Note: Not necessary to list individuals who received contribution by name.)

6. TEN LARGEST SALES AND PURCHASES OF PROPERTY

| Sales | Amount | Purchases | Amount |
|-------|--------|-----------|--------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
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| | | | |
| | | | |
| | | | |

7. TOP TEN COUNTRIES THAT FUNDS WERE SENT TO BY THE NPO

| | <u>Countries money has been sent to:</u> | Amount |
|-----|--|--------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| 10. | | |





Non-Profit Organisation
ANNUAL RETURN FORM

Name of the Entity being reported on: CAYMAN PREP AND HIGH SCHOOL
 Name of Person Completing Return Form: [REDACTED]
 Position of Person Completing Return Form: [REDACTED]
 Address/ Registered Office of the NPO 559 WALKERS ROAD, GEORGE TOWN, GRAND CAYMAN
 Email Address and Telephone numbers for the NPO: DIRECTOR@CAYPREP.EDU.KY 949-9115
 Email Address and Telephone number for the Person Completing The Form: [REDACTED]
 NPO Financial Year- Beginning: SEPT 1 2020 End: AUG 31 2021

I. COMPLETE THE PRO-FORMA BALANCE SHEET below (Assets and Liabilities):

| ASSETS | \$ |
|----------------------------------|----|
| Cash In Hand | |
| Cash at Bank | |
| Investments (Short term) | |
| Other Current Assets | |
| Total Current Assets | |
| Property | |
| Investments (Long Term) | |
| Other Fixed Assets | |
| Total Fixed Assets | |
| Total Assets | |
| LIABILITIES | |
| Current Loans | |
| Other Loans/Debts | |
| Other Liabilities | |
| Total Current Liabilities | |



| | |
|-----------------------------|--|
| Mortgage | |
| Other Long Term Liabilities | |
| Total Long Term Liabilities | |
| Total Liabilities | |
| EQUITY | |
| Net Income | |
| Accumulated Surplus | |

2. COMPLETE THE PRO-FORMA INCOME STATEMENT below (Income and Expenses):

| INCOME | \$ |
|--|----|
| Income received from the provision of goods and services | |
| Rental Income | |
| Interest on Income derived from Investments | |
| Receipt of donations and money | |
| Award of grants | |
| Other Income | |
| Gross Income | |
| EXPENSES | |
| Operating expenses | |
| Funds donated/contributed in accordance with NPO purpose | |
| Government Fees | |
| Other funds donated/contributed | |
| Other expenses | |
| Total Expenses | |
| Net Income (= GROSS INCOME – EXPENSES) | |

3. ANNUAL REVIEW THRESHOLD:

(If the figure you have reported for Gross Income above equals to or exceeds C\$250,000 please complete this section.)

A. Has the NPO sent 30% or more of your Gross Income overseas (circle appropriate answer)?



| | |
|-----|--|
| 5. | |
| 6. | |
| 7. | |
| 8. | |
| 9. | |
| 10. | |

Note: List the 10 largest sources of how contributions were applied/expended for the preceding year. (Note: Not necessary to list individuals who received contribution by name.)

6. TEN LARGEST SALES AND PURCHASES OF PROPERTY

| Sales | Amount | Purchases | Amount |
|-------|--------|-----------|--------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

7. TOP TEN COUNTRIES THAT FUNDS WERE SENT TO BY THE NPO

| | Countries money has been sent to: | Amount |
|----|-----------------------------------|--------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |
| 10 | | |





Non-Profit Organisation
ANNUAL RETURN FORM

Name of the Entity being reported on: CAYMAN PREP AND HIGH SCHOOL
Name of Person Completing Return Form: [REDACTED]
Position of Person Completing Return Form: [REDACTED]
Address/ Registered Office of the NPO 559 WALKERS ROAD, GEORGE TOWN GRAND CAYMAN
Email Address and Telephone numbers for the NPO: BUSINESSMANAGER@CAYPREP.EDU.KY 949-9115
Email Address and Telephone number for the Person Completing The Form:
[REDACTED]

NPO Financial Year- Beginning: 1ST SEPTEMBER 2021 End: 31ST AUGUST 2022

I. COMPLETE THE PRO-FORMA BALANCE SHEET below (Assets and Liabilities):

| ASSETS | \$ |
|----------------------------------|----|
| Cash in Hand | |
| Cash at Bank | |
| Investments (Short term) | |
| Other Current Assets | |
| Total Current Assets | |
| Property | |
| Investments (Long Term) | |
| Other Fixed Assets | |
| Total Fixed Assets | |
| Total Assets | |
| LIABILITIES | |
| Current Loans | |
| Other Loans/Debts | |
| Other Liabilities | |
| Total Current Liabilities | |



| | |
|-----------------------------|--|
| Mortgage | |
| Other Long Term Liabilities | |
| Total Long Term Liabilities | |
| Total Liabilities | |
| EQUITY | |
| Net Income | |
| Accumulated Surplus | |

2. COMPLETE THE PRO-FORMA INCOME STATEMENT below (*Income and Expenses*):

| INCOME | \$ |
|--|----|
| Income received from the provision of goods and services | |
| Rental Income | |
| Interest on income derived from investments | |
| Receipt of donations and money | |
| Award of grants | |
| Other income | |
| Gross Income | |
| EXPENSES | |
| Operating expenses | |
| Funds donated/contributed in accordance with NPO purpose | |
| Government Fees | |
| Other funds donated/contributed | |
| Other expenses | |
| Total Expenses | |
| Net Income (= GROSS INCOME – EXPENSES) | |

3. ANNUAL REVIEW THRESHOLD:

(If the figure you have reported for Gross Income above equals to or exceeds CI\$250,000 please complete this section.)

- A. Has the NPO sent 30% or more of your Gross Income overseas (circle appropriate answer)?



(If you have answered YES to question A above please complete questions B below).

B. Please indicate on the line below the total amount of funds sent overseas by the NPO during the last financial year?

[Redacted]

C. What percentage of gross income does the amount indicated in question B above represent? (i.e. Amount reported in question B divided by Gross Income multiplied by 100)

[Redacted]

D. Please indicate, on the line below, the name of the licensed accountant or duly qualified accountant the NPO has engaged to conduct the review of the financial statements.

[Redacted]

4. TEN LARGEST SOURCES OF CONTRIBUTIONS RECEIVED

| | List the Ten Largest sources of sums Received: | Amount |
|-----|--|------------|
| 1. | [Redacted] | [Redacted] |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| 10. | | |

Note: List the 10 largest sources of contributions received (i.e. Donations, crowd funding, grants, fund raising activities, etc.) for the preceding year. (Note: Not necessary to list individual donors by name.)

5. TEN LARGEST APPLICATIONS OF CONTRIBUTIONS EXPENDED

| | List the Ten Largest Applications of Contributions Expended: | Amount |
|----|--|------------|
| 1. | [Redacted] | [Redacted] |
| 2. | | |
| 3. | | |



| | |
|-----|--|
| 4. | |
| 5. | |
| 6. | |
| 7. | |
| 8. | |
| 9. | |
| 10. | |

Note: List the 10 largest sources of how contributions were applied/expended for the preceding year. (Note: Not necessary to list individuals who received contribution by name.)

6. TEN LARGEST SALES AND PURCHASES OF PROPERTY

| Sales | Amount | Purchases | Amount |
|-------|--------|-----------|--------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
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| | | | |
| | | | |

7. TOP TEN COUNTRIES THAT FUNDS WERE SENT TO BY THE NPO

| | Countries money has been sent to: | Amount |
|-----|-----------------------------------|--------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| 10. | | |



CONTROLLER DECLARATION

I, [REDACTED] CAYMAN PREP & HIGH SCHOOL,
(Your name) *(NPO name)*

1. Certify that the information provided is true to the best of my knowledge, and that there are has been no change of the material particulars of the NPO that have not been notified to the Registrar.
2. That no major occurrences have taken place that can negative impact on the reputation of the NPO and or the NPO Sector
3. That any and all matter that can be categorized as major has been reported to the Registrar of NPOs (if applicable).

[REDACTED]

Signature

3rd March 2023

Date



Filed: 03-Mar-2023 14:30 EST
Auth Code: A12517894478



Non-Profit Organisation
ANNUAL RETURN FORM

Name of the Entity being reported on: CAYMAN PREP AND HIGH SCHOOL
Name of Person Completing Return Form: [REDACTED]
Position of Person Completing Return Form: [REDACTED]
Address/ Registered Office of the NPO 559 WALKERS ROAD, GEORGE TOWN GRAND CAYMAN
Email Address and Telephone numbers for the NPO: director@cayprep.edu.ky 949-9115
Email Address and Telephone number for the Person Completing The Form: [REDACTED]
NPO Financial Year- Beginning: 1ST SEPTEMBER 2022 End: 31ST AUGUST 2023

1. COMPLETE THE PRO-FORMA BALANCE SHEET below (Assets and Liabilities):

| ASSETS | \$ |
|----------------------------------|------------|
| Cash in Hand | [REDACTED] |
| Cash at Bank | [REDACTED] |
| Investments (Short term) | [REDACTED] |
| Other Current Assets | [REDACTED] |
| Total Current Assets | [REDACTED] |
| Property | [REDACTED] |
| Investments (Long Term) | [REDACTED] |
| Other Fixed Assets | [REDACTED] |
| Total Fixed Assets | [REDACTED] |
| Total Assets | [REDACTED] |
| LIABILITIES | [REDACTED] |
| Current Loans | [REDACTED] |
| Other Loans/Debts | [REDACTED] |
| Other Liabilities | [REDACTED] |
| Total Current Liabilities | [REDACTED] |



| | |
|-----------------------------|--|
| Mortgage | |
| Other Long Term Liabilities | |
| Total Long Term Liabilities | |
| Total Liabilities | |
| EQUITY | |
| Net Income | |
| Accumulated Surplus | |

2. COMPLETE THE PRO-FORMA INCOME STATEMENT below (*Income and Expenses*):

| INCOME | \$ |
|--|----|
| Income received from the provision of goods and services | |
| Rental Income | |
| Interest on income derived from investments | |
| Receipt of donations and money | |
| Award of grants | |
| Other income | |
| Gross Income | |
| EXPENSES | |
| Operating expenses | |
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| Government Fees | |
| Other funds donated/contributed | |
| Other expenses | |
| Total Expenses | |
| Net Income (= GROSS INCOME – EXPENSES) | |

3. ANNUAL REVIEW THRESHOLD:

(If the figure you have reported for Gross Income above equals to or exceeds C\$250,000 please complete this section.)

- A. Has the NPO sent 30% or more of your Gross Income overseas (circle appropriate answer)?

(If you have answered YES to question A above please complete questions B below)



B. Please indicate on the line below the total amount of funds sent overseas by the NPO during the last financial year?

[REDACTED]

C. What percentage of gross income does the amount indicated in question B above represent? (i.e. Amount reported in question B divided by Gross Income multiplied by 100)

[REDACTED]

D. Please indicate, on the line below, the name of the licensed accountant or duly qualified accountant the NPO has engaged to conduct the review of the financial statements.

[REDACTED]

4. TEN LARGEST SOURCES OF CONTRIBUTIONS RECEIVED

| List the Ten Largest sources of sums Received: | | Amount |
|--|------------|--------|
| 1. | [REDACTED] | |
| 2. | | |
| 3. | | |
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| 6. | | |
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| 8. | | |
| 9. | | |
| 10. | | |

Note: List the 10 largest sources of contributions received (i.e. Donations, crowd funding, grants, fund raising activities, etc.) for the preceding year. (Note: Not necessary to list individual donors by name.)

5. TEN LARGEST APPLICATIONS OF CONTRIBUTIONS EXPENDED

| List the Ten Largest Applications of Contributions Expended: | | Amount |
|--|------------|--------|
| 1. | [REDACTED] | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| 10. | | |



Note: List the 10 largest sources of how contributions were applied/expended for the preceding year. (Note: Not necessary to list individuals who received contribution by name.)

6. TEN LARGEST SALES AND PURCHASES OF PROPERTY

| Sales | Purchases |
|-------|-----------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

7. TOP TEN COUNTRIES THAT FUNDS WERE SENT TO BY THE NPO

| | <u>Countries money has been sent to:</u> | Amount |
|-----|--|--------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| 10. | | |



CONTROLLER DECLARATION

I, [REDACTED], CAYMAN PREP & HIGH SCHOOL,
(Your name) *(NPO name)*

1. Certify that the information provided is true to the best of my knowledge, and that there are has been no change of the material particulars of the NPO that have not been notified to the Registrar.
2. That no major occurrences have taken place that can negative impact on the reputation of the NPO and or the NPO Sector
3. That any and all matter that can be categorized as major has been reported to the Registrar of NPOs (if applicable).

[REDACTED]
Signature

1st May 2024
Date



Filed: 09-May-2024 14:09 EST
Auth Code: G32929801801



Non-Profit Organisation
ANNUAL RETURN FORM

Name of the Entity being reported on: United Church in Jamaica and the Cayman Islands

Name of Person Completing Return Form: [REDACTED]

Position of Person Completing Return Form: [REDACTED]

Address/ Registered Office of the NPO Box 1700, Grand Cayman, KY1-1109, Cayman Islands

Email Address and Telephone numbers for the NPO: rdgs@cicucjci.com 947-1963

Email Address and Telephone number for the Person Completing The Form: [REDACTED]

NPO Financial Year- Beginning: 01-January-2018 End: 31-December-2018

I. COMPLETE THE PRO-FORMA BALANCE SHEET below (Assets and Liabilities):

| ASSETS | \$ |
|----------------------------------|----|
| Cash in Hand | |
| Cash at Bank | |
| Investments (Short term) | |
| Other Current Assets | |
| Total Current Assets | |
| Property | |
| Investments (Long Term) | |
| Other Fixed Assets | |
| Total Fixed Assets | |
| Total Assets | |
| LIABILITIES | |
| Current Loans | |
| Other Loans/Debts | |
| Other Liabilities | |
| Total Current Liabilities | |



| | |
|-----------------------------|--|
| Mortgage | |
| Other Long Term Liabilities | |
| Total Long Term Liabilities | |
| Total Liabilities | |
| EQUITY | |
| Net Income | |
| Accumulated Surplus | |

2. COMPLETE THE PRO-FORMA INCOME STATEMENT below (Income and Expenses):

| INCOME | \$ |
|--|----|
| Income received from the provision of goods and services | |
| Rental Income | |
| Interest on income derived from investments | |
| Receipt of donations and money | |
| Award of grants | |
| Other income | |
| Gross Income | |
| EXPENSES | |
| Operating expenses | |
| Funds donated/contributed in accordance with NPO purpose | |
| Government Fees | |
| Other funds donated/contributed | |
| Other expenses | |
| Total Expenses | |
| Net Income (= GROSS INCOME – EXPENSES) | |

3. ANNUAL REVIEW THRESHOLD:

(If the figure you have reported for Gross Income above equals to or exceeds C\$250,000 please complete this section.)

- A. Has the NPO sent 30% or more of your Gross Income overseas (circle appropriate answer)?



(If you have answered YES to question A above please complete questions B below).

B. Please indicate on the line below the total amount of funds sent overseas by the NPO during the last financial year?

[REDACTED]

C. What percentage of gross income does the amount indicated in question B above represent? (i.e. Amount reported in question B divided by Gross Income multiplied by 100)

[REDACTED]

D. Please indicate, on the line below, the name of the licensed accountant or duly qualified accountant the NPO has engaged to conduct the review of the financial statements.

[REDACTED]

4. TEN LARGEST SOURCES OF CONTRIBUTIONS RECEIVED

| List the Ten Largest sources of sums Received: | | Amount |
|--|------------|--------|
| 1. | [REDACTED] | |
| 2. | [REDACTED] | |
| 3. | [REDACTED] | |
| 4. | [REDACTED] | |
| 5. | [REDACTED] | |
| 6. | [REDACTED] | |
| 7. | [REDACTED] | |
| 8. | [REDACTED] | |
| 9. | [REDACTED] | |
| 10. | [REDACTED] | |

Note: List the 10 largest sources of contributions received (i.e. Donations, crowd funding, grants, fund raising activities, etc.) for the preceding year. (Note: Not necessary to list individual donors by name.)

5. TEN LARGEST APPLICATIONS OF CONTRIBUTIONS EXPENDED

| List the Ten Largest Applications of Contributions Expended: | | Amount |
|--|------------|--------|
| 1. | [REDACTED] | |
| 2. | [REDACTED] | |
| 3. | [REDACTED] | |
| 4. | [REDACTED] | |





Non-Profit Organisation
ANNUAL RETURN FORM

Name of Entity being reported on: United Church in Jamaica and the Cayman Islands
 Name of Person Completing Return Form: [REDACTED]
 Position of Person Completing Return Form: [REDACTED]
 Address/Registered Office of the NPO: Box 1700, Grand Cayman, KY1-1109, Cayman Islands
 Email Address and Telephone numbers for the NPO: rdps@ejcucjci.com 947-1963
 Email Address and Telephone number for the Person Completing The Form: [REDACTED]
 NPO Financial Year-Beginning: 01-January-2019 End 31-December-2019

THE PRO-FORMA BALANCE SHEET

AS AT 31ST DECEMBER 2019

| | |
|------------------------------------|--|
| ASSETS | |
| Cash In Hand | |
| Cash at Bank | |
| Investments (Short term) | |
| Other Current Assets | |
| Total Current Assets | |
| Property | |
| Investments (Long Term) | |
| Other Fixed Assets | |
| Total Fixed Assets | |
| TOTAL ASSETS | |
| LIABILITIES | |
| Current Loans | |
| Other Loans/Debts | |
| Other Liabilities | |
| Total Current Liabilities | |
| Mortgage | |
| Other Long Term Liabilities | |
| Total Long Term Liabilities | |
| Total Liabilities | |
| EQUITY | |
| NET INCOME | |



THE PRO-FORMA INCOME STATEMENT

FOR THE FISCAL YEAR ENDED DECEMBER 2019

| | 2019 |
|---|------|
| INCOME | |
| Income Received from the provision of goods and services | |
| Rental Income | |
| Interest on Income derived from Investments | |
| Receipt of donations and money | |
| Award of grants | |
| Other Income | |
| GROSS INCOME | |
| EXPENSES | |
| Operating expenses | |
| Funds donated/contributed in accordance with NPO's purposes | |
| Government Fees | |
| Other funds donated/contributed | |
| Other expenses | |
| Total Expenses | |
| NET INCOME | |

2. ANNUAL REVIEW THRESHOLD:

(If the figure you have reported for Gross Income above equals to or exceeds C.\$250,000 please complete this section.)

A. Has the NPO sent 30% or more of your Gross Income overseas (circle appropriate)

answer) [REDACTED]

(If you have answered YES to question A above please complete questions B below).

B. Please indicate on the line below the total amount of funds sent overseas by the NPO during the last financial year?

C. What percentage of gross income does the amount indicated in question B above represent? (i.e. Amount reported in question B divided by Gross Income multiplied by 100)

D. Please indicate, on the line below, the name of the licensed accountant or duly qualified accountant the NPO has engaged to conduct the review of the financial statements.



3. **TEN LARGEST SOURCES OF CONTRIBUTIONS RECEIVED**

| Largest Sources of Contributions Received | | |
|---|-------------|--------|
| No. | Description | Amount |
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |

Note: List the 10 largest sources of contributions received (i.e. Donations, crowd funding, grants, fund raising activities, etc.) for the preceding year. (Note: Not necessary to list individual donors by name.)

4. **TEN LARGEST APPLICATIONS OF CONTRIBUTIONS EXPENDED**

| Largest Applications of Contributions Expended | | |
|--|-------------|--------|
| No. | Description | Amount |
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |
| 10 | | |

Note: List the 10 largest sources of how contributions were applied/expended for the preceding year. (Note: Not necessary to list individuals who received contribution by name.)



5.

TEN LARGEST SALES AND PURCHASES OF PROPERTY

| No. | Sales | Amount | Purchases | Amount |
|-----|-------|--------|-----------|--------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |

6.

TOP TEN COUNTRIES THAT FUNDS WERE SENT TO BY THE NPO

| Countries That Received The Most Funds From the UCJG In the Preceding Year | | |
|--|-------------|--------|
| No. | Description | Amount |
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |



CONTROLLER DECLARATION

[REDACTED] controller of, United Church in Jamaica and the Cayman Islands
(Your name) (NPO name)

1. Certify that the information provided is true to the best of my knowledge, and that there are has been no change of the material particulars of the NPO that have not been notified to the Registrar.
2. That no major occurrences have taken place that can negative impact on the reputation of the NPO and or the NPO Sector
3. That any and all matter that can be categorized as major has been reported to the Registrar of NPOs (if applicable).

[REDACTED]
Signature

23/11/2020

Date



Filed: 23-Nov-2020 13:10 EST
Auth Code: H06024212955



Non-Profit Organisation
ANNUAL RETURN FORM

Name of the Entity being reported on: United Church in Jamaica and the Cayman Islands

Name of Person Completing Return Form: [REDACTED]

Position of Person Completing Return Form [REDACTED]

Address/ Registered Office of the NPO P.O.Box 1700, Grand Cayman, KY1-1109, Cayman Islands

Email Address and Telephone numbers for the NPO: rdgs@cicucjci.com 1 345 947 1963

Email Address and Telephone number for the Person Completing The Form: [REDACTED]

NPO Financial Year- Beginning: 01-January-2020 End: 31-December-2020

1. COMPLETE THE PRO-FORMA BALANCE SHEET below (Assets and Liabilities):

| ASSETS | \$ |
|----------------------------------|----|
| Cash in Hand | |
| Cash at Bank | |
| Investments (Short term) | |
| Other Current Assets | |
| Total Current Assets | |
| Property | |
| Investments (Long Term) | |
| Other Fixed Assets | |
| Total Fixed Assets | |
| Total Assets | |
| LIABILITIES | \$ |
| Current Loans | |
| Other Loans/Debts | |
| Other Liabilities | |
| Total Current Liabilities | |

| | |
|-----------------------------|--|
| Mortgage | |
| Other Long Term Liabilities | |
| Total Long Term Liabilities | |
| Total Liabilities | |
| EQUITY | |
| Net Income | |
| Accumulated Surplus | |

2. COMPLETE THE PRO-FORMA INCOME STATEMENT below (Income and Expenses):

| INCOME | \$ |
|--|----|
| Income received from the provision of goods and services | |
| Rental Income | |
| Interest on income derived from investments | |
| Receipt of donations and money | |
| Award of grants | |
| Other income | |
| Gross Income | |
| EXPENSES | |
| Operating expenses | |
| Funds donated/contributed in accordance with NPO purpose | |
| Government Fees | |
| Other funds donated/contributed | |
| Other expenses | |
| Total Expenses | |
| Net Income (= GROSS INCOME – EXPENSES) | |

3. ANNUAL REVIEW THRESHOLD:

(If the figure you have reported for Gross Income above equals to or exceeds C\$250,000 please complete this section.)

- A. Has the NPO sent 30% or more of your Gross Income overseas (circle appropriate answer)?

[Redacted]

(If you have answered YES to question A above please complete questions B below).

B. Please indicate on the line below the total amount of funds sent overseas by the NPO during the last financial year?

C. What percentage of gross income does the amount indicated in question B above represent? (i.e. Amount reported in question B divided by Gross Income multiplied by 100)

D. Please indicate, on the line below, the name of the licensed accountant or duly qualified accountant the NPO has engaged to conduct the review of the financial statements.

4. TEN LARGEST SOURCES OF CONTRIBUTIONS RECEIVED

| List the Ten Largest sources of sums Received: | | Amount |
|--|--|--------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| 10. | | |

Note: List the 10 largest sources of contributions received (i.e. Donations, crowd funding, grants, fund raising activities, etc.) for the preceding year. (Note: Not necessary to list individual donors by name.)

5. TEN LARGEST APPLICATIONS OF CONTRIBUTIONS EXPENDED

| List the Ten Largest Applications of Contributions Expended: | | Amount |
|--|--|--------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |

| | |
|-----|--|
| 5. | |
| 6. | |
| 7. | |
| 8. | |
| 9. | |
| 10. | |

Note: List the 10 largest sources of how contributions were applied/expended for the preceding year. (Note: Not necessary to list individuals who received contribution by name.)

6. TEN LARGEST SALES AND PURCHASES OF PROPERTY

| Sales | Amount | Purchases | Amount |
|-------|--------|-----------|--------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

7. TOP TEN COUNTRIES THAT FUNDS WERE SENT TO BY THE NPO

| | <u>Countries money has been sent to:</u> | Amount |
|-----|--|--------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| 10. | | |





Non-Profit Organisation
ANNUAL RETURN FORM

Name of the Entity being reported on: United Church in Jamaica and the Cayman Islands

Name of Person Completing Return Form: [REDACTED]

Position of Person Completing Return Form: [REDACTED]

Address/ Registered Office of the NPO P.O.Box 1700, Grand Cayman, KY1-1109, Cayman Islands

Email Address and Telephone numbers for the NPO: rdgs@cicucjcl.com 1 345 947 1963

Email Address and Telephone number for the Person Completing The Form: [REDACTED]

NPO Financial Year- Beginning: 01-January-2021 End: 31-December-2021

1. COMPLETE THE PRO-FORMA BALANCE SHEET below (Assets and Liabilities):

| ASSETS | \$ |
|----------------------------------|----|
| Cash in Hand | |
| Cash at Bank | |
| Investments (Short term) | |
| Other Current Assets | |
| Total Current Assets | |
| Property | |
| Investments (Long Term) | |
| Other Fixed Assets | |
| Total Fixed Assets | |
| Total Assets | |
| LIABILITIES | |
| Current Loans | |
| Other Loans/Debts | |
| Other Liabilities | |
| Total Current Liabilities | |



| | |
|-----------------------------|--|
| Mortgage | |
| Other Long Term Liabilities | |
| Total Long Term Liabilities | |
| Total Liabilities | |
| EQUITY | |
| Net Income | |
| Accumulated Surplus | |

2. COMPLETE THE PRO-FORMA INCOME STATEMENT below *(Income and Expenses):*

| INCOME | \$ |
|--|-----------|
| Income received from the provision of goods and services | |
| Rental Income | |
| Interest on income derived from investments | |
| Receipt of donations and money | |
| Award of grants | |
| Other income | |
| Gross Income | |
| EXPENSES | |
| Operating expenses | |
| Funds donated/contributed in accordance with NPO purpose | |
| Government Fees | |
| Other funds donated/contributed | |
| Other expenses | |
| Total Expenses | |
| Net Income (= GROSS INCOME – EXPENSES) | |

3. ANNUAL REVIEW THRESHOLD:

(If the figure you have reported for Gross Income above equals to or exceeds CI\$250,000 please complete this section.)

A. Has the NPO sent 30% or more of your Gross Income overseas (circle appropriate answer)?



(If you have answered YES to question A above please complete questions B below).

B. Please indicate on the line below the total amount of funds sent overseas by the NPO during the last financial year?

[Redacted]

C. What percentage of gross income does the amount indicated in question B above represent? (i.e. Amount reported in question B divided by Gross Income multiplied by 100)

[Redacted]

D. Please indicate, on the line below, the name of the licensed accountant or duly qualified accountant the NPO has engaged to conduct the review of the financial statements.

[Redacted]

4. TEN LARGEST SOURCES OF CONTRIBUTIONS RECEIVED

| List the Ten Largest sources of sums Received: | | Amount |
|--|------------|--------|
| 1 | [Redacted] | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |
| 10 | | |

Note: List the 10 largest sources of contributions received (i.e. Donations, crowd funding, grants, fund raising activities, etc.) for the preceding year. (Note: Not necessary to list individual donors by name.)

5. TEN LARGEST APPLICATIONS OF CONTRIBUTIONS EXPENDED

| List the Ten Largest Applications of Contributions Expended: | | Amount |
|--|------------|--------|
| 1. | [Redacted] | |
| 2. | | |
| 3. | | |
| 4. | | |



| | |
|-----|--|
| 5. | |
| 6. | |
| 7. | |
| 8. | |
| 9. | |
| 10. | |

Note: List the 10 largest sources of how contributions were applied/expended for the preceding year. (Note: Not necessary to list individuals who received contribution by name.)

6. TEN LARGEST SALES AND PURCHASES OF PROPERTY

| Sales | Amount | Purchases | Amount |
|-------|--------|-----------|--------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

7. TOP TEN COUNTRIES THAT FUNDS WERE SENT TO BY THE NPO

| | <u>Countries money has been sent to:</u> | Amount |
|-----|--|--------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| 10. | | |





Non-Profit Organisation
ANNUAL RETURN FORM

Name of the Entity being reported on: United Church in Jamaica and the Cayman Islands

Name of Person Completing Return Form: [REDACTED]

Position of Person Completing Return Form: [REDACTED]

Address/ Registered Office of the NPO P.O. Box 1700, Grand Cayman, KY1-1109, Cayman Islands

Email Address and Telephone numbers for the NPO: rdgs@cicucjci.com 1 345 947 1963

Email Address and Telephone number for the Person Completing The Form: [REDACTED]

NPO Financial Year- Beginning: January 1, 2022 End: December 31, 2022

I. COMPLETE THE PRO-FORMA BALANCE SHEET below (Assets and Liabilities):

| ASSETS | \$ |
|----------------------------------|----|
| Cash in Hand | |
| Cash at Bank | |
| Investments (Short term) | |
| Other Current Assets | |
| Total Current Assets | |
| Property | |
| Investments (Long Term) | |
| Other Fixed Assets | |
| Total Fixed Assets | |
| Total Assets | |
| LIABILITIES | |
| Current Loans | |
| Other Loans/Debts | |
| Other Liabilities | |
| Total Current Liabilities | |



| | |
|-----------------------------|--|
| Mortgage | |
| Other Long Term Liabilities | |
| Total Long Term Liabilities | |
| Total Liabilities | |
| EQUITY | |
| Net Income | |
| Accumulated Surplus | |

2. COMPLETE THE PRO-FORMA INCOME STATEMENT below (Income and Expenses):

| INCOME | \$ |
|--|----|
| Income received from the provision of goods and services | |
| Rental Income | |
| Interest on income derived from investments | |
| Receipt of donations and money | |
| Award of grants | |
| Other income | |
| Gross Income | |
| EXPENSES | |
| Operating expenses | |
| Funds donated/contributed in accordance with NPO purpose | |
| Government Fees | |
| Other funds donated/contributed | |
| Other expenses | |
| Total Expenses | |
| Net Income (= GROSS INCOME – EXPENSES) | |

3. ANNUAL REVIEW THRESHOLD:

(If the figure you have reported for Gross Income above equals to or exceeds CI\$250,000 please complete this section.)

A. Has the NPO sent 30% or more of your Gross Income overseas (circle appropriate answer)?



(If you have answered YES to question A above please complete questions B below).

B. Please indicate on the line below the total amount of funds sent overseas by the NPO during the last financial year?

[REDACTED]

C. What percentage of gross income does the amount indicated in question B above represent? (i.e. Amount reported in question B divided by Gross Income multiplied by 100)

[REDACTED]

D. Please indicate, on the line below, the name of the licensed accountant or duly qualified accountant the NPO has engaged to conduct the review of the financial statements.

[REDACTED]

4. TEN LARGEST SOURCES OF CONTRIBUTIONS RECEIVED

| List the Ten Largest sources of sums Received: | | Amount |
|--|------------|--------|
| 1. | [REDACTED] | |
| 2. | [REDACTED] | |
| 3. | [REDACTED] | |
| 4. | [REDACTED] | |
| 5. | [REDACTED] | |
| 6. | [REDACTED] | |
| 7. | [REDACTED] | |
| 8. | [REDACTED] | |
| 9. | [REDACTED] | |
| 10. | [REDACTED] | |

Note: List the 10 largest sources of contributions received (i.e. Donations, crowd funding, grants, fund raising activities, etc.) for the preceding year. (Note: Not necessary to list individual donors by name.)

5. TEN LARGEST APPLICATIONS OF CONTRIBUTIONS EXPENDED

| List the Ten Largest Applications of Contributions Expended: | | Amount |
|--|------------|--------|
| 1. | [REDACTED] | |
| 2. | [REDACTED] | |
| 3. | [REDACTED] | |
| 4. | [REDACTED] | |



| | |
|-----|--|
| 5. | |
| 6. | |
| 7. | |
| 8. | |
| 9. | |
| 10. | |

Note: List the 10 largest sources of how contributions were applied/expended for the preceding year. (Note: Not necessary to list individuals who received contribution by name.)

6. TEN LARGEST SALES AND PURCHASES OF PROPERTY

| Sales | Amount | Purchases | Amount |
|-------|--------|-----------|--------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

7. TOP TEN COUNTRIES THAT FUNDS WERE SENT TO BY THE NPO

| | Countries money has been sent to: | Amount |
|----|-----------------------------------|--------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |
| 10 | | |





**Non-Profit Organisation
ANNUAL RETURN FORM**

Name of the Entity being reported on: United Church in Jamaica and the Cayman Islands

Name of Person Completing Return Form: [REDACTED]

Position of Person Completing Return Form: [REDACTED]

Address/ Registered Office of the NPO P.O. Box 1700, Grand Cayman, KY1-1109, Cayman Islands

Email Address and Telephone numbers for the NPO: rdgs@cicucjci.com 1 345 947 1963

Email Address and Telephone number for the Person Completing The Form: [REDACTED]

NPO Financial Year- Beginning: January 1, 2023 End: December 31, 2023

I. COMPLETE THE PRO-FORMA BALANCE SHEET below (Assets and Liabilities):

| ASSETS | \$ |
|----------------------------------|----|
| Cash In Hand | |
| Cash at Bank | |
| Investments (Short term) | |
| Other Current Assets | |
| Total Current Assets | |
| Property | |
| Investments (Long Term) | |
| Other Fixed Assets | |
| Total Fixed Assets | |
| Total Assets | |
| LIABILITIES | \$ |
| Current Loans | |
| Other Loans/Debts | |
| Other Liabilities | |
| Total Current Liabilities | |



| | |
|-----------------------------|--|
| Mortgage | |
| Other Long Term Liabilities | |
| Total Long Term Liabilities | |
| Total Liabilities | |
| EQUITY | |
| Net Income | |
| Accumulated Surplus | |

2. COMPLETE THE PRO-FORMA INCOME STATEMENT below (Income and Expenses):

| INCOME | \$ |
|--|-----------|
| Income received from the provision of goods and services | |
| Rental Income | |
| Interest on income derived from investments | |
| Receipt of donations and money | |
| Award of grants | |
| Other income | |
| Gross Income | |
| EXPENSES | |
| Operating expenses | |
| Funds donated/contributed in accordance with NPO purpose | |
| Government Fees | |
| Other funds donated/contributed | |
| Other expenses | |
| Total Expenses | |
| Net Income (= GROSS INCOME – EXPENSES) | |

3. ANNUAL REVIEW THRESHOLD:

(If the figure you have reported for Gross Income above equals to or exceeds CI\$250,000 please complete this section.)

A. Has the NPO sent 30% or more of your Gross Income overseas (circle appropriate answer)?



(If you have answered YES to question A above please complete questions B below).

B. Please indicate on the line below the total amount of funds sent overseas by the NPO during the last financial year?

C. What percentage of gross income does the amount indicated in question B above represent? (i.e. Amount reported in question B divided by Gross Income multiplied by 100)

D. Please indicate, on the line below, the name of the licensed accountant or duly qualified accountant the NPO has engaged to conduct the review of the financial statements.

4. TEN LARGEST SOURCES OF CONTRIBUTIONS RECEIVED

| List the Ten Largest sources of sums Received: | | Amount |
|--|------------|--------|
| 1. | [REDACTED] | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| 10. | | |

Note: List the 10 largest sources of contributions received (i.e. Donations, crowd funding, grants, fund raising activities, etc.) for the preceding year. (Note: Not necessary to list individual donors by name.)

5. TEN LARGEST APPLICATIONS OF CONTRIBUTIONS EXPENDED

| List the Ten Largest Applications of Contributions Expended: | | Amount |
|--|------------|--------|
| 1. | [REDACTED] | |
| 2. | | |
| 3. | | |
| 4. | | |



| | |
|-----|--|
| 5. | |
| 6. | |
| 7. | |
| 8. | |
| 9. | |
| 10. | |

Note: List the 10 largest sources of how contributions were applied/expended for the preceding year. (Note: Not necessary to list individuals who received contribution by name.)

6. TEN LARGEST SALES AND PURCHASES OF PROPERTY

| Sales | Amount | Purchases | Amount |
|-------|--------|-----------|--------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
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| | | | |
| | | | |

7. TOP TEN COUNTRIES THAT FUNDS WERE SENT TO BY THE NPO

| | <u>Countries money has been sent to:</u> | Amount |
|-----|--|--------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| 10. | | |



