

Please identify the primary objectives of your organization, and its main beneficiaries.

Please identify the nature of any fundraising activities, projects and programmes that the organization engaged in during the past year. If it does not engage in fundraising, please state how it is financed.

Please explain how the organization's objectives and aims are of benefit to the public. You may wish to refer to the Guidance on Public Benefit document issued by the Registrar General and Charity Commissioners, which is available at www.charities.gov.bm.

Is your charity accredited by the Bermuda National Standards Committee?

Yes

No

If **Yes**, please provide the date of accreditation:

Does the charity have a trading subsidiary? (A trading subsidiary is a company owned and controlled by the charity to trade on its behalf)

Yes

No

If **Yes**, please provide the name of the subsidiary:

LIST ALL TRUSTEES, DIRECTORS AND OFFICERS OF THE ORGANIZATION

Official Title:		
Name:		
Street Address:		
Phone No. (W)	(H)	Email
Official Title:		
Name:		
Street Address:		
Phone No. (W)	(H)	Email
Official Title		
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Official Title		
Name		
Street Address		
Phone No. (W)	(H)	Email
Official Title		
Name		
Street Address		
Phone No. (W)	(H)	Email
Official Title		
Name		
Street Address		
Phone No. (W)	(H)	Email

In the past 5 years, have any of the organization's **trustees, directors or officers** , whether under the laws of Bermuda or any other jurisdiction:

- | | | | | |
|---|-----|--------------------------|----|--------------------------|
| a) been charged or convicted of an offence (excluding traffic violations) under any criminal law or other law in force? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| b) been the subject of, or convicted in any regulatory, civil, or other action or proceeding? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| c) been the subject of bankruptcy or receivership proceedings? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| d) been the subject of a court judgement or writ, or failed to satisfy a judgement or writ? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| e) had a business licence or registration refused, suspended or cancelled? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

If the answer is YES to any of questions a) to e) above, please provide details (attach a separate sheet if necessary):

GENERAL OBLIGATIONS

- | | | | | |
|---|-----|--------------------------|----|--------------------------|
| a) Does the organization work with persons who are considered vulnerable because of their age, physical or mental ability, or ill health? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| b) If you answered Yes to question a), are you in compliance with the Vulnerable Persons Policy Document that has been issued by the Registrar General and Charities Commissioners for charities? (available at www.charities.gov.bm) | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| c) Is your charity in compliance with the Anti-Money Laundering and Anti-Terrorist Financing obligations for charities under the Charities Act 2014 and the Charities (Anti-Money Laundering, Anti-Terrorist Financing and Reporting) Regulations 2014? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| d) During the past year, did the charity notify the Registrar General of any changes to the it's trustees, address, or other particulars within 30 days? (section 17 of the Act) | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| e) Are the charity's financial statements for the year to which this Annual Report relates attached? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| f) Have the financial statements been submitted within 6 months of the end of the charity's financial year end? (section 37 of the Act) | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| g) Have the financial statements been signed by the Treasurer and one other officer / trustee? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| h) Has the charity paid the relevant annual fee to the Registrar General? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

If you answered NO to any of questions b) to i) above, or if your charity is not in compliance with any of the requirements of the Charities Act 2014 or the Charities Regulations 2014, please provide an explanation:

ANTI-MONEY LAUNDERING & ANTI-TERRORIST FINANCING REPORT

Name of AML/ATF Compliance Officer

Date of financial year-end for this report

Has the charity's AML/ATF Compliance Officer received AML/ATF training through the Centre on Philanthropy?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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KNOW YOUR DONORS

Have any donors given more than \$5,000 during the year?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Does the charity have a well established relationship with them?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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In what form is the money being received (cash, cheque, bank transfer)?

Have any public concerns been raised about the donors or their activities?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Has the charity received any unusual or substantial one-off donations?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Are there any conditions attached to such donations?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Have any donations been made on condition that the funds are only to be retained by the charity for a period and then returned to the donor, with the charity retaining the interest?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Have any donations been made on condition that a particular third party be used to apply the funds?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Have any donations been made on condition that the funds be applied for the benefit of particular individuals, either directly or indirectly?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Is there a suggestion that the charity is being used as a conduit to a third party?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Have any donations been made in Bermuda dollars or another currency, with a requirement that they be returned in a different currency?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Have any donations been received from unknown bodies or international sources where financial regulation or the legal framework are not rigorous?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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KNOW YOUR PARTNERS			
Does the charity work with any partners or agents in carrying out its objectives?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
If the charity has partners or agents, does the charity have influence or control over them?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
If the charity has partners or agents, does it have a long relationship with them?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
If the charity has partners or agents, do any of these operate in territories or areas known for terrorism or other criminal activity?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>

KNOW YOUR BENEFICIARIES			
Does the charity know how its beneficiaries use the funds or other resources provided to them?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Are most of the charity's beneficiaries located outside of Bermuda?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Has the charity received any unusual requests from its beneficiaries?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Are any of the charity's beneficiaries located in territories or areas that are known for terrorism or other criminal activity?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Are any of the charity's beneficiaries located in territories or areas that are subject to sanctions by the Government of Bermuda?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>

COMMENTS

I hereby certify that the particulars contained in this Annual Report, which is submitted under the requirements of sections 38 and 47 of the Charities Act 2014, are true and correct to the best of my knowledge and belief.

Signature

Date

Print Name

Title in organisation