



Charities (Fees, Forms, and Other Matters) Regulations 2006

Anand Satyanand, Governor-General

Order in Council

At Wellington this 25th day of September 2006

Present:

His Excellency the Governor-General in Council

Pursuant to sections 42 and 73 of the Charities Act 2005, His Excellency the Governor-General, acting on the advice and with the consent of the Executive Council, makes the following regulations.

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Regulations**1 Title**

These regulations are the Charities (Fees, Forms, and Other Matters) Regulations 2006.

2 Commencement

These regulations come into force on 1 November 2006.

3 Interpretation

- (1) In these regulations, **Act** means the Charities Act 2005.
- (2) Unless the context otherwise requires, terms and expressions that are used but not defined in these regulations but that are defined in the Act have the same meaning as in the Act.

*Fees***4 Fee for filing annual return**

- (1) The fee payable by a charitable entity or by a charitable entity that is a single entity with an annual gross income of \$10,000 or more for filing an annual return is,—
 - (a) in the case of an electronic return, \$50;
 - (b) in the case of a non-electronic return, \$75.
- (2) The fee must be paid to the Charities Commission.
- (3) The fee includes goods and services tax.

*Forms***5 Forms**

The forms set out in the Schedule are prescribed for the following purposes under the Act:

- (a) form 1 for an application by an entity for registration as a charitable entity;
- (b) form 2 for certifying an officer of a charitable entity;
- (c) form 3 for notifying changes to a charitable entity;
- (d) form 4 for submitting an annual return on behalf of a charitable entity;

- (e) form 5 for an application by a single entity for registration as a charitable entity:
- (f) form 6 for notifying changes to a charitable entity that is a single entity:
- (g) form 7 for submitting an annual return on behalf of a charitable entity that is a single entity.

6 Information or documents required by forms

- (1) The following information or documents must accompany form 3 (notification of changes to a charitable entity) as the case may be:
 - (a) if the charitable entity's rules have changed,—
 - (i) a copy of the amendment to the rules; and
 - (ii) a copy of the minute of the meeting or other record specifying the change and the effective date of the change:
 - (b) if a new officer has been added to the charitable entity, an officer certification form (form 2) for the new officer.
- (2) The following information or documents must accompany form 4 (annual return on behalf of a charitable entity):
 - (a) a copy of the financial statements of the charitable entity; and
 - (b) if the charitable entity's rules have changed,—
 - (i) a copy of the amendment to the rules; and
 - (ii) a copy of the minute of the meeting or other record specifying the change and the effective date of the change; and
 - (c) if a new officer has been added to the charitable entity, an officer certification form (form 2) for the new officer.
- (3) The following information or documents must accompany form 6 (notification of changes to a charitable entity that is a single entity) as the case may be:
 - (a) if the charitable entity that is a single entity's rules have changed,—
 - (i) a copy of the amendment to the rules; and
 - (ii) a copy of the minute of the meeting or other record specifying the change and the effective date of the change:
 - (b) if a new officer has been added to the charitable entity that is a single entity, an officer certification form (form 2) for the new officer.

- (4) A copy of the financial statements of the charitable entity must accompany form 7 (annual return on behalf of a charitable entity that is a single entity).

7 Forms that must be signed by officer

The following forms must be signed by an officer:

- (a) form 1 (application by an entity for registration as a charitable entity):
- (b) form 5 (application by a single entity for registration as a charitable entity).

Other matters

8 Search criteria for register of charitable entities

The register of charitable entities may be searched by reference to the following criteria:

- (a) the sector in which the charitable entity operates:
- (b) the activities that the charitable entity undertakes:
- (c) the beneficiaries of the charitable entity:
- (d) the area of operation of the charitable entity:
- (e) any former name of the charitable entity:
- (f) the address for service or any former address for service of the charitable entity:
- (g) the name of a former officer of the charitable entity (for example, a surname, family name, first name, given name, or body corporate name).

9 Administrative penalties

- (1) The penalty for a failure by a charitable entity to send or deliver to the Charities Commission a notice of change required under section 40(1) of the Act within 3 months is \$100.
 - (2) The penalty for a failure by a charitable entity to send or deliver to the Charities Commission an annual return under section 41 of the Act within 6 months after each balance date of the entity is \$200.
-

Schedule Forms

r 5

Form 1

Application by entity for registration as charitable entity *Section 17, Charities Act 2005*

Entity details

- | | | |
|---|---|-----------------|
| 1 | Legal name of the entity. | [] |
| 2 | If the entity is a registered charitable trust, an incorporated society, or a company, please provide the Companies Office registration number. | [] |
| 3 | Other names the entity is known by (if any). | [] |
| 4 | The entity's Inland Revenue Department (IRD) number (if it has one). | [] |
| 5 | End of financial year / balance date for the entity. | (day/month) |
| 6 | Address for service. | Postal address: |
| | | Street address: |
| 7 | Other details (optional). | Phone (day): |
| | | Fax: |
| | | Email: |
| | | Website: |

Requirements for registration

- | | | | |
|---|---|------------------------|--------------------------|
| 8 | What organisational type best describes the entity? | Trustees of a trust | <i>Go to question 9</i> |
| | | Society or institution | <i>Go to question 13</i> |

Form 1—*continued***Trustees of a trust**

- 9 Note that to be registered under the Charities Act 2005, a trust must be set up to receive an amount of income for a charitable purpose. Specify the clause or rule number(s) in the trust deed that state that the trust is set up to receive an amount of income for a charitable purpose.

[]	<ul style="list-style-type: none"> • if a Maori Trust Board, go to question 10 • if a marae on a Maori reservation, go to question 11 • if neither, go to question 14
-----	--

Maori Trust Board

- 10 Has the declaration of trust been approved by the Commissioner of Inland Revenue for charitable purposes under section 24B(3) of the Maori Trust Boards Act 1955?

Yes	<i>It would assist the Charities Commission if you supplied a copy of the approval by the Commissioner of Inland Revenue.</i>
No	<ul style="list-style-type: none"> • if a marae on a Maori reservation, go to question 11 • if not a marae on a Maori reservation, go to question 14

Marae on Maori reservation

- 11 Is the physical structure of the marae on land that is a Maori reservation set apart under section 338 of Te Ture Whenua Maori Act 1993?

Yes	<ul style="list-style-type: none"> • <i>It would assist the Charities Commission if you supplied a copy of the Gazette notice under section 338 of Te Ture Whenua Maori Act 1993 and</i> • <i>Go to question 12</i>
No	<i>Go to question 14</i>

Form 1—continued

- 12 Are the funds of the marae used for a purpose other than—
- administration and maintenance of the land and of the physical structure of the marae; or
 - another charitable purpose?
- | | |
|-----|--------------------------|
| Yes | <i>Go to question 14</i> |
| No | <i>Go to question 14</i> |

Society or institution

- 13 Note that to be registered under the Charities Act 2005, a society or institution must be established and maintained exclusively for charitable purposes and not carried on for the private profit of any individual. Specify the clause number(s) in the entity’s rules that state it is established and maintained exclusively for charitable purposes and not carried on for the private profit of any individual.
- | | |
|-----|--------------------------|
| [] | <i>Go to question 14</i> |
|-----|--------------------------|

Charitable purpose

Sectors

- 14 Which of the following describe the sectors in which the entity operates? Please select as many boxes as needed.

- | | |
|--|---|
| <input type="checkbox"/> accommodation / housing
<input type="checkbox"/> education / training / research
<input type="checkbox"/> health
<input type="checkbox"/> environment / conservation
<input type="checkbox"/> marae on reservation land
<input type="checkbox"/> community development
<input type="checkbox"/> emergency / disaster relief
<input type="checkbox"/> social services
<input type="checkbox"/> employment
<input type="checkbox"/> religious activities
<input type="checkbox"/> arts / culture / heritage | <input type="checkbox"/> sport / recreation
<input type="checkbox"/> care / protection of animals
<input type="checkbox"/> international activities
<input type="checkbox"/> economic development
<input type="checkbox"/> fund-raising
<input type="checkbox"/> disability
<input type="checkbox"/> promotion of volunteering
<input type="checkbox"/> other (please state below) |
|--|---|

[]

- 15 Which one of the above is the main sector of operation for the entity?

[]

Form 1—*continued***Activities**

16 Which of the following activities describe what the entity does? Please select as many boxes as needed.

- | | |
|---|---|
| <input type="checkbox"/> makes grants / loans to individuals | <input type="checkbox"/> provides advice / information / advocacy |
| <input type="checkbox"/> makes grants to organisations (including schools or other charities) | <input type="checkbox"/> sponsors / undertakes research |
| <input type="checkbox"/> provides other finance (eg, investment funds) | <input type="checkbox"/> acts as an umbrella / resource body |
| <input type="checkbox"/> provides human resources (eg, staff / volunteers) | <input type="checkbox"/> provides religious services / activities |
| <input type="checkbox"/> provides buildings / facilities / open space | <input type="checkbox"/> other (please state below) |
| <input type="checkbox"/> provides services (eg, care / counselling) | |

[]

17 Which one of the above is the main activity of the entity?

[]

Beneficiaries

18 Who benefits from the entity's activities? Please select as many boxes as needed.

- | | |
|---|---|
| <input type="checkbox"/> children / young people | <input type="checkbox"/> older people |
| <input type="checkbox"/> voluntary bodies other than charities | <input type="checkbox"/> people with disabilities |
| <input type="checkbox"/> animals | <input type="checkbox"/> general public |
| <input type="checkbox"/> people of a certain ethnic / racial origin | <input type="checkbox"/> migrants / refugees |
| <input type="checkbox"/> family / whanau | <input type="checkbox"/> other (please state below) |
| <input type="checkbox"/> religious groups | |
| <input type="checkbox"/> other charities | |

[]

19 Which one of the above is the main beneficiary of the entity?

[]

Form 1—continued

Sources of funds

20 From which of the following sources does the entity get or intend to get funds? Please select as many boxes as needed.

- | | |
|---|---|
| <input type="checkbox"/> government grants / contracts | <input type="checkbox"/> membership fees |
| <input type="checkbox"/> income from service provision | <input type="checkbox"/> bequests |
| <input type="checkbox"/> income from trading operations | <input type="checkbox"/> other sources (please state below) |
| <input type="checkbox"/> donations / koha | |
| <input type="checkbox"/> New Zealand dividends | |
| <input type="checkbox"/> other investment income | |
| <input type="checkbox"/> any other grants and sponsorship | |

[]

Areas of operation

21 Where does the entity operate or intend to operate? Please select as many boxes as needed.

New Zealand

- Nationwide

Or less than nationwide

- | | |
|--|--|
| <input type="checkbox"/> Northland | <input type="checkbox"/> Wellington–Wairarapa |
| <input type="checkbox"/> Auckland | <input type="checkbox"/> Nelson–Marlborough–Tasman |
| <input type="checkbox"/> Waikato | <input type="checkbox"/> West Coast |
| <input type="checkbox"/> Bay of Plenty | <input type="checkbox"/> Canterbury |
| <input type="checkbox"/> Gisborne | <input type="checkbox"/> Otago |
| <input type="checkbox"/> Hawke’s Bay | <input type="checkbox"/> Southland |
| <input type="checkbox"/> Taranaki | <input type="checkbox"/> Chatham Islands |
| <input type="checkbox"/> Manawatu–Wanganui | |

Overseas

- | | |
|----------------------------------|--|
| <input type="checkbox"/> Oceania | <input type="checkbox"/> Antarctica |
| <input type="checkbox"/> Asia | <input type="checkbox"/> South America |
| <input type="checkbox"/> Africa | <input type="checkbox"/> North America |
| <input type="checkbox"/> Europe | |

22 Identify the percentage of New Zealand-sourced funds that were spent overseas in the last financial year (or if the entity has not been operating for a year, the percentage of New Zealand-sourced funds that the entity intends to spend overseas in the upcoming financial year).

[]

Form 1—continued

Officer details

23 Please provide details for each officer of the entity. This is to ensure that the Charities Commission can match up your officer certification forms with the officers you advise the Charities Commission of in this form. Please note that each officer or someone on the officer’s behalf must complete and sign an officer certification form.

Individual officer

Given or first name(s):	Surname or family name:
-------------------------	-------------------------

Body corporate

Name of body corporate:

Rules

24 Please supply a copy of the entity’s rules including all amendments.

Privacy and information use

The information that you have provided in this form will be held and used by the Charities Commission to determine your eligibility for registration and to carry out its functions under the Charities Act 2005.

The Charities Act 2005 authorises the supply of information or documents held on the register of charitable entities to the Inland Revenue Department to assist in the carrying out of powers and functions under any of the Inland Revenue Acts.

The Statistics Act 1975 allows for the information, once collected, to be used for statistical purposes by Statistics New Zealand. Information supplied to Statistics New Zealand will be used for statistical purposes only and will be arranged to prevent particulars published about any person from being identifiable (except by the person who supplied the information), unless the person has agreed or publication identifying the person is unavoidable.

The Privacy Act 1993 provides that you may access or correct personal information about you held by the Charities Commission. If you wish to access or correct your personal information, please contact the Charities Commission, PO Box 8072, Wellington.

Request for information on register to be restricted from public access

Please note:

- The Charities Commission may, under section 25 of the Charities Act 2005, prevent or restrict public access to information or documents if it considers it to be in the public interest to do so. Please note that this information or these documents will still be subject to requests under the Official Information Act 1982 that will be considered by the Charities Commission on a case-by-case basis.
- All requests to prevent or restrict public access to information or documents will be evaluated and you will be advised of the Charities Commission’s decision.

Form 1—*continued*

Certification

I certify that the information in this application form for registration as a charitable entity is correct and that I am authorised to make this application.

Signature of officer

[]

Full name of officer

[]

Date

(day/month/year)

Form 2
Officer certification form
Section 16, Charities Act 2005

Entity details

1 Legal name of the entity.

[]

2 Charitable entity registration number if the entity is registered under the Charities Act 2005.

[]

Officer details

3 Full name of officer.

Individual officer

Given or first name(s):	Surname or family name:
-------------------------	-------------------------

Body corporate

Name of body corporate:

4 Position held in the entity.

[]

5 Date of appointment to position.

(day/month/year)

- For an officer of an entity in the process of being registered with the Charities Commission either:
 - use the date of appointment; or
 - if you do not know or can not ascertain the date, leave blank and the Charities Commission will use the date the entity is registered.
- For a new officer of an entity that is already registered, use the date of appointment only.

Form 2—continued

Privacy and information use

The information that you have provided in this form will be held and used by the Charities Commission to determine your eligibility for registration and to carry out its functions under the Charities Act 2005.

The Charities Act 2005 authorises the supply of information or documents held on the register of charitable entities to the Inland Revenue Department to assist in the carrying out of powers and functions under any of the Inland Revenue Acts.

The Statistics Act 1975 allows for the information, once collected, to be used for statistical purposes by Statistics New Zealand. Information supplied to Statistics New Zealand will be used for statistical purposes only and will be arranged to prevent particulars published about any person from being identifiable (except by the person who supplied the information), unless the person has agreed or publication identifying the person is unavoidable.

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- All requests to prevent or restrict public access to information or documents will be evaluated and you will be advised of the Charities Commission’s decision.

Certification

I certify that the named officer (please tick one or both as applicable):

- is not disqualified from being an officer of a charitable entity in terms of section 16(2) of the Charities Act 2005:
- has been appointed as an officer under an Act, by the Governor-General, by the Governor-General in Council, or by a Minister.

Signature of officer or person completing this form on the officer’s behalf

[]

Full name of officer or person completing this form on the officer’s behalf

[]

Date

(day/month/year)

Form 3
Notification of changes to charitable entity
Section 40, Charities Act 2005

Charitable entity details

- 1 Legal name of the charitable entity. []
- 2 Charitable entity registration number. []

Changes to charitable entity's details

- 3 New legal name of charitable entity. []
- Effective date of change (day/month/year)
- 4 New other name of the charitable entity. []
- Effective date of change (day/month/year)
- 5 New address for service. Postal address:
- Street address:
- Effective date of change (day/month/year)
- 6 New end of financial year / balance date for the charitable entity. (day/month)
- Effective date of change (day/month/year)

Form 3—continued

7 Changes to other details (optional).

Phone (day):
Fax:
Email:
Website:

Changes to charitable purpose

Sectors

8 If your sectors of operation have changed, please indicate what you do now. Please select as many boxes as needed.

- | | |
|--|---|
| <input type="checkbox"/> accommodation / housing | <input type="checkbox"/> sport / recreation |
| <input type="checkbox"/> education / training / research | <input type="checkbox"/> care / protection of animals |
| <input type="checkbox"/> health | <input type="checkbox"/> international activities |
| <input type="checkbox"/> environment / conservation | <input type="checkbox"/> economic development |
| <input type="checkbox"/> marae on reservation land | <input type="checkbox"/> fund-raising |
| <input type="checkbox"/> community development | <input type="checkbox"/> disability |
| <input type="checkbox"/> emergency / disaster relief | <input type="checkbox"/> promotion of volunteering |
| <input type="checkbox"/> social services | <input type="checkbox"/> other (please state below) |
| <input type="checkbox"/> employment | |
| <input type="checkbox"/> religious activities | |
| <input type="checkbox"/> arts / culture / heritage | |

[]

Effective date of change

(day/month/year)

9 If your main sector of operation has changed, please indicate what it is now.

[]

Effective date of change

(day/month/year)

Form 3—continued

Activities

10 If your activities have changed, please indicate what you do now. Please select as many boxes as needed.

- makes grants / loans to individuals
- provides advice / information / advocacy
- makes grants / loans organisations (including schools or other charities)
- sponsors / undertakes research
- provides other finance (eg, investment funds)
- acts as an umbrella / resource body
- provides human resources (eg, staff / volunteers)
- provides religious services / activities
- provides buildings / facilities / open space
- other (please state below)
- provides services (eg, care / counselling)

[]

Effective date of change

(day/month/year)

11 If your main activity has changed, please indicate what it is now.

[]

Effective date of change

(day/month/year)

Beneficiaries

12 If your beneficiaries have changed, please indicate who they are now. Please select as many boxes as needed.

- children / young people
- older people
- voluntary bodies other than charities
- people with disabilities
- animals
- general public
- people of a certain ethnic / racial origin
- migrants / refugees
- family / whanau
- other (please state below)
- religious groups
- other charities

[]

Effective date of change

(day/month/year)

Form 3—continued

13 If your main beneficiary has changed, please indicate who it is now. []

Effective date of change (day/month/year)

Areas of operation

14 If your areas of operation have changed, please indicate what they are now. Please select as many boxes as needed.

New Zealand

Nationwide

Or less than nationwide

Northland

Wellington–Wairarapa

Auckland

Nelson–Marlborough–Tasman

Waikato

West Coast

Bay of Plenty

Canterbury

Gisborne

Otago

Hawke’s Bay

Southland

Taranaki

Chatham Islands

Manawatu–Wanganui

Overseas

Oceania

Antarctica

Asia

South America

Africa

North America

Europe

Effective date of change (day/month/year)

15 Identify the percentage of New Zealand-sourced funds that were spent overseas in the last financial year (or if the charitable entity has not been operating for a year, the percentage of New Zealand-sourced funds that the charitable entity intends to spend overseas in the upcoming financial year). []

Form 3—continued

Change to officers

- 16 Do you need to add any new officers of the charitable entity to the register?

Yes	Please complete an officer certification form
-----	---

- 17 Please provide details for each new officer of the charitable entity. This is to ensure that the Charities Commission can match up your officer certification forms with the officers you advise the Charities Commission of in this form. Please note that each new officer or someone on the officer's behalf must complete and sign an officer certification form.

New individual officer

Given or first name(s):	Surname or family name:
-------------------------	-------------------------

New body corporate

Name of body corporate:

- 18 Do any officers of the charitable entity need to be removed from the register? Please specify each individual or body corporate that is no longer an officer.

Full name of officer	Last date as an officer (day/month/year)

Rules

- 19 Have the charitable entity's rules changed since you last notified the Charities Commission?

Yes
No

If the charitable entity's rules have changed, please supply—

- a copy of the amendment(s) to the charitable entity's rules; and
- a copy of the minute of the meeting or other record specifying the decision and the effective date of the change.

Form 3—*continued***Privacy and information use**

The information that you have provided in this form will be held and used by the Charities Commission to determine your eligibility for ongoing registration and to carry out its functions under the Charities Act 2005.

The Charities Act 2005 authorises the supply of information or documents held on the register of charitable entities to the Inland Revenue Department to assist in the carrying out of powers and functions under any of the Inland Revenue Acts.

The Statistics Act 1975 allows for the information, once collected, to be used for statistical purposes by Statistics New Zealand. Information supplied to Statistics New Zealand will be used for statistical purposes only and will be arranged to prevent particulars published about any person from being identifiable (except by the person who supplied the information), unless the person has agreed or publication identifying the person is unavoidable.

The Privacy Act 1993 provides that you may access or correct personal information about you held by the Charities Commission. If you wish to access or correct your personal information, please contact the Charities Commission, PO Box 8072, Wellington.

Request for information on register to be restricted from public access**Please note:**

- The Charities Commission may, under section 25 of the Charities Act 2005, prevent or restrict public access to information or documents if it considers it to be in the public interest to do so. Please note that this information or these documents will still be subject to requests under the Official Information Act 1982 that will be considered by the Charities Commission on a case-by-case basis.
- All requests to prevent or restrict public access to information or documents will be evaluated and you will be advised of the Charities Commission's decision.

Certification

I certify that the information in this form is correct, that I am authorised to give this notice, and where applicable I have completed the effective date of change sections of the form.

Signature of person completing this form

Full name of person completing this form

Date

Form 4
Annual return for charitable entity
Section 41, Charities Act 2005

Charitable entity details

- | | | | | |
|-----------------|--|---|-----------------|-----------------|
| 1 | Legal name of the charitable entity (if this is a change, file this form within 3 months of the effective date of this change and complete the effective date of change box). | [] | | |
| | Effective date of change | (day/month/year) | | |
| 2 | Charitable entity registration number. | [] | | |
| 3 | Former legal name of the charitable entity if the charitable entity's name has changed. | [] | | |
| 4 | Other name of the charitable entity (if this is a change, file this form within 3 months of the effective date of this change and complete the effective date of change box). | [] | | |
| | Effective date of change | (day/month/year) | | |
| 5 | Address for service for the charitable entity (if this is a change, file this form within 3 months of the effective date of this change and complete the effective date of change box). | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Postal address:</td> </tr> <tr> <td style="padding: 2px;">Street address:</td> </tr> </table> | Postal address: | Street address: |
| Postal address: | | | | |
| Street address: | | | | |
| | Effective date of change | (day/month/year) | | |
| 6 | End of financial year / balance date for the charitable entity (if this is a change, file this form within 3 months of the effective date of this change and complete the effective date of change box). | (day/month) | | |
| | Effective date of change | (day/month/year) | | |

Form 4—continued

7 Other details (optional).

Phone (day):
Fax:
Email:
Website:

Charitable purpose

Sectors

(If this is a change, file this form within 3 months of the effective date of this change and complete the effective date of change boxes.)

8 Please indicate the sectors in which the charitable entity operates by marking the *current* operations of the charitable entity in the boxes below. Please select as many boxes as needed.

- | | |
|--|---|
| <input type="checkbox"/> accommodation / housing | <input type="checkbox"/> sport / recreation |
| <input type="checkbox"/> education / training / research | <input type="checkbox"/> care / protection of animals |
| <input type="checkbox"/> health | <input type="checkbox"/> international activities |
| <input type="checkbox"/> environment / conservation | <input type="checkbox"/> economic development |
| <input type="checkbox"/> marae on reservation land | <input type="checkbox"/> fund-raising |
| <input type="checkbox"/> community development | <input type="checkbox"/> disability |
| <input type="checkbox"/> emergency / disaster relief | <input type="checkbox"/> promotion of volunteering |
| <input type="checkbox"/> social services | <input type="checkbox"/> other |
| <input type="checkbox"/> employment | |
| <input type="checkbox"/> religious activities | |
| <input type="checkbox"/> arts / culture / heritage | |

[]

Effective date of change

(day/month/year)

9 Please indicate the main sector of operation for the charitable entity.

[]

Effective date of change

(day/month/year)

Form 4—continued

Activities

(If this is a change, file this form within 3 months of the effective date of this change and complete the effective date of change boxes.)

- 10 Please indicate what the charitable entity does by marking the *current* activities of the charitable entity in the boxes below. Please select as many boxes as needed.

- | | |
|---|---|
| <input type="checkbox"/> makes grants / loans to individuals | <input type="checkbox"/> provides advice / information / advocacy |
| <input type="checkbox"/> makes grants / loans to organisations (including schools or other charities) | <input type="checkbox"/> sponsors / undertakes research |
| <input type="checkbox"/> provides other finance (eg, investment funds) | <input type="checkbox"/> acts as an umbrella / resource body |
| <input type="checkbox"/> provides human resources (eg, staff / volunteers) | <input type="checkbox"/> provides religious services / activities |
| <input type="checkbox"/> provides buildings / facilities / open space | <input type="checkbox"/> other (please state below) |
| <input type="checkbox"/> provides services (eg, care / counselling) | |

[]

Effective date of change

(day/month/year)

- 11 Please indicate the main activity of the charitable entity.

[]

Effective date of change

(day/month/year)

Beneficiaries

(If this is a change, file this form within 3 months of the effective date of this change and complete the effective date of change boxes.)

- 12 Please indicate who benefits from the charitable entity's activities by marking the *current* beneficiaries of the charitable entity in the boxes below. Please select as many boxes as needed.

- | | |
|---|---|
| <input type="checkbox"/> children / young people | <input type="checkbox"/> older people |
| <input type="checkbox"/> voluntary bodies other than charities | <input type="checkbox"/> people with disabilities |
| <input type="checkbox"/> animals | <input type="checkbox"/> general public |
| <input type="checkbox"/> people of a certain ethnic / racial origin | <input type="checkbox"/> migrants / refugees |
| <input type="checkbox"/> family / whanau | <input type="checkbox"/> other (please state below) |
| <input type="checkbox"/> religious groups | |
| <input type="checkbox"/> other charities | |

[]

Form 4—*continued*

- 13 Please indicate who benefits most from the charitable entity. []
- Effective date of change (day/month/year)

Areas of operation

- 14 Please indicate where the charitable entity operates by marking the *current* areas of operation of the charitable entity in the boxes below. Please select as many boxes as needed.

New Zealand

Nationwide

Or less than nationwide

- | | |
|--|--|
| <input type="checkbox"/> Northland | <input type="checkbox"/> Wellington–Wairarapa |
| <input type="checkbox"/> Auckland | <input type="checkbox"/> Nelson–Marlborough–Tasman |
| <input type="checkbox"/> Waikato | <input type="checkbox"/> West Coast |
| <input type="checkbox"/> Bay of Plenty | <input type="checkbox"/> Canterbury |
| <input type="checkbox"/> Gisborne | <input type="checkbox"/> Otago |
| <input type="checkbox"/> Hawke’s Bay | <input type="checkbox"/> Southland |
| <input type="checkbox"/> Taranaki | <input type="checkbox"/> Chatham Islands |
| <input type="checkbox"/> Manawatu–Wanganui | |

Overseas

- | | |
|----------------------------------|--|
| <input type="checkbox"/> Oceania | <input type="checkbox"/> Antarctica |
| <input type="checkbox"/> Asia | <input type="checkbox"/> South America |
| <input type="checkbox"/> Africa | <input type="checkbox"/> North America |
| <input type="checkbox"/> Europe | |

- 15 Identify the percentage of New Zealand-sourced funds that were spent overseas in the last financial year (or if the charitable entity has not been operating for a year, the percentage of New Zealand-sourced funds that the charitable entity intends to spend overseas in the upcoming financial year). []

Form 4—continued

Change to officers

- 16 Do you need to add any new officers of the charitable entity to the register?

Yes	<i>Please complete an officer certification form</i>
-----	--

- 17 Please provide details for each new officer of the charitable entity. This is to ensure that the Charities Commission can match up your officer certification forms with the officers you advise the Charities Commission of in this form. Please note that each new officer or someone on the officer's behalf must complete and sign an officer certification form.

Individual officer

Given or first name(s):	Surname or family name:
-------------------------	-------------------------

Body corporate

Name of body corporate:

- 18 Do any officers of the charitable entity need to be removed from the register? Please specify each individual or body corporate that is no longer an officer.

Full name of officer	Last date as an officer (day/month/year)

Rules

- 19 Have the charitable entity's rules changed since you last notified the Charities Commission?

Yes
No

If the charitable entity's rules have changed—

- file this form within 3 months of the effective date of this change; and
- please supply—
 - a copy of the amendment(s) to the charitable entity's rules; and
 - a copy of the minute of the meeting or other record specifying the decision and the effective date of the change.

Form 4—*continued***Your people**

Please provide approximate numbers if you do not know the exact numbers.

- 20 In an average week, how many people does the charitable entity employ?

Paid full time

Paid part time

- 21 In an average week, how many paid hours of work are worked in total by all employees?

- 22 In an average week, how many people work as volunteers for the charitable entity?

- 23 In an average week, how many volunteer hours are worked in total by all volunteers?

Form 4—continued

Financial information

Please attach a copy of the charitable entity’s financial accounts. If you have audited financial accounts, please attach those, if not, please attach what you do have.

24 What accounting method does the charitable entity use?

Cash
Accrual

25 Please fill in the financial information below. Enter “nil” if applicable.

Note: Please insert figures rounded to the closest thousand dollars.

Part 1: Statement of financial performance for the year ended
[day/month/year]

Gross income

Government grants / contracts	<input type="text"/>	
All other grants and sponsorship	<input type="text"/>	
Income from service provision / trading operations	<input type="text"/>	
Membership fees	<input type="text"/>	
Donations / koha	<input type="text"/>	
Bequests	<input type="text"/>	
New Zealand dividends	<input type="text"/>	
Other investment income	<input type="text"/>	
All other income	<input type="text"/>	
Total gross income		<input type="text"/>

Expenditure

Grants paid—within New Zealand	<input type="text"/>	
Grants paid—outside New Zealand	<input type="text"/>	
Salaries and wages	<input type="text"/>	
Depreciation	<input type="text"/>	
Interest paid	<input type="text"/>	
Cost of service provision (excluding salaries and wages)	<input type="text"/>	
Cost of trading operations (excluding salaries and wages)	<input type="text"/>	
All other expenditure	<input type="text"/>	
Total expenditure		<input type="text"/>
Net surplus / deficit for the year		<input type="text"/>

Form 4—continued

Part 2: Statement of financial performance as at [day/month/year]**Current assets**

Cash and bank balances

Inventory

All other short-term assets

All current assets**Non-current assets**

Land

Buildings

Computers and office equipment

All other fixed assets

Investments

All non-current assets**Total assets****Liabilities**

All current liabilities

All non-current liabilities

Total liabilities**Equity**

Endowment funds

Restricted purpose funds

General accumulated funds

Total equity**Total liabilities**

Form 4—*continued***Privacy and information use**

The information that you have provided in this form will be held and used by the Charities Commission to determine your ongoing eligibility for registration and to carry out its functions under the Charities Act 2005.

The Charities Act 2005 authorises the supply of information or documents held on the register of charitable entities to the Inland Revenue Department to assist in the carrying out of powers and functions under any of the Inland Revenue Acts.

The Statistics Act 1975 allows for the information, once collected, to be used for statistical purposes by Statistics New Zealand. Information supplied to Statistics New Zealand will be used for statistical purposes only and will be arranged to prevent particulars published about any person from being identifiable (except by the person who supplied the information), unless the person has agreed or publication identifying the person is unavoidable.

The Privacy Act 1993 provides that you may access or correct personal information about you held by the Charities Commission. If you wish to access or correct your personal information, please contact the Charities Commission, PO Box 8072, Wellington.

Request for information on register to be restricted from public access**Please note:**

- The Charities Commission may, under section 25 of the Charities Act 2005, prevent or restrict public access to information or documents if it considers it to be in the public interest to do so. Please note that this information or these documents will still be subject to requests under the Official Information Act 1982 that will be considered by the Charities Commission on a case-by-case basis.
- All requests to prevent or restrict public access to information or documents will be evaluated and you will be advised of the Charities Commission's decision.

Certification

I certify that the information in this annual return is correct and that I am authorised to complete this return and where applicable I have completed the effective date of change sections of the form.

Signature of person completing annual return

[]

Full name of person completing annual return

[]

Date

(day/month/year)

Form 5
Application by single entity for registration as charitable entity
Section 46, Charities Act 2005

Single entity details

1 Legal name of the single entity. []

2 Legal name of the parent entity. []

3 Other names the single entity is known by (if any). []

4 Address for service of the single entity. Postal address:
Street address:

5 Other details (optional). Phone (day):
Fax:
Email:
Website:

6 End of financial year / balance date for the single entity. (day/month)

7 Please list the names of all of the entities that form part of the single entity and their Inland Revenue Department (IRD) number (if applicable) and, if the entity is a registered charitable trust, an incorporated society, or a company, its Companies Office registration number.

Name of entity	Entity IRD number	Companies Office registration number

Form 5—continued

8 Do any of the entities covered by this application have charitable entity registration numbers?

Yes
No

Please list the name of the entity and its charitable entity registration number.

Name of entity	Charitable entity registration number

Charitable purpose

Sectors

9 Which of the following describe the sectors in which the single entity operates? Please select as many boxes as needed.

- | | |
|--|---|
| <input type="checkbox"/> accommodation / housing | <input type="checkbox"/> care / protection of animals |
| <input type="checkbox"/> education / training / research | <input type="checkbox"/> international activities |
| <input type="checkbox"/> health | <input type="checkbox"/> economic development |
| <input type="checkbox"/> environment / conservation | <input type="checkbox"/> fund-raising |
| <input type="checkbox"/> marae on reservation land | <input type="checkbox"/> disability |
| <input type="checkbox"/> community development | <input type="checkbox"/> promotion of volunteering |
| <input type="checkbox"/> emergency / disaster relief | <input type="checkbox"/> other |
| <input type="checkbox"/> social services | |
| <input type="checkbox"/> employment | |
| <input type="checkbox"/> religious activities | |
| <input type="checkbox"/> arts / culture / heritage | |
| <input type="checkbox"/> sport / recreation | |

[]

10 Which one of the above is the main sector of operation for the single entity?

[]

Form 5—*continued***Activities**

- 11 Which of the following activities describe what the single entity does?
Please select as many boxes as needed.

- | | |
|---|---|
| <input type="checkbox"/> makes grants / loans to individuals | <input type="checkbox"/> provides advice / information / advocacy |
| <input type="checkbox"/> makes grants / loans to organisations (including schools or other charities) | <input type="checkbox"/> sponsors / undertakes research |
| <input type="checkbox"/> provides other finance (eg, investment funds) | <input type="checkbox"/> acts as an umbrella / resource body |
| <input type="checkbox"/> provides human resources (eg, staff / volunteers) | <input type="checkbox"/> provides religious services / activities |
| <input type="checkbox"/> provides buildings / facilities / open space | <input type="checkbox"/> other (please state below) |
| <input type="checkbox"/> provides services (eg, care / counselling) | |

[]

- 12 Which one of the above is the main activity of the single entity?

[]

Beneficiaries

- 13 Who benefits from the single entity's activities? Please select as many boxes as needed.

- | | |
|---|---|
| <input type="checkbox"/> children / young people | <input type="checkbox"/> older people |
| <input type="checkbox"/> voluntary bodies other than charities | <input type="checkbox"/> people with disabilities |
| <input type="checkbox"/> animals | <input type="checkbox"/> general public |
| <input type="checkbox"/> people of a certain ethnic / racial origin | <input type="checkbox"/> migrants / refugees |
| <input type="checkbox"/> family / whanau | <input type="checkbox"/> other (please state below) |
| <input type="checkbox"/> religious groups | |
| <input type="checkbox"/> other charities | |

[]

- 14 Which one of the above is the main beneficiary of the single entity?

[]

Form 5—*continued***Sources of funds**

- 15 From which of the following sources does the single entity get or intend to get funds? Please select as many boxes as needed.

- | | |
|---|---|
| <input type="checkbox"/> government grants / contracts | <input type="checkbox"/> bequests |
| <input type="checkbox"/> income from service provision | <input type="checkbox"/> other investment income |
| <input type="checkbox"/> income from trading operations | <input type="checkbox"/> other sources (please state below) |
| <input type="checkbox"/> donations / koha | |
| <input type="checkbox"/> New Zealand dividends | |
| <input type="checkbox"/> any other grants and sponsorship | |
| <input type="checkbox"/> membership fees | |

[]

Areas of operation

- 16 Where does the single entity operate or intend to operate? Please select as many boxes as needed.

New Zealand

- Nationwide

Or less than nationwide

- | | |
|--|--|
| <input type="checkbox"/> Northland | <input type="checkbox"/> Wellington–Wairarapa |
| <input type="checkbox"/> Auckland | <input type="checkbox"/> Nelson–Marlborough–Tasman |
| <input type="checkbox"/> Waikato | <input type="checkbox"/> West Coast |
| <input type="checkbox"/> Bay of Plenty | <input type="checkbox"/> Canterbury |
| <input type="checkbox"/> Gisborne | <input type="checkbox"/> Otago |
| <input type="checkbox"/> Hawke's Bay | <input type="checkbox"/> Southland |
| <input type="checkbox"/> Taranaki | <input type="checkbox"/> Chatham Islands |
| <input type="checkbox"/> Manawatu–Wanganui | |

Overseas

- | | |
|----------------------------------|--|
| <input type="checkbox"/> Oceania | <input type="checkbox"/> Antarctica |
| <input type="checkbox"/> Asia | <input type="checkbox"/> South America |
| <input type="checkbox"/> Africa | <input type="checkbox"/> North America |
| <input type="checkbox"/> Europe | |

- 17 Identify the percentage of New Zealand-sourced funds that were spent overseas in the last financial year (or if the single entity has not been operating for a year, the percentage of New Zealand-sourced funds that the single entity intends to spend overseas in the upcoming financial year).

[]

Form 5—continued

Rules

18 Please supply a copy of the single entity’s rules including all amendments.

Privacy and information use

The information that you have provided in this form will be held and used by the Charities Commission to determine your eligibility for registration and to carry out its functions under the Charities Act 2005.

The Charities Act 2005 authorises the supply of information or documents held on the register of charitable entities to the Inland Revenue Department to assist in the carrying out of powers and functions under any of the Inland Revenue Acts.

The Statistics Act 1975 allows for the information, once collected, to be used for statistical purposes by Statistics New Zealand. Information supplied to Statistics New Zealand will be used for statistical purposes only and will be arranged to prevent particulars published about any person from being identifiable (except by the person who supplied the information), unless the person has agreed or publication identifying the person is unavoidable.

The Privacy Act 1993 provides that you may access or correct personal information about you held by the Charities Commission. If you wish to access or correct your personal information, please contact the Charities Commission, PO Box 8072, Wellington.

Request for information on register to be restricted from public access

Please note:

- The Charities Commission may, under section 25 of the Charities Act 2005, prevent or restrict public access to information or documents if it considers it to be in the public interest to do so. Please note that this information or these documents will still be subject to requests under the Official Information Act 1982 that will be considered by the Charities Commission on a case-by-case basis.
- All requests to prevent or restrict public access to information or documents will be evaluated and you will be advised of the Charities Commission’s decision.

Certification

I certify that the information in this application form for registration as a single entity is correct and that I am authorised to make this application.

Signature of officer

[]

Full name of officer

[]

Date

(day/month/year)

Form 6
Notification of changes to charitable entity that is
single entity
Section 40, Charities Act 2005

Single entity details

- 1 Legal name of the single entity.
- 2 Legal name of the parent entity.
- 3 Single entity registration number.

Changes to single entity's details

- 4 New legal name of the single entity.
- Effective date of change (day/month/year)
- 5 New other name of the single entity.
- Effective date of change (day/month/year)
- 6 New name of the parent entity.
- Effective date of change (day/month/year)
- 7 New address for service for the single entity. Postal address:
 Street address:
- Effective date of change (day/month/year)

Form 6—continued

8 New end of financial year / balance date for the single entity. (day/month)

Effective date of change (day/month/year)

9 Changes to other details (optional). Phone (day): Fax: Email: Website:

Changes to charitable purpose

Sectors

10 If your sectors of operation have changed, please indicate what you do now. Please select as many boxes as needed.

- accommodation / housing, education / training / research, health, environment / conservation, marae on reservation land, community development, emergency / disaster relief, social services, employment, religious activities, arts / culture / heritage, sport / recreation, care / protection of animals, international activities, economic development, fund-raising, disability, promotion of volunteering, other (please state below)

Effective date of change (day/month/year)

11 If your main sector of operation has changed, please indicate what it is now.

Effective date of change (day/month/year)

Form 6—continued

Activities

- 12 If your activities have changed, please indicate what you do now. Please select as many boxes as needed.

- | | |
|---|---|
| <input type="checkbox"/> makes grants / loans to individuals | <input type="checkbox"/> provides advice / information / advocacy |
| <input type="checkbox"/> makes grants / loans to organisations (including schools or other charities) | <input type="checkbox"/> sponsors / undertakes research |
| <input type="checkbox"/> provides other finance (eg, investment funds) | <input type="checkbox"/> acts as an umbrella / resource body |
| <input type="checkbox"/> provides human resources (eg, staff / volunteers) | <input type="checkbox"/> provides religious services / activities |
| <input type="checkbox"/> provides buildings / facilities / open space | <input type="checkbox"/> other (please state below) |
| <input type="checkbox"/> provides services (eg, care / counselling) | |

[]

Effective date of change

(day/month/year)

- 13 If your main activity has changed, please indicate what it is now.

[]

Effective date of change

(day/month/year)

Beneficiaries

- 14 If your beneficiaries have changed, please indicate who they are now. Please select as many boxes as needed.

- | | |
|---|---|
| <input type="checkbox"/> children / young people | <input type="checkbox"/> older people |
| <input type="checkbox"/> voluntary bodies other than charities | <input type="checkbox"/> people with disabilities |
| <input type="checkbox"/> animals | <input type="checkbox"/> general public |
| <input type="checkbox"/> people of a certain ethnic / racial origin | <input type="checkbox"/> migrants / refugees |
| <input type="checkbox"/> family / whanau | <input type="checkbox"/> other (please state below) |
| <input type="checkbox"/> religious groups | |
| <input type="checkbox"/> other charities | |

[]

Effective date of change

(day/month/year)

Form 6—continued

- 15 If your main beneficiary has changed, please indicate who it is now.

[]

Effective date of change

(day/month/year)

Areas of operation

- 16 If your areas of operation have changed, please indicate what they are now. Please select as many boxes as needed.

New Zealand

Nationwide

Or less than nationwide

Northland

Wellington–Wairarapa

Auckland

Nelson–Marlborough–Tasman

Waikato

West Coast

Bay of Plenty

Canterbury

Gisborne

Otago

Hawke's Bay

Southland

Taranaki

Chatham Islands

Manawatu–Wanganui

Overseas

Oceania

Antarctica

Asia

South America

Africa

North America

Europe

Effective date of change

(day/month/year)

- 17 Identify the percentage of New Zealand-sourced funds that were spent overseas in the last financial year (or if the single entity has not been operating for a year, the percentage of New Zealand-sourced funds that the single entity intends to spend overseas in the upcoming financial year).

[]

Form 6—*continued***Change to officers**

- 18 Do you need to add any new officers of the single entity to the register?

Yes	<i>Please complete an officer certification form</i>
-----	--

- 19 Please provide details for each officer of the single entity. This is to ensure that the Charities Commission can match up your officer certification forms with the officers you advise in this form. Please note that each officer or someone on the officer's behalf must complete and sign an officer certification form.

Individual officer

Given or first name:	Surname or family name:
----------------------	-------------------------

Body corporate

Name of body corporate:

- 20 Do any officers of the single entity need to be removed from the register? Please specify each individual or body corporate that is no longer an officer.

Full name of officer	Last date as an officer (day/month/year)

Rules

- 21 Have the single entity's rules changed since you last notified the Charities Commission?

Yes
No

If the single entity's rules have changed, please supply—

- a copy of the amendment(s) to the single entity's rules; and
- a copy of the minute of the meeting or other record specifying the decision and the effective date of the change.

Form 6—continued

Privacy and information use

The information that you have provided in this form will be held and used by the Charities Commission to determine your ongoing eligibility for registration and to carry out its functions under the Charities Act 2005.

The Charities Act 2005 authorises the supply of information or documents held on the register of charitable entities to the Inland Revenue Department to assist in the carrying out of powers and functions under any of the Inland Revenue Acts.

The Statistics Act 1975 allows for the information, once collected, to be used for statistical purposes by Statistics New Zealand. Information supplied to Statistics New Zealand will be used for statistical purposes only and will be arranged to prevent particulars published about any person from being identifiable (except by the person who supplied the information), unless the person has agreed or publication identifying the person is unavoidable.

The Privacy Act 1993 provides that you may access or correct personal information about you held by the Charities Commission. If you wish to access or correct your personal information, please contact the Charities Commission, PO Box 8072, Wellington.

Request for information on register to be restricted from public access

Please note:

- The Charities Commission may, under section 25 of the Charities Act 2005, prevent or restrict public access to information or documents if it considers it to be in the public interest to do so. Please note that this information or these documents will still be subject to requests under the Official Information Act 1982 that will be considered by the Charities Commission on a case-by-case basis.
- All requests to prevent or restrict public access to information or documents will be evaluated and you will be advised of the Charities Commission’s decision.

Certification

I certify that the information in this form is correct, that I am authorised to give this notice, and that I have completed the effective date of change sections of this form.

Signature of person completing this form

[]

Full name of person completing this form

[]

Date

(day/month/year)

Form 7

Annual return for charitable entity that is single entity and
for charitable entities forming part of single entity

Section 41, Charities Act 2005

Part A—Single entity

Single entity details

- 1 Legal name of the single entity.
- 2 Single entity registration number.
- 3 Legal name of the parent entity.
- 4 Parent entity registration number.

Charitable purpose

Sectors

- 5 Please indicate the sectors in which the single entity operates by marking the *current* operations of the single entity in the boxes below. Please select as many boxes as needed.

- | | |
|--|---|
| <input type="checkbox"/> accommodation / housing | <input type="checkbox"/> sport / recreation |
| <input type="checkbox"/> education / training / research | <input type="checkbox"/> care / protection of animals |
| <input type="checkbox"/> health | <input type="checkbox"/> international activities |
| <input type="checkbox"/> environment / conservation | <input type="checkbox"/> economic development |
| <input type="checkbox"/> marae on reservation land | <input type="checkbox"/> fund-raising |
| <input type="checkbox"/> community development | <input type="checkbox"/> disability |
| <input type="checkbox"/> emergency / disaster relief | <input type="checkbox"/> promotion of volunteering |
| <input type="checkbox"/> social services | <input type="checkbox"/> other (please state below) |
| <input type="checkbox"/> employment | |
| <input type="checkbox"/> religious activities | <input type="text" value=" []"/> |
| <input type="checkbox"/> arts / culture / heritage | |

- 6 Please indicate the main sector of operation for the single entity?

Form 7—*continued***Activities**

7 Please indicate what the single entity does by marking the *current* activities of the single entity in the boxes below. Please select as many boxes as needed.

- | | |
|---|---|
| <input type="checkbox"/> makes grants / loans to individuals | <input type="checkbox"/> provides advice / information / advocacy |
| <input type="checkbox"/> makes grants / loans to organisations (including schools or other charities) | <input type="checkbox"/> sponsors / undertakes research |
| <input type="checkbox"/> provides other finance (eg, investment funds) | <input type="checkbox"/> acts as an umbrella / resource body |
| <input type="checkbox"/> provides human resources (eg, staff / volunteers) | <input type="checkbox"/> provides religious services / activities |
| <input type="checkbox"/> provides buildings / facilities / open space | <input type="checkbox"/> other (please state below) |
| <input type="checkbox"/> provides services (eg, care / counselling) | |

[]

8 Please indicate the main activity of the single entity?

[]

Beneficiaries

9 Please indicate who benefits from the activities of the single entity by marking the *current* beneficiaries of the single entity in the boxes below. Please select as many boxes as needed.

- | | |
|--|---|
| <input type="checkbox"/> children / young people | <input type="checkbox"/> older people |
| <input type="checkbox"/> voluntary bodies other than charities | <input type="checkbox"/> people with disabilities |
| <input type="checkbox"/> animals | <input type="checkbox"/> general public |
| <input type="checkbox"/> people of a certain ethnic or racial origin | <input type="checkbox"/> migrants / refugees |
| <input type="checkbox"/> family / whanau | <input type="checkbox"/> other (please state below) |
| <input type="checkbox"/> religious groups | |
| <input type="checkbox"/> other charities | |

[]

10 Please indicate who benefits most from the single entity?

[]

Form 7—*continued***Areas of operation**

- 11 Please indicate where the single entity operates by marking the *current* areas of operation of the single entity in the boxes below. Please select as many boxes as needed.

New Zealand

Nationwide

Or less than nationwide

Northland

Wellington–Wairarapa

Auckland

Nelson–Marlborough–Tasman

Waikato

West Coast

Bay of Plenty

Canterbury

Gisborne

Otago

Hawke's Bay

Southland

Taranaki

Chatham Islands

Manawatu–Wanganui

Overseas

Oceania

Antarctica

Asia

South America

Africa

North America

Europe

- 12 Identify the percentage of New Zealand-sourced funds that were spent overseas in the last financial year (or if the single entity has not been operating for a year, the percentage of New Zealand-sourced funds that the single entity intends to spend overseas in the upcoming financial year).

[]

end of Part A**Part B—Charitable entity forming part of single entity**

- 13 Legal name of the charitable entity.

[]

- 14 Charitable entity registration number.

[]

end of Part B

Form 7—*continued***Part C—Financial information****Your people**

Please provide approximate numbers if you do not know the exact numbers.

- 15 In an average week, how many people does the charitable entity employ?

Paid full time

Paid part time

- 16 In an average week, how many paid hours of work are worked in total by all employees?

- 17 In an average week, how many people work as volunteers for the charitable entity?

- 18 In an average week, how many volunteer hours are worked in total by all volunteers?

Form 7—continued

Financial information

Please attach a copy of the charitable entity's financial accounts. If you have audited financial accounts, please attach those, if not, please attach what you do have.

19 What accounting method does the charitable entity use?

Cash
Accrual

20 Please fill in the financial information below. Enter "nil" if applicable.

Note: Please insert figures rounded to the closest thousand dollars.

Part 1: Statement of financial performance for the year ended
[day/month/year]

Gross income

Government grants / contracts	<input type="text"/>	
All other grants and sponsorship	<input type="text"/>	
Income from service provision / trading operations	<input type="text"/>	
Membership fees	<input type="text"/>	
Donations / koha	<input type="text"/>	
Bequests	<input type="text"/>	
New Zealand dividends	<input type="text"/>	
Other investment income	<input type="text"/>	
All other income	<input type="text"/>	
Total gross income		<input type="text"/>

Expenditure

Grants paid—within New Zealand	<input type="text"/>	
Grants paid—outside New Zealand	<input type="text"/>	
Salaries and wages	<input type="text"/>	
Depreciation	<input type="text"/>	
Interest paid	<input type="text"/>	
Cost of service provision (excluding salaries and wages)	<input type="text"/>	
Cost of trading operations (excluding salaries and wages)	<input type="text"/>	
All other expenditure	<input type="text"/>	
Total expenditure		<input type="text"/>
Net surplus / deficit for the year		<input type="text"/>

Form 7—continued

Part 2: Statement of financial performance as at [day/month/year]

Current assets

Cash and bank balances	<input type="text"/>	
Inventory	<input type="text"/>	
All other short-term assets	<input type="text"/>	
All current assets		<input type="text"/>

Non-current assets

Land	<input type="text"/>	
Buildings	<input type="text"/>	
Computers and office equipment	<input type="text"/>	
All other fixed assets	<input type="text"/>	
Investments	<input type="text"/>	
All non-current assets		<input type="text"/>
Total assets		<input type="text"/>

Liabilities

All current liabilities	<input type="text"/>	
All non-current liabilities	<input type="text"/>	
Total liabilities		<input type="text"/>

Equity

Endowment funds	<input type="text"/>	
Restricted purpose funds	<input type="text"/>	
General accumulated funds	<input type="text"/>	
Total equity		<input type="text"/>
Total liabilities		<input type="text"/>

Form 7—*continued***Privacy and information use**

The information that you have provided in this form will be held and used by the Charities Commission to determine your ongoing eligibility for registration and to carry out its functions under the Charities Act 2005.

The Charities Act 2005 authorises the supply of information or documents held on the register of charitable entities to the Inland Revenue Department to assist in the carrying out of powers and functions under any of the Inland Revenue Acts.

The Statistics Act 1975 allows for the information, once collected, to be used for statistical purposes by Statistics New Zealand. Information supplied to Statistics New Zealand will be used for statistical purposes only and will be arranged to prevent particulars published about any person from being identifiable (except by the person who supplied the information), unless the person has agreed or publication identifying the person is unavoidable.

The Privacy Act 1993 provides that you may access or correct personal information about you held by the Charities Commission. If you wish to access or correct your personal information, please contact the Charities Commission, PO Box 8072, Wellington.

Request for information on register to be restricted from public access**Please note:**

- The Charities Commission may, under section 25 of the Charities Act 2005, restrict public access to information or documents if it considers it to be in the public interest to do so. Please note that this information or these documents will still be subject to requests under the Official Information Act 1982 that will be considered by the Charities Commission on a case-by-case basis.
- All requests to prevent or restrict public access to information or documents will be evaluated and you will be advised of the Charities Commission's decision.

Certification

I certify that the information in this annual return is correct and that I am authorised to complete this return.

Signature of person completing annual return

[]

Full name of person completing annual return

[]

Date

(day/month/year)

Martin Bell,
for Clerk of the Executive Council.

Explanatory note

This note is not part of the regulations, but is intended to indicate their general effect.

These regulations, which come into force on 1 November 2006, set out the forms to be used, and the fees to be paid, by a charitable entity or a charitable entity that is a single entity under the Charities Act 2005. They also set out—

- additional search criteria for searching the register of charitable entities; and
- the administrative penalties to be paid by a charitable entity that fails to send or deliver a notice or annual return within the relevant time frames prescribed by the Act.

Issued under the authority of the Acts and Regulations Publication Act 1989.

Date of notification in *Gazette*: 28 September 2006.

These regulations are administered by the Department of Internal Affairs.
