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Form 990-EZ

Short Form Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year may use this form

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

end of the year may use this form

The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

Charme of organization Passes Charme of organization	A	For the 2007	calendar year, or tax year beginning 04/01, 2007, and	ending	_	03/31/2008
Section 507(c) Disparation type (check only one) X Str(c) (3) (insert no.) 4947(a)(1) or 527 Stordies for street address) Roomsaute E Tolephone number (insert no.) (insert no.	В	Check if applicable	Please C Name of organization		D Employer i	dentification number
Section 5016(3) Organization and activate for 10 Box, if mail is not delivered to street address) Room.natus Endeptive number	í ſ	Address	use IRS INTUEDED TO A MODEUR DE TOTOL COLLIMETA			
None	,		label or		98-052	1018
Permitter Section Strict() Committer containing and ZP = 4 F General Committer Committee	Ţ	Initial return	type Number and street (or P O box, if mail is not delivered to street address) Room	/suite		
Contributions City or town, state or country, and ZiP + 4 F Group Everaprior City or town, state or country, and ZiP + 4 F Group Everaprior City or town, state or country and ZiP + 4 F City or town, state or country and ZiP + 4 F City or town, state or country and ZiP + 4 City or town, state or country and ZiP + 4 City or town, state or country and ZiP + 4 City or town, state or country and ZiP + 4 City or town, state or country and ZiP + 4 City or town, state or country and ZiP + 4 City or town, state or country and ZiP + 4 City or town, state or country and ZiP + 4 City or town, state or country and ZiP + 4 City or town, state or country and ZiP + 4 City or town, state or country and ZiP + 4 City or town, state or country and ZiP + 4 City or town, state or country and ZiP + 4 City or town, state or country and ZiP + 4 City or town, state or country and ZiP + 4 City or town, state or country and ZiP + 4 City or town, state or country and ZiP + 4 City or	<u>^</u>	⊣	I C/O WILLIAM H JOHNSON, 1616 CORNWALL AVENUE, P O BOX 2/88 I 2/1	9	(360) 7	33-3300
Section 5016/(3) organization and 4917(1) nonexempt chantable trusts must attach a completed Schedule A (Form 990 or 990-EZ) Website: ► N/A			Specific City or town, state or country and ZIP + 4			
Section 501(c)(3) organizations and 4947(a)(1) nonexempt chantable trists must attach a completed Schedule A (Form 990 or 990-E2) Website: ► N/A 1 Website: ► N/A 3 Organization type (check only one) - x 501(c)(3) - 4 (insert no)	. 🗀	Application	A		•	
Website: ► N/A Some process of the process of				G Accounti	ing method	Cash x Accrual
Website: ► N/A	3		a completed Schedule A (Form 990 or 990-EZ)	Other (sp	pecify) ▶	_
Second Program Service revenue including government fees and contracts Second Program service revenue including government fees and contracts Second Program service revenue including government fees and contracts Second Program service revenue including government fees and contracts Second Program service revenue including government fees and contracts Second Program service revenue including government fees and contracts Second Program service revenue including government fees and contracts Second Program service revenue including government fees and contracts Second Program service revenue including government fees and contracts Second Program service revenue including government fees and contracts Second Program service revenue including government fees and contracts Second Program service revenue including government fees and contracts Second Program service revenue including government fees and contracts Second Program service revenue including services and senting services and services and senting services and senting services and senting services and services and senting services and senting services and senting services and services servi	-					rganization
Somewhaten type (check only one) X 501(c) (3) ★ (neet no.) 4947(a)(1) or 527 Schedule B (Form 990. 990-EZ, or 990-EZ, or 990-EZ) K C Check	<u> </u>	Website: ▶	N/A	is not rec	quired to attach	- 1
Keck	=			Schedule	B (Form 990,	990-EZ, or 990-PF)
Section Sec	i			ts are norma	ally not more th	nan \$25,000 A return
None Part Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 55 of the instructions.)			111, 11		,	
Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 55 of the instructions.) 1)-EZ ▶	- s	NONE
1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5 a Gross amount from sale of assets other than inventory 5 b Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory Subtract line 5b from line 5a (attach schedule) 5 B Cost or other basis and activities (attach schedule) if any amount is from gaming, check here a Gross revenue (not including \$ of contributions reported on line 1) 5 Less cost or goods sold c Net income or (loss) from special events and activities (attach schedule) if any amount is from line 6a 5 Less cost of goods sold c Gross profit or (loss) from special events and activities (attach schedule) 6 Less cost of goods sold c Gross profit or (loss) from special events and activities (attach schedule) 7 To 8 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, land** 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, land** 10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to of for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe) 17 Total expenses. Add lines 10 through 16 18 Excess or (deficit) for the year Subtract line 17 from line 9 19 None 19 None tassets or fund balances at leagning of year (from line 9.) 10 Cliher expenses (describe) 11 Cliher expenses (describe) 12 Cosh, savings, and investments. STMT. 1 None 19 None 20 Cher expenses (describe) 21 Cliher assets of fund balances (attach explanation). 22 Cash, savings, and investments. STMT. 1 None 23 Land and buildings 24 Cliher assets of fund balances (attach explanation). 25 None 26 Total liabilities (describe) 26 Total liabilities (describe) 27 None 28 None 29 None 20 None 20 None 21 None 20 None 21 None						
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					+ +	
				NONE	[[27]	

orm	990-EZ (2007)			9	8-052101	8	F	age 2
Pa	rt Statement of Program Service Accomplishmen	nts (See page 60 of t	he instructions)		•	enses		
Nha	at is the organization's primary exempt purpose? UNIVERSITY I	DONATIONS			(Required and (4)			
Des	cribe what was achieved in carrying out the organization's exen	npt purposes. In a clear	and concise manne	er,	and 4947	(a)(1) t	rusts,	
desc	cribe the services provided, the number of persons benefited, or ot	ther relevant information f	for each program tit	e	optional for	others)		
28								
	(Grants \$) If this amount includes	foreign grants, check here	<u> </u>	2	8a			NONE
29								
	(Grants \$) If this amount includes	foreign grants, check here	· · · · · · >	2	9a			NONE
30								
	(Grants \$) If this amount includes	foreign grants, check here	• • • • • • • ▶ │	3	0a			NONE
31	Other program services (attach schedule)			<u></u>				
	(foreign grants, check here		3	1a			NONE
	Total program service expenses. Add lines 28a through 31a				32			<u>NONE</u>
Pa	rt IV List of Officers, Directors, Trustees, and Key Employ	yees (List each one even	if not compensated	See pa	age 61 of the in	struction	s)	
	(A) None and address	(B) Title and average	(C) Compensation		Contributions to ee benefit plans &		xpens	
	(A) Name and address	hours per week devoted to position	(If not paid, enter -0)		ed compensation	other a	unt ai	
SE	E STATEMENT 2		-0-		-0-			0
						····-		
					Ì			
	rt V Other Information (Note the statement requirem						Yes	No
33	Did the organization make a change in its activities or r			' attac	ch a	1		
	detailed description of each change					33		<u>X</u>
34	Were any changes made to the organizing or governing		ported to the IRS	? † "	Yes,"			
_	attach a conformed copy of the changes			• • • . •		34	*	<u> X</u>
35	If the organization had income from business activities, such a	•		ng oth	ers), but not			
	reported on Form 990-T, attach a statement explaining your reason	· -					/	
•	a Did the organization have unrelated business gross incom	ne or \$1,000 or more	e or buss(e) notic	e, rep	porting, and			
	proxy tax requirements?					35a		<u>X</u>
)) C	of "Yes," has it filed a tax return on Form 990-1 for this year?				" attach -	35b		X
0	Was there a liquidation, dissolution, termination, or sub-							
. 7	statement			• • • •		36		<u> </u>
	a Enter amount of political expenditures, direct or indirect, a	so described in the ins	uctions ►[37a]		NON			
ا .	Did the organization file Form 1120-POL for this year? Did the organization borrow from, or make any loans to	any officer direct	truston on least	· · · ·	00 05 1105	37b		<u> </u>
90 8						20-		-
	any such loans made in a prior year and still unpaid at the start of t		1 1			38a		<u>X</u>
	off "Yes," attach the schedule specified in the line 38 in							
20	involved		38b			-		
39	501(c)(7) organizations Enter							
	a Initiation fees and capital contributions included on line 9 Gross receipts, included on line 9, for public use of club facilities					-		
	Gross receipts, included on line 9, for public use of dub facilities		39b			orm 990)-F7	(2007)
					r	いい フラし		(2001)

V7X 1P4

Form 990-EZ (2007)

VANCOUVER, BC,

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.)

MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization UNIVERSITY OF NORTHERN BRITISH COLUMBIA

Employer identification number

FOUNDATION U.S.					0521018
Part I Compensation of the Five High (See page 1 of the instructions. List	est Paid Employe t each one. If there a	es O	ther Than Off ne, enter "None	e.")	ind Trustees
(a) Name and address of each employee paid more than \$50,000	(b) Title and average her week devoted to po		(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE					
Total number of other employees paid over \$50,000	NONE				
Part II-A Compensation of the Five High (See page 2 of the instructions. Lis	est Paid Independ				
(a) Name and address of each independent contractor p	aid more than \$50,000		(b) Type of se	vice (c) Compensation
NONE					
Total number of others receiving over \$50,000 for professional services	NONE				
Part II-B Compensation of the Five High (List each contractor who performs firms If there are none, enter "Non	nest Paid Indepen	an pro	ofessional service		
(a) Name and address of each independent contractor pa	nd more than \$50,000		(b) Type of se	vice (c) Compensation
NONE					
Total number of other contractors receiving over		<u> </u>			

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2007

\$50,000 for other services

COILC	30 0321010	<u> </u>	
Pa	Statements About Activities (See page 2 of the instructions.)	Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)		х
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		
а	Sale, exchange, or leasing of property?		x
b	Lending of money or other extension of credit?		x
С	Furnishing of goods, services, or facilities?		x
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	1	X
е	Transfer of any part of its income or assets?	-	X
3 a	Did the organization make grants for scholarships, fellowships, student loans, etc? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments)		<u>x</u>
b	Did the organization have a section 403(b) annuity plan for its employees?		x_
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		x
đ	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	1	x_
4 a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete		
	lines 4f and 4g		X
b	Did the organization make any taxable distributions under section 4966?	_	
C	Did the organization make a distribution to a donor, donor advisor, or related person?		
d	Enter the total number or donor advised funds owned at the end of the tax year		
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year		
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the rights to provide advice on the distribution or investment of amounts in such unds or accounts		NONI
9	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year		NON

Schedule A (Form 990 or 990-EZ) 2007

Part IV	Reason for Non-Private Fo	undation Statu	is (See pages 4 thr	ough 8 of the	e instructions.	.)
l certify th	at the organization is not a private foundati	on because it is (Plea	ase check only ONE appl	licable box)		
5	A church, convention of churches, or ass	ociation of churches	Section 170(b)(1)(A)(i)			
6	A school Section 170(b)(1)(A)(ii) (Also co	omplete Part V)				
7	A hospital or a cooperative hospital service	ce organization Secti	on 170(b)(1)(A)(III)			
8	A federal, state, or local government or g	overnmental unit Sec	ction 170(b)(1)(A)(v)			
9 🗌	A medical research organization opera and state	ted in conjunction	with a hospital Section	on 170(b)(1)(A)(III) Enter the	hospital's name, city,
10	An organization operated for the benefit (Also complete the Support Schedule in F	-	niversity owned or oper	rated by a gov	ernmental unit	Section 170(b)(1)(A)(iv)
11a X	An organization that normally receives 170(b)(1)(A)(vi) (Also complete the Supp		·	overnmental ur	nit or from the	general public Section
11b	A community trust Section 170(b)(1)(A)(vi) (Also complete the	e Support Schedule ın F	Part IV-A.)		
12	An organization that normally receives (1 activities related to its charitable, etc., full investment income and unrelated busines 1975. See section 509(a)(2). (Also complete	nctions - subject to s taxable income (le	certain exceptions, and ss section 511 tax) from	(2) no more t	han 33 1/3% c	of its support from gross
13	An organization that is not controlled requirements of section 509(a)(3) Check to				managers) and	d otherwise meets the
	Type I Type II	Type III - Fur	nctionally Integrated	Type III -	Other	
	Provide the following information	about the supported	organizations. (See pag	je 8 of the instru	uctions)	
Na	(a) me(s) of supported organization(s)	(b) Employer Identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	Is the s organizat the su organi	d) upported ion listed in pporting zation's documents?	(e) Amount of support
				Yes	No	
Total · ·					▶	
14	An organization organized and operated to	restion public safet	iy section sus(a)(4) (Se	e page o or the l	กรแบบแบทร)	

Schedule A (Form 990 or 990-EZ) 2007

Not	e: You may use the worksheet in the instruction	ons for converting fr	om the accrual to t	he cash method of	accounting	
Cal	endar year (or fiscal year beginning ın)	(a) 2006	(b) 2005_	(c) 2004	(d) 2003	(e) Total
15	Gifts, grants, and contributions received (Do	ļ	-			
	not include unusual grants See line 28)					
16	Membership fees received					
17	Gross receipts from admissions, merchandise					
	sold or services performed, or furnishing of					
	facilities in any activity that is related to the					
	organization's charitable, etc. purpose					
18	Gross income from interest, dividends,					
	amounts received from payments on securities				İ	
	loans (section 512(a)(5)), rents, royalties, income					
	from similar sources, and unrelated business					
	taxable income (less section 511 taxes) from					-
	businesses acquired by the organization after					
40	June 30, 1975					
19						
	not included in line 18					
20	Tax revenues levied for the organization's benefit					
	and either paid to it or expended on its					
	behalf					
21	The value of services or facilities furnished to					
	the organization by a governmental unit					
	without charge Do not include the value of					
	services or facilities generally furnished to the					
	public without charge					
22	Other income Attach a schedule Do not			1		
	include gain or (loss) from sale of capital assets					
23	Total of lines 15 through 22					
24	Line 23 minus line 17					
25	Enter 1% of line 23				<u> </u>	_
26	Organizations described on lines 10 or 11: a	Enter 2% of amount	ın column (e), line 24	4	▶ 26	a
t	Prepare a list for your records to show the i	name of and amou	unt contributed by	each person (other	er than a	ì
	governmental unit or publicly supported organ	•	_	-		
	amount shown in line 26a Do not file this li					b
C	Total support for section 509(a)(1) test. Enter line 24	i, column (e)			▶ 26	С
c	Add Amounts from column (e) for lines 18					
	22	26	6b		▶ 26	d
e	Public support (line 26c minus line 26d total)				▶ 26	е
	Public support percentage (line 26e (numerator) of					
27	Organizations described on line 12: a For person," prepare a list for your records to she					
	Do not file this list with your return. Enter the sum			received in each	year from, each	uisquaimed person
	NOT APPLICABLE		•			
	(2006) (2005)		(2004)		(2003) _	
b	For any amount included in line 17 that was r					
	show the name of, and amount received for eac	h year, that was mo	ore than the larger	of (1) the amount	on line 25 for th	e year or (2) \$5,000
	(Include in the list organizations described in line the difference between the amount received an					
	amounts) for each year	to the larger amou	in described in (1)) Or (2), enter the	Sum of these u	merchees (the excess
	(2006) (2005)		(2004)		(2003)	
	, , , , , , , , , , , , , , ,					
С	Add Amounts from column (e) for lines 15	1/	6			
	Add Amounts from column (e) for lines 15 20	2	1		▶ 27	·c
d	Add Line 27a total	and line 27b total			▶ 27	d
e	Public support (line 27c total minus line 27d total)				▶ 27	e
f	Total support for section 509(a)(2) test Enter amou					
g	Public support percentage (line 27e (numerator)					g %
h	Investment income percentage (line 18, column (
	Unusual Grants: For an organization describe	ed in line 10, 11,	or 12 that rec	eived any unusual	grants during	2003 through 2006,
	prepare a list for your records to show, for description of the nature of the grant Do not file thi	each year, the na	ame of the contrib	outor, the date an	d amount of the	e grant, and a brief

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Pai	Private School Questionnaire (See page 9 of the instructions.) NOT APPLIC (To be completed ONLY by schools that checked the box on line 6 in Part IV)	ABL	<u> </u>	
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,		Yes	No
	other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its			
	brochures, catalogues, and other written communications with the public dealing with student admissions,			
	programs, and scholarships?	30		-
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during			Ì
	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31	l	1
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement.)	<u> </u>		
	Too, please describe, if the, please explain (if you need more opade, attach a separate statement.)			
		Ì		1
			ļ	
32	Does the organization maintain the following		Ì	
	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		ļ
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory			
	basis? Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	32b		
С		32c		
d	with student admissions, programs, and scholarships? Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
u	object of all material according the organization of on its behalf to solicit contributions.	<u> </u>		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	33a		
h	Admissions policies?	33b		
U	Admissions policies?	330		
С	Employment of faculty or administrative staff?	33c		[
_				
d	Scholarships or other financial assistance?	33d		
е	Educational policies?	33e	_	
f	Use of facilities?	33f		ļ
_	Athletic programs?	22-	}	ŀ
g	Athletic programs?	33g		
h	Other extracurricular activities?	33 <u>h</u>		1
		00,,		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	ĺ	1	
	Dana the annual transfer and a second a second and a second a second and a second a			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
h	Has the organization's right to such aid ever been revoked or suspended?	34b		
a	Has the organization's right to such aid ever been revoked or suspended?  If you answered "Yes" to either 34a or b, please explain using an attached statement	240	1	$\vdash$
	y = 2 - 1.00 1.00 1.00 0.10 0.10 0.10 product configuration distribution			
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Rev Proc 75-50, 1975-2 CB 587, covering racial nondiscrimination? If "No," attach an explanation	35	1	

Pa			ting Public Charities eligible organization					זממי	∴ <del>n</del>
Che	<del></del>	zation belongs to an affil							ol" provisions apply
<u> </u>	L	imits on Lobbying	Expenditures	· · · · · ·		(8	a) d group		(b) To be completed for all electing
	<u> </u>		s amounts paid or incurr	<u> </u>				_	organizations
36	Total lobbying expendit				36				
37	Total lobbying expendit	tures to influence a le	gislative body (direct lo	obbying)	37			_	
38	Total lobbying expendit				38 39			_	
39 Other exempt purpose expenditures								+	
40 Total exempt purpose expenditures (add lines 38 and 39) 41 Lobbying nontaxable amount Enter the amount from the following table -								+	
41	If the amount on line 4		bbying nontaxable am						
	Not over \$500,000		, ,						
	Over \$500,000 but not over								
	Over \$1,000,000 but not over				41				
	Over \$1,500,000 but not over								
	Over \$17,000,000								
42		amount (enter 25% o	f line 41)		42				
43	Subtract line 42 from li				43				-
44	Subtract line 41 from I	ne 38. Enter -0- if line	41 is more than line 3	8	44				
_	Caution: If there is an								<del></del>
			Averaging Period l						
	(Some organizati		ion 501(h) election do r					ins b	elow
		See the instruction	ons for lines 45 through	1 50 on page 13	of th	e instructio	ns )		
			Lobbying Expendit	ures During 4	-Year	Averagin	g Perio	d	
	Calendar year (or fiscal	(a)	(b)	(c)		-	d)		(e)
	year beginning in) 🕨	2007	2006	2005		20	004		Total
	Lobbying nontaxable						•		
<u>45</u>	amount								
	amount Lobbying ceiling amount								
	amount								
	amount Lobbying ceiling amount (150% of line 45(e))				-				
46	amount Lobbying ceiling amount (150% of line 45(e))				-				
<u>46</u>	amount Lobbying ceiling amount (150% of line 45(e)) Total lobbying expenditures				-				
46 47 48	amount Lobbying ceiling amount (150% of line 45(e))								
46 47 48	amount				-				
46 47 48 49	amount Lobbying ceiling amount (150% of line 45(e))								
46 47 48 49 50	amount Lobbying ceiling amount (150% of line 45(e))	ctivity by Nonelect	ing Public Charities			NOT	ADDITO		
46 47 48 49 50	amount Lobbying ceiling amount (150% of line 45(e))		ing Public Charities	nplete Part VI-	A) (S		APPLIO		
46 47 48 49 50	amount	ing only by organiza	itions that did not con	· · · · · · · · · · · · · · · · · · ·		ee page 1	3 of the	e inst	tructions.)
46 47 48 49 50 Pa	amount	ing only by organization attempt to influer	tions that did not connce national, state or local	legislation, includ		ee page 1		e inst	
46 47 48 49 50 Pa	amount Lobbying ceiling amount (150% of line 45(e))	ing only by organiza ization attempt to influer nion on a legislative ma	ntions that did not con not not not con tter or referendum, through	legislation, includ the use of	ing any	ee page 1	3 of the	e inst	tructions.)
46 47 48 49 50 Pa	amount	ing only by organization attempt to influer	ntions that did not con nce national, state or local titer or referendum, through	legislation, includ	ing any	ee page 1	3 of the	e inst	tructions.)
46 47 48 49 50 Pa	amount	ing only by organization attempt to influent nion on a legislative material to the compension of the c	ntions that did not connece national, state or local liter or referendum, through sation in expenses repo	legislation, includenthe use of the use of the control of the cont	ing any	ee page 1	3 of the	e inst	tructions.)
46 47 48 49 50 Pa Duratte a b	amount	ing only by organiza ization attempt to influen nion on a legislative mai nent (Include compens	ntions that did not connece national, state or local liter or referendum, through	legislation, includent the use of	ng any	ee page 1	3 of the	e inst	tructions.)
46 47 48 49 50 Pa Duratte a b	amount	ing only by organization attempt to influent nion on a legislative material (Include compension).	ntions that did not connece national, state or local liter or referendum, through sation in expenses repo	legislation, include the use of tred on lines c the control of the	ng any	n h)	3 of the	e inst	tructions.)
46 47 48 49 50 Pa Duratte a b c	amount	ing only by organization attempt to influer nion on a legislative material (Include compension).  Legislators, or the public or broadcast state zations for lobbying pure states.	ntions that did not connece national, state or local liter or referendum, through sation in expenses repo	legislation, include the use of tred on lines c the second	nroug	ee page 1	3 of the	e inst	tructions.)
46 47 48 49 50 Pa Dur atte a b c d e	amount	ing only by organization attempt to influer nion on a legislative material (Include compension).  Legislators, or the public or broadcast state zations for lobbying pure states.	ntions that did not connece national, state or local liter or referendum, through sation in expenses repo	legislation, include the use of tred on lines c the second	nroug	ee page 1	3 of the	e inst	tructions.)
46 47 48 49 50 Pa Duratte a b c c d e f	amount	ing only by organization attempt to influer mion on a legislative mainent (Include compensioned or broadcast state zations for lobbying pusilators, their staffs, gs, seminars, conventi	ntions that did not connece national, state or local liter or referendum, through sation in expenses reposition.  Including the sation of the	rted on lines c the second of the use of the use of the second of the use of the second of the use	nroug	ee page 1	3 of the	e inst	tructions.)
46 47 48 49 50 Pa Duratte a b c c d e f	amount	ing only by organization attempt to influer mion on a legislative mainent (Include compensioned or broadcast state zations for lobbying publications, their staffs, gs, seminars, conventitures (Add lines c throadcast chroadcast)	ntions that did not connece national, state or local liter or referendum, through sation in expenses reposition.  Including the sation of the	rted on lines c the second of the use of the use of the second of the use of the second of the use	nrough	ee page 1	3 of the	e inst	tructions.)

Schedule A (Form 990 or 990-EZ) 2007

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 14 of the instructions.)

		y or indirectly engage in any of the follon 501(c)(3) organizations) or in section			sect	ion
a Transfers	from the reporting organiza	ation to a noncharitable exempt organiz	ration of		Yes	No
(i) Cash				51a(i)		X
(ii) Othe	r assets			a(ii)		Х_
b Other tran	sactions					
(ı) Sale:	s or exchanges of assets w	rith a noncharitable exempt organization	۱	b(ı)		X
(ii) Purc	hases of assets from a nor	ncharitable exempt organization		b(ii)		Х
(iii) Rent	al of facilities, equipment, o	or other assets		b(iii)		<u> </u>
(iv) Reim	nbursement arrangements			b(iv)		<u> </u>
(v) Loan	is or loan guarantees			b(v)		<u>x</u>
(vi) Perfo	ormance of services or me	mbership or fundraising solicitations 🚬		b(vi)		X
c Sharing of	f facilities, equipment, maili	ng lists, other assets, or paid employee:	s	С		<u>x</u>
goods, oth	er assets, or services giver	Yes," complete the following schedule C by the reporting organization If the in column (d) the value of the goods, other	organization received less than fair m			
(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d)  Description of transfers, transactions, and sh	аппд апта	ngeme	nts
N/A						
•	•	tly affiliated with, or related to, one or ode (other than section 501(c)(3)) or ii	· · ·	Yes		No
	complete the following sche					e
	(a) ne of organization	(b) Type of organization	(c) Description of relationsh	ıp		
N/A						
<del></del>						
	<del></del>					
	<del></del>	-				
	<del></del>				-	
· -				<u>-</u>		
			-			
•						

FORM	990EZ,	PART	II -	CASH,	SAVINGS	AND	INVESTMENTS
=====	======	=====	====	======	=======	====	

	BEGINNING	END
DESCRIPTION	OF YEAR	OF YEAR
CASH	NONE	NONE
TOTALS	NONE	NONE
		===========

# UNIVERSITY OF NORTHERN BRITISH COLUMBIA

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES FORM 990EZ, PART IV NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK

DEVOTED TO POSITION

GEORGE IWANA

PRESIDENT

C/O UNBC, 3333 UNIVERSITY WAY PRINCE GEORGE

V2N 4Z9 BRITISH COLUMBIA

CANADA

EILEEN BRAY

VP OF ADMINISTRATION & FINANCE

C/O UNBC, 3333 UNIVERSITY WAY

PRINCE GEORGE

V2N 429 BRITISH COLUMBIA

CANADA

C/O UNBC, 3333 UNIVERSITY WAY ROBERT VAN ADRICHEM

VP OF EXTERNAL RELATIONS

PRINCE GEORGE

V2N 4Z9 BRITISH COLUMBIA

CANADA

DIRECTOR, FINANCE AND BUDGETS

C/O UNBC, 3333 UNIVERSITY WAY COLLEEN SMITH

V2N 429 BRITISH COLUMBIA PRINCE GEORGE

CANADA

GRAND TOTALS

STATEMENT