

LAKE MATINENDA COTTAGE OWNERS ASSOCIATION INC.

www.matinenda.ca
P.O. Box 772
Blind River, ON P0R 1B0

President

Herb Herriman

Vice President

Bill Shafer

Secretary

Caroline Bledsoe

Treasurer

John Godbolt



Board Members

Dennis Davey

John Grabowski

Jim Hogg

Bill Ryan

Liz Van Atter

Past President

Ron Servatius

June 10, 2015

Sudbury Tax Services Office
Sudbury Tax Centre
1050 Notre Dame Avenue
Sunbury, Ontario P3A 5C1
Canada

Re: T2 Short Return Filing - 2014

Dear Sir or Madam,

The Lake Matinenda Cottage Owners Association Inc. was incorporated February 17, 1992 and given an Ontario Corporation Number 962175.

Enclosed are the appropriate forms for filing as a T2 Short Form Corporation.

Sincerely,

Herbert (Herb) V. Herriman
President

8840 N Lake Dasha Drive
Plantation, FL 33324
(C) 954-478-7027

Enclosures

Cc: Board of Directors

Net Income (Loss) for Income Tax Purposes

Protected B
when completed

Corporation's name LAKE MATINENDA COTTAGE OWNERS ASSOCIATION, INC.	Business number	Year 2 0 1 4	Tax year-end Month 1 2	Day 3 1
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- This schedule lets you reconcile the corporation's net income (loss) as reported on the financial statements and its net income (loss) for tax purposes.
- For more information, see Guide T4012, *T2 Corporation – Income Tax Guide*.

Net income (loss) after taxes and extraordinary items per financial statements -1,008 A

Additions:

Provision for income taxes – current	101	_____
Provision for income taxes – deferred	102	_____
Amortization of tangible assets	104	_____
Amortization of intangible assets	106	_____
Recapture of capital cost allowance from Schedule 8	107	_____
Gain on sale of eligible capital property from Schedule 10	108	_____
Loss on disposal of assets	111	_____
Charitable donations from Schedule 2	112	_____
Taxable capital gains from Schedule 6	113	_____
Depreciation in inventory – end of year	117	_____
Non-deductible meals and entertainment expenses	121	_____
Tax reserves deducted in prior year from Schedule 13	125	_____
Income or loss for tax purposes – partnerships	129	_____
Income or loss for tax purposes – joint ventures	132	_____

Other additions:

600	_____	290	_____
601	_____	291	_____
602	_____	292	_____
603	_____	293	_____
604	_____	294	_____

Total of lines 101 to 294 **500** _____ ▶ _____ B

Subtotal (amount A plus amount B) _____ C

Deductions:

Bad debt	304	_____
Book income of joint venture or partnership	305	_____
Equity in income from subsidiaries or affiliates	306	_____
Gain on disposal of assets per financial statements	401	_____
Capital cost allowance from Schedule 8	403	_____
Terminal loss from Schedule 8	404	_____
Cumulative eligible capital deduction from Schedule 10	405	_____
Allowable business investment loss from Schedule 6	406	_____
Holdbacks	408	_____
Tax reserves claimed in current year from Schedule 13	413	_____
Contributions to deferred income plans from Schedule 15	417	_____

Other deductions:

700	_____	390	_____
701	_____	391	_____
702	_____	392	_____
703	_____	393	_____
704	_____	394	_____

Total of lines 304 to 394 **510** _____ ▶ _____ D

Net income (or loss) for income tax purposes – amount C minus amount D -1,008 E

Enter amount E on line 300 on page 1 of the *T2 Short return*. If the amount on line E is a positive amount, and the corporation is not exempt from tax under section 149, file a regular *T2 Corporation – Income Tax Return*.

T2 Short Return (2013 and later tax years)

Protected B when completed

This form serves as a federal and provincial or territorial corporation income tax return, unless the corporation is located in Quebec or Alberta. If the corporation is located in one of these provinces, you have to file a separate provincial corporation return.

All legislative references in this return are to the federal *Income Tax Act*. This return may contain changes that had not yet become law at the time of publication.

Send one completed copy of this return, including schedules, and the *General Index of Financial Information (GIFI)* to your tax centre or tax services office. You have to file the return within six months after the end of the corporation's tax year.

For more information, see www.cra.gc.ca or Guide T4012, *T2 Corporation – Income Tax Guide*.

055 Do not use this area

Identification

Business number (BN) 001 | R C |
 Corporation's name
 002 LAKE MATINENDA COTTAGE OWNERS ASSOCIATION, INC.

Address of head office
 Has this address changed since the last time we were notified? 010 1 Yes 2 No
 If yes, complete lines 011 to 018.

011 P.O. BOX 172
 012 _____
 City Province, territory, or state
 015 BLIND RIVER 016 ONTARIO
 Country (other than Canada) Postal code/ZIP code
 017 _____ 018 P0R 1B0

To which tax year does this return apply?
 Tax year start Tax year-end
 060 2014 01 01 061 2014 12 31
 YYYY MM DD YYYY MM DD

Has there been an acquisition of control to which subsection 249(4) applies since the tax year start on line 060? 063 1 Yes 2 No
 If yes, provide the date control was acquired 065 YYYY MM DD

Mailing address (if different from head office address)
 Has this address changed since the last time we were notified? 020 1 Yes 2 No
 If yes, complete lines 021 to 028.

021 c/o _____
 022 _____
 023 _____
 City Province, territory, or state
 025 _____ 026 _____
 Country (other than Canada) Postal code/ZIP code
 027 _____ 028 _____

Is the date on line 061 a deemed tax year-end in accordance with subsection 249(3.1)? 066 1 Yes 2 No
 Is the corporation a professional corporation that is a member of a partnership? 067 1 Yes 2 No
 Is this the first year of filing after:
 Incorporation? 070 1 Yes 2 No
 Amalgamation? 071 1 Yes 2 No
 If yes, complete and attach Schedule 24.

Location of books and records
 Has the location of books and records changed since the last time we were notified? 030 1 Yes 2 No
 If yes, complete lines 031 to 038.

031 2090 RICHMOND STREET
 032 _____
 City Province, territory, or state
 035 LONDON 036 ONTARIO
 Country (other than Canada) Postal code/ZIP code
 037 _____ 038 N5X 4C1

Has there been a wind-up of a subsidiary under section 88 during the current tax year? 072 1 Yes 2 No
 If yes, complete and attach Schedule 24.
 Is this the final tax year before amalgamation? 076 1 Yes 2 No
 Is this the final return up to dissolution? 078 1 Yes 2 No

040 Type of corporation at the end of the tax year

1 Canadian-controlled private corporation (CCPC)
 2 Other private corporation
 3 Public corporation
 4 Corporation controlled by a public corporation
 5 Other corporation (specify) NON PROFIT ASSOCIATION

Net income (or loss) for income tax purposes from Schedule 1, financial statements, or GIFI 300 -1,008
Provincial/territorial jurisdiction 750 ONTARIO

085 If the corporation is exempt from tax under section 149, tick one of the following boxes:

1 An agricultural organization, a board of trade or a chamber of commerce; or a non-profit club, society or association
 2 Non-profit corporations for scientific research and experimental development
 4 Exempt under other paragraphs of section 149

Tax instalments paid 840 0
If there are excess payments in this year's instalment account, indicate the refund code 894

Do not use this area

095 _____ 096 _____



Attachments

Financial statement information – Use GIFI schedules 100, 125, and 141.

Schedules – Depending on the circumstances, you may need to attach some schedules to this return. Answer the following questions. For each **yes** response, attach the schedule that applies to the **T2 Short Return**.

	Yes	Schedule
Is the net income/loss shown on the financial statements different from the net income or net loss for income tax purposes?	201 <input type="checkbox"/>	1
(i) Is the corporation including a schedule to show the continuity of losses? or (ii) Do you want to carry back the current year's loss to a previous tax year?	204 <input type="checkbox"/>	4
Has the corporation realized any capital gains or incurred any capital losses during the tax year?	206 <input type="checkbox"/>	6
Does the corporation have any property that is eligible for capital cost allowance?	208 <input type="checkbox"/>	8
Is the corporation related to any other corporations?	150 <input type="checkbox"/>	9
Does the corporation have any property that is eligible capital property?	210 <input type="checkbox"/>	10
Has the corporation had any transactions, including section 85 transfers, with its shareholders, officers, or employees, other than transactions in the ordinary course of business? Exclude non-arm's-length transactions with non-residents	162 <input type="checkbox"/>	11
Is the corporation claiming deductible reserves?	213 <input type="checkbox"/>	13
Has the corporation paid any royalties, management fees, or other similar payments to residents of Canada?	164 <input type="checkbox"/>	14
Is the corporation claiming a deduction for payments to a type of employee benefit plan?	165 <input type="checkbox"/>	15
Is the corporation an associated Canadian-controlled private corporation?	160 <input type="checkbox"/>	23
Does the corporation (private corporations only) have any shareholders who own 10% or more of the corporation's common and/or preferred shares?	173 <input type="checkbox"/>	50

Additional information

Is the corporation inactive? 280 1 Yes 2 No

Specify the principal product(s) mined, manufactured, sold, constructed, or services provided, giving the approximate percentage of the total revenue that each product or service represents.

284	NON PROFIT ASSOCIATION	285	100.00	%
286		287		%
288		289		%

If the corporation's major business activity is construction, did you have any subcontractors during the tax year? 295 1 Yes 2 No

If this return was prepared by a tax preparer for a fee, provide their EFILE number 920 _____

Certification

I, **950 HERRIMAN** Last name (print) **951 HERBERT** First name (print) **954 PRESIDENT** Position, office, or rank

am an authorized signing officer of the corporation. I certify that I have examined this return, including accompanying schedules and statements, and that the information given on this return is, to the best of my knowledge, correct and complete. I also certify that the method of calculating income for this tax year is consistent with that of the previous tax year except as specifically disclosed in a statement attached to this return.

955 2015-06-10 Date (yyyy/mm/dd) **956** 954-478-7027 Telephone number

Signature of an authorized signing officer of the corporation

Is the contact person the same as the authorized signing officer? If no, complete the information below **957** 1 Yes 2 No

958 _____ Name (print) **959** _____ Telephone number

Language of correspondence – Langue de correspondance

Indicate the language of correspondence by entering 1 for English or 2 for French. **990** 1 2

Indiquez la langue de correspondance en inscrivant 1 pour anglais ou 2 pour français.



Income Statement Information (2010 and later tax years)

Table with Corporation's name (LAKE MATINENDA COTTAGE OWNERS ASSOCIATION, INC.), Business number, and Tax year-end (Year: 2014, Month: 12, Day: 31).

- Use this schedule to report the corporation's income statement information. For more information, see Guide RC4088, General Index of Financial Information (GIFI) and T4012, T2 Corporation - Income Tax Guide. If you need more space, attach additional schedules.

Table with Operating name (LAKE MATINENDA COTTAGE OWNERS ASSOCIATION, INC), Description of the operation (NON PROFIT ASSOCIATION), and Sequence number (01).

Table for Non-farming revenue with columns A (Field Code) and B (Amount). Rows include 8090 (88) and 8230 (1,741). Total row: ** 8299 (1,559).

Table for Non-farming expenses, Cost of sales, with columns A (Field Code) and B (Amount). Empty table.

Table for Non-farming expenses, Operating expenses, with columns A (Field Code) and B (Amount). Rows include 8715 (38), 9130 (553), 9270 (2,246). Total row: ** 9368 (2,837).

* See page 3 of this schedule for information on field code 0003.
** This field code must be completed if you are reporting non-farming revenue or expenses.

Income Statement Information – continued

Farming revenue	
A	B
Field Code	Amount
* 9659	0

Farming expenses – continued	
A	B
Field Code	Amount
* 9898	0

Extraordinary items and income taxes	
A	B
Field Code	Amount
** 9999	0

Farming expenses	
A	B
Field Code	Amount

Other comprehensive income	
A	B
Field Code	Amount
7000	
7002	
7004	
7006	
7008	
7010	
7020	
*** 9998	0

* This field code must be completed if you are reporting farming revenue or expenses.

** This field code must be completed for all corporations.

*** If you used the International Financial Reporting Standards, you may have to report amounts under "Other comprehensive income."

**Summary Statement
(2010 and later tax years)**

- Use this section of the schedule **only** to report the summary statement when you are submitting supplementary income statements.
- For information on supplementary income statements, see Guide RC4088, Appendix B – *Reporting multiple lines of business*.
- If you need more space, attach additional schedules.

A	B
Field Code	Amount
**** 9970	

Extraordinary items and income taxes	
A	B
Field Code	Amount
**** 9999	

*** This field code must be reported.

Notes Checklist (2010 and later tax years)

Corporation's name LAKE MATINENDA COTTAGE OWNERS ASSOCIATION, INC.	Business number	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Year</td> <td style="text-align: center;">Tax year-end Month</td> <td style="text-align: center;">Day</td> </tr> <tr> <td style="text-align: center;">2 0 1 4</td> <td style="text-align: center;">1 2 3 1</td> <td></td> </tr> </table>	Year	Tax year-end Month	Day	2 0 1 4	1 2 3 1	
Year	Tax year-end Month	Day						
2 0 1 4	1 2 3 1							

- Parts 1, 2, and 3 of this schedule must be completed from the perspective of the person (referred to in these parts as the accountant) who prepared or reported on the financial statements. If the person preparing the tax return is not the accountant referred to above, they must still complete Parts 1, 2, 3, and 4, as applicable.
- For more information, see Guide RC4088, *General Index of Financial Information (GIFI)* and T4012, *T2 Corporation – Income Tax Guide*.
- Complete this schedule and include it with your T2 return along with the other GIFI schedules.

Part 1 – Information on the accountant who prepared or reported on the financial statements

Does the accountant have a professional designation? **095** 1 Yes 2 No

Is the accountant connected* with the corporation? **097** 1 Yes 2 No

Note

If the accountant does not have a professional designation or is connected to the corporation, you do not have to complete Parts 2 and 3 of this schedule. However, you do have to complete Part 4, as applicable.

* A person connected with a corporation can be: (i) a shareholder of the corporation who owns more than 10% of the common shares; (ii) a director, an officer, or an employee of the corporation; or (iii) a person not dealing at arm's length with the corporation.

Part 2 – Type of involvement with the financial statements

Choose the option that represents the highest level of involvement of the accountant: **198**

Completed an auditor's report 1

Completed a review engagement report 2

Conducted a compilation engagement 3

Part 3 – Reservations

If you selected option 1 or 2 under **Type of involvement with the financial statements** above, answer the following question:

Has the accountant expressed a reservation? **099** 1 Yes 2 No

Part 4 – Other Information

If you have a professional designation and are not the accountant associated with the financial statements in Part 1 above, choose one of the following options: **110**

Prepared the tax return (financial statements prepared by client) 1

Prepared the tax return and the financial information contained therein (financial statements have not been prepared) 2

Were notes to the financial statements prepared? **101** 1 Yes 2 No

If yes, complete lines 104 to 107 below:

Are subsequent events mentioned in the notes? **104** 1 Yes 2 No

Is re-evaluation of asset information mentioned in the notes? **105** 1 Yes 2 No

Is contingent liability information mentioned in the notes? **106** 1 Yes 2 No

Is information regarding commitments mentioned in the notes? **107** 1 Yes 2 No

Does the corporation have investments in joint venture(s) or partnership(s)? **108** 1 Yes 2 No

Part 4 – Other information (continued)

Impairment and fair value changes

In any of the following assets, was an amount recognized in net income or other comprehensive income (OCI) as a result of an impairment loss in the tax year, a reversal of an impairment loss recognized in a previous tax year, or a change in fair value during the tax year? 200 1 Yes 2 No

If yes, enter the amount recognized:

	In net income Increase (decrease)		In OCI Increase (decrease)	
Property, plant, and equipment	210 _____		211 _____	
Intangible assets	215 _____		216 _____	
Investment property	220 _____			
Biological assets	225 _____			
Financial instruments	230 _____		231 _____	
Other	235 _____		236 _____	

Financial instruments

- Did the corporation derecognize any financial instrument(s) during the tax year (other than trade receivables)? 250 1 Yes 2 No
- Did the corporation apply hedge accounting during the tax year? 255 1 Yes 2 No
- Did the corporation discontinue hedge accounting during the tax year? 260 1 Yes 2 No

Adjustments to opening equity

Was an amount included in the opening balance of retained earnings or equity, in order to correct an error, to recognize a change in accounting policy, or to adopt a new accounting standard in the current tax year? 265 1 Yes 2 No

If yes, you have to maintain a separate reconciliation.