

Financial Statements of

CHILDREN'S HEALTH FOUNDATION

Year ended March 31, 2015



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INDEPENDENT AUDITORS' REPORT

To Directors of Children's Health Foundation

We have audited the accompanying financial statements of Children's Health Foundation, which comprise the statement of financial position as at March 31, 2015, the statements of operations and changes in fund balances and cash flows for the period then ended, and notes, comprising a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on our judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, we consider internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of Children's Health Foundation as at March 31, 2015, and its results of operations and its cash flows for the period then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Chartered Professional Accountants, Licensed Public Accountants

June 22, 2015

London, Canada

CHILDREN'S HEALTH FOUNDATION

Statement of Financial Position

March 31, 2015, with comparative information for 2014

	March 31, 2015	March 31, 2014
Assets		
Current assets:		
Cash	\$ 680,407	\$ 142,309
Short-term investments (note 3)	4,011,844	4,494,916
Bequests receivable	40,116	316,818
HST rebate receivable	80,992	52,330
Prepaid expenses	96,842	83,518
	<u>4,910,201</u>	<u>5,089,891</u>
Investment in joint venture (note 5)	839,386	839,386
Other assets (note 2)	211,542	225,709
Investments (note 3)	18,850,859	17,017,617
Capital assets (note 4)	24,249	23,027
Endowment Investment	262,760	262,760
	<u>\$ 25,098,997</u>	<u>\$ 23,458,390</u>

Liabilities and Fund Balances

Current liability:		
Accounts payable and accrued liabilities (note 9)	\$ 1,671,464	\$ 892,030
Fund balances:		
General	3,766,150	4,587,125
Externally Restricted	698,037	698,858
Internally Restricted	18,550,586	17,017,617
Endowment	262,760	262,760
Thames Valley Children's Centre ("TVCC")	150,000	-
	<u>23,427,533</u>	<u>22,566,360</u>
Commitments (notes 6 and 8)		
	<u>\$ 25,098,997</u>	<u>\$ 23,458,390</u>

The accompanying notes are an integral part of these financial statements

Approved by the Board of Directors

_____ Director _____ Director

CHILDREN'S HEALTH FOUNDATION

Statement of Operations and Changes in Fund Balances

For the twelve month period ended March 31, 2015, with comparative information for the fifteen month period ended March 31, 2014

	General Fund	Externally Restricted Fund	Internally Restricted Fund	Endowment Fund	TVCC Fund	March 31, 2015	March 31, 2014
Revenue:							
Fundraising	\$ 8,320,496	\$ 327,006	\$ -	\$ -	\$ 568,701	\$ 9,216,203	\$ 7,748,154
Legacy gifts	426,698	-	-	-	122,241	548,939	1,202,209
Investment income	55,443	-	1,532,969	3,120	-	1,591,532	2,605,376
	8,802,637	327,006	1,532,969	3,120	690,942	11,356,674	11,555,739
Expenditures:							
Direct fundraising	1,809,920	-	-	-	68,471	1,878,391	2,055,153
Revenue net of direct expenditures	6,992,717	327,006	1,532,969	3,120	622,471	9,478,283	9,500,586
Indirect expenditures:							
Community education and development	779,714	-	-	-	-	779,714	730,502
Administrative	470,429	-	-	-	-	470,429	478,761
Amortization	6,553	-	-	-	-	6,553	8,589
	1,256,696	-	-	-	-	1,256,696	1,217,852
Total expenditures	3,066,616	-	-	-	68,471	3,135,087	3,273,005
Funds available for grants	5,736,021	327,006	1,532,969	3,120	622,471	8,221,587	8,282,734
Distribution for annual grants and building fund campaign:							
Children's Hospital at London Health Sciences Centre	3,439,515	327,827	-	3,120	-	3,770,462	2,535,243
Children's Hospital Building Fund	-	-	800,000	-	-	800,000	800,000
Children's Hospital Patient care equipment and upgrades	-	-	-	-	-	-	7,091
Children's Health Research Institute	2,248,979	-	-	-	-	2,248,979	1,704,066
Thames Valley Children's Centre	-	-	-	-	540,973	540,973	1,095,527
Total grants	5,688,494	327,827	800,000	3,120	540,973	7,360,414	6,141,927
Net change in fund balance	47,527	(821)	732,969	-	81,498	861,173	2,140,807
Fund balance, beginning of year	4,587,125	698,858	17,017,617	262,760	-	22,566,360	20,425,553
Interfund transfer (note 11)	(868,502)	-	800,000	-	68,502	-	-
Fund balance, end of year	\$ 3,766,150	\$ 698,037	\$ 18,550,586	\$ 262,760	\$ 150,000	\$ 23,427,533	\$ 22,566,360

CHILDREN'S HEALTH FOUNDATION

Statement of Cash Flows

For the twelve month period ended March 31, 2015, with comparative information for the fifteen month period ended March 31, 2014

	March 31, 2015	March 31, 2014
Cash provided by (used in)		
Operating activities:		
Net change in fund balance	\$ 861,173	\$ 2,140,807
Items not involving cash:		
Unrealized (gain) on investments	(630,621)	(1,639,410)
Amortization	6,553	8,589
Changes in non cash operating working capital		
Short-term investments	483,072	(21,720)
Prepaid expenses	(13,324)	173,262
Bequests receivable	276,702	289,790
HST rebate receivable	(28,662)	10,938
Accounts payable and accrued liabilities	779,434	655,897
	<u>1,734,327</u>	<u>1,618,153</u>
Investing activities:		
Net purchase of investments	(1,202,621)	(897,389)
Proceeds from sale of other assets	14,167	19,609
Investment in joint venture	-	(839,386)
Purchase of capital assets	(7,775)	(1,104)
	<u>(1,196,229)</u>	<u>(1,718,270)</u>
Increase(decrease) in cash	538,098	(100,117)
Cash, beginning of year	142,309	242,426
Cash, end of year	<u>\$ 680,407</u>	<u>\$ 142,309</u>

See accompanying notes to financial statements.

CHILDREN'S HEALTH FOUNDATION

Notes to Financial Statements

March 31, 2015

Nature of operations:

Children's Health Foundation (the "Foundation") is a registered charity. It was incorporated as a non-profit organization without share capital under the Ontario Corporations Act and is exempt from income taxes under Section 149(1)(f) of the Income Tax Act. The Foundation's mission is to "mobilize our community to support excellence in healthcare, rehabilitation and research for our children and their families."

1. Significant accounting policies:

(a) Basis of presentation:

The Foundation prepares its financial statements in accordance with Canadian accounting standards for not-for-profit organizations. The significant policies are detailed as follows:

Fund accounting:

In order to ensure observance of the limitations and restrictions placed on the use of resources available to the Foundation, the accounts of the Foundation are maintained in accordance with the principles of fund accounting. Accordingly, resources are classified for accounting and reporting purposes into funds. These funds are held in accordance with the objectives specified by donors or in accordance with directives issued by the Board of Directors. Transfers between the funds are made when it is considered appropriate and authorized by the Board of Directors.

For financial reporting purposes, the accounts have been classified into the following funds:

(i) General Fund:

The General Fund accounts for the Foundation's general fundraising and administrative activities. The General Fund reports unrestricted resources available for immediate purposes.

(ii) Restricted Funds:

The Externally Restricted Fund reports revenues which have a specific purpose as specified by the donor. This is comprised of externally restricted Children's Hospital Building Fund revenues and other externally restricted funds held in short term investments. It also reports the grants expended for these specific purposes.

The Internally Restricted Fund reports revenues which have a specific purpose as specified by the Board of Directors, and the disbursements expended for these specific purposes. It also includes internal resources transferred by the Board of Directors to the fund, with the intention of maintaining the real value of the principal while also meeting annual spending requirements. Amounts transferred to and from the Internally Restricted Fund may only be accessed by specific resolution of the Board of Directors.

CHILDREN'S HEALTH FOUNDATION

Notes to Financial Statements

March 31, 2015

1. Significant accounting policies (continued):

(a) Basis of presentation (continued):

(iii) Endowment Fund:

The Endowment Fund reports resources that are required by an external donor to be maintained by the Foundation on a permanent basis.

(iv) Thames Valley Children's Centre Fund:

The Thames Valley Children's Centre Fund (the "TVCC Fund") reports revenue, expenses and distributions related to fundraising and donations received on behalf of the Thames Valley Children's Centre ("TVCC"). See note 11.

(b) Revenue recognition:

The restricted fund method is used to account for contributions. The Externally Restricted Fund, Internally Restricted Fund, Endowment Fund and TVCC Fund contributions are recognized as revenue in the year in which they are received. Unrestricted contributions are recognized as revenue in the General Fund when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

Revenue from interest, dividend income and reinvested distributions is recorded when received. Realized gains and losses are recorded as earned. Unrealized gains and losses on financial assets reflect differences in market value at the evaluation date and are included in investment income on an annual basis.

(c) Financial instruments:

(i) Measurement of financial instruments:

The Foundation initially measures its financial assets and financial liabilities at fair value.

The Foundation subsequently measures all of its financial assets and financial liabilities at amortized cost, except for investments in equity instruments that are quoted in an active market, which are measured at fair value. Changes in fair value are recognized in net income.

(ii) Impairment:

Financial assets measured at cost are tested for impairment when there are indicators of impairment. The amount of the write-down and any subsequent reversal are recognized in the statement of operations.

CHILDREN'S HEALTH FOUNDATION

Notes to Financial Statements

March 31, 2015

1. Significant accounting policies (continued):

(c) Financial instruments (continued)

(iii) Transaction costs:

The Foundation recognizes its transaction costs in the statement of operations in the period incurred. However, financial instruments that will not be subsequently measured at fair value are adjusted by the transaction costs that are directly attributable to their origination, issuance or assumption.

(d) Cash and cash equivalents:

Cash as disclosed on the statement of financial position consists of cash on hand, cash with banks and Canadian dollar deposits.

(e) Capital assets:

Purchased capital assets are recorded at cost. Contributed capital assets are recorded at fair value at the date of contribution. Amortization is provided on a straight-line basis over the following estimated useful lives:

Leasehold improvements	Term of the lease
Office equipment	5 years
Computer equipment	4 years
Furniture and fixtures	10 years

(f) Volunteer contributions:

Volunteers contribute numerous hours per year to assist the Foundation in carrying out its mission. Due to the difficulty of determining fair value, volunteer contributions are not recognized in the financial statements.

(g) Donations in kind:

During the year, the Foundation received gifts in kind of goods and services. Although these donations are an integral part of the Foundation's fundraising activities, their value is difficult to determine. As such the amounts related thereto are not reflected in the financial statements.

CHILDREN'S HEALTH FOUNDATION

Notes to Financial Statements

March 31, 2015

1. Significant accounting policies (continued):

(h) Use of estimates:

The preparation of financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. These estimates are reviewed periodically, and, as adjustments become necessary, they are reported in earnings in the period in which they become known. Areas of management estimates include amortization of capital assets.

(i) Foreign currency translation:

Monetary assets and liabilities denominated in foreign currencies are translated at the prevailing rates of exchange at the balance sheet date. Revenues and expenses are translated at the exchange rates prevailing on the transaction dates. Exchange gains and losses are included in earnings.

2. Other assets:

	March 31, 2015	March 31, 2014
Annuity	\$ 160,771	\$ 176,771
Cash surrender value of life insurance policies	50,771	48,938
	<hr/> \$ 211,542	<hr/> \$ 225,709

Annuity:

The annuity consists of a \$400,000 donation made to the Foundation in 2000. The annuity receipts of \$16,282, which comprise both a paydown of the annuity and investment income, are semi-annual for 25 years ending February 2025. Each payment reflects a pay down of the annuity by \$8,000 and income of \$8,282. There are no restrictions on how these funds can be spent.

Cash surrender value of life insurance policies:

The Foundation owns various life insurance policies that contain a cash surrender option. Donors pay the premiums for these policies and the cash surrender value is available to the Foundation at any time.

CHILDREN'S HEALTH FOUNDATION

Notes to Financial Statements

March 31, 2015

3. Investments:

	March 31, 2015		March 31, 2014	
	Fair value	Cost	Fair value	Cost
Short-Term Investments				
Money Market/GIC	\$ 4,011,844	\$ 4,011,337	\$ 4,494,916	\$ 4,494,916
Long-Term Investments				
Canadian Equity	\$ 2,687,466	\$ 2,031,568	\$ 2,595,943	\$ 1,802,351
United States Equity	2,780,222	2,006,886	2,339,515	1,767,660
International Equity	3,043,275	2,390,745	2,751,495	2,259,634
Canadian Fixed Income	6,732,739	6,307,970	6,165,809	6,124,494
Alternative Funds	3,306,884	3,201,964	3,164,855	3,081,866
GIC	300,273	300,000	-	-
	\$ 18,850,859	\$ 16,239,133	\$ 17,017,617	\$ 15,036,005

Money market Investments earned between 1.0% to 1.5% (March 31, 2014: 1.24% to 1.30%). Guaranteed investment certificates (GIC's), with durations of 1-2 years, earned between 1.40%-1.51% at March 31, 2015. The Foundation did not have GIC investments at March 31, 2014.

The investment policy for the pooled funds provides for an asset mix based on market value of 45.0% (+/-15.0%) fixed income, 40.0% (+20.0%/-10.0%) equity securities, and 15% (+10%/-15%) alternative funds and is rebalanced as directed by the Foundation's Investment Committee. Alternative funds are defined as investment vehicles or funds that have generally lower correlation to publicly traded equity and bond markets and are utilized to reduce volatility and risk.

4. Capital assets:

	March 31, 2015		March 31, 2014	
	Cost	Accumulated amortization	Net book value	Net book value
Leasehold improvements	\$ 121,971	\$ 121,971	\$ -	\$ -
Office equipment	15,627	14,840	787	506
Computer equipment	24,149	18,426	5,723	9,056
Furniture and fixtures	69,026	51,287	17,739	13,465
	\$ 230,773	\$ 206,524	\$ 24,249	\$ 23,027

Net capital assets as at March 31, 2015 of \$24,249 (March 31, 2014 - \$23,027) are included in the General Fund balance.

CHILDREN'S HEALTH FOUNDATION

Notes to Financial Statements

March 31, 2015

5. Investment in joint venture:

In January, 2013, a memorandum of agreement was signed by the Foundation along with London Health Sciences Foundation and St. Joseph's Health Care Foundation, whereby the three lottery participants agreed to operate future community lotteries as a joint venture. Net proceeds from these lotteries will be shared equally by the agreement participants. Funding for a required lottery letter of credit and seed money for future lottery expenses totaling \$839,386 is recorded as an investment in joint venture. Commitments in respect of this Lottery are more fully explained in note 6. This asset will be accounted for using the equity method whereby the Foundation's share of net lottery proceeds will be recorded as donation revenue.

6. Commitments:

Lease commitments:

The Foundation has an operating lease extending to March 14, 2017 for its office facilities. In addition, the Foundation has operating lease commitments for equipment.

The total minimum lease payments due over the term of the leases are as follows:

2016	\$	89,700
2017		28,917
2018		13,392
2019		13,392
2020		13,392
2021		2,775
	\$	161,568

Community Lottery commitment:

Under the Dream Lottery Agreement, the Foundation will receive 33.33% of the net proceeds, and is liable for 33.33% of any loss should it occur (see note 5).

7. Pension plan:

The Foundation has a defined contribution employee pension plan that became effective on September 21, 2001. The total plan expense for the current period for the Foundation's defined contribution is \$60,032 (March 31, 2014 - \$64,870).

CHILDREN'S HEALTH FOUNDATION

Notes to Financial Statements

March 31, 2015

8. Grant obligations:

The Board of Directors has approved the following grant obligations for fiscal 2015-2016. These obligations have not been reflected in the financial statements.

Children's Hospital at LHSC programs	\$ 2,958,430
Children's Hospital Patient Care Equipment at LHSC	1,500,000
Children's Health Research Institute Program	2,846,890
Thames Valley Children's Centre	949,481
	<hr/>
	\$ 8,254,801

9. Government remittances payable:

At March 31, 2015, the Foundation has outstanding government remittances payable including amounts for payroll taxes and health taxes of \$15,456 (March 31, 2014 - \$9,380). None of these remittances are in arrears.

10. Financial instruments risk management:

The Foundation's financial instruments include cash, short-term investments, investments, investment in joint venture, amounts receivable, cash surrender value of life insurance policies, annuity and accounts payable and accrued liabilities. Due to their nature or capacity for prompt liquidations, the fair values of these financial instruments approximate their carrying value.

The Foundation's financial instruments do not expose the Foundation to significant liquidity risk.

(a) Credit and market risk:

The Foundation has an investment policy which restricts the types and amounts of eligible investments. The policy permits investments in fixed income investments and equity securities included in select market indices. Equity and fixed income securities are held within pooled funds. Risk and volatility of investment returns are mitigated through diversification of investments in different countries, business sectors and corporation sizes. The Foundation does not have any significant exposure to credit risk.

The Foundation is liable, as explained in note 6, for 33.33% of any loss that occurs under the Dream Lottery Agreement. Based on the historical performance of this campaign, the Foundation feels that there is not a significant risk. However, the Foundation does have sufficient liquid assets to cover any shortfall if it occurs.

(b) Currency risk:

The Foundation's investments are denominated in Canadian dollars. Certain investments such as United States and other international equities include investments in foreign jurisdictions and are therefore subject to foreign currency fluctuations. The Foundation mitigates the currency risk exposure of its foreign securities through diversification of the pooled funds which are comprised of multiple currencies.

CHILDREN'S HEALTH FOUNDATION

Notes to Financial Statements

March 31, 2015

10. Financial instruments risk management (continued):

(c) Interest rate risk:

Interest rate risk refers to the adverse consequences of interest rate changes on the Foundation's cash flows, financial position and income. Interest rate changes directly impact the value of fixed income securities. The Foundation manages the interest rate price risk exposure of its fixed income investments by holding investments with varying terms to maturity.

The Foundation's exposure to the above risks has not changed during the year.

11. Interfund transfer:

The Board of Directors approved the transfer of \$800,000 from the General Fund to the Internally Restricted Fund to cover the Building Fund commitment for the 12 month period ending March 31, 2015. In addition, the Board passed a motion approving the transfer of \$68,502 from the General Fund to the TVCC Fund to cover additional fundraising requirements as per the Fundraising Agreement for the 12 month period ending March 31, 2015.