

Trustees' Annual Report for the period

Period start date

Period end date

From

01 04 2023 To 31 03 2024

Section A

Reference and administration details

Charity name **HAMPSTHWAITE VILLAGE ROOM**

Other names charity is known by

—

Registered charity number (if any)

248935

Charity's principal address

NORTHWAY HOUSE

HIGH ST. HAMPSTHWAITE

HARROGATE

Postcode HG3 2EU

Names of the charity trustees who manage the charity

	Trustee name	Office (if any)	Dates acted if not for whole year	Name of person (or body) entitled to appoint trustee (if any)
1	MOZAFFAR NAMI	CHAIR		ALL TRUSTEES.
2	VICTORIA LYN DIXON	TRUSTEE		
3	HOLEN CHARCOTE BROWN	TRUSTEE		
4	MARK R. ILLINGWORTH	TRUSTEE/TREASURER		
5	PETER CN CAPEL CURE	TRUSTEE		
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

Names of the trustees for the charity, if any, (for example, any custodian trustees)

Name	Dates acted if not for whole year
N/A	N/A.

Names and addresses of advisers (Optional information)

Type of adviser	Name	Address
N/A	N/A	N/A.

Name of chief executive or names of senior staff members (Optional information)

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Section B Structure, governance and management

Description of the charity's trusts

Type of governing document

INDENTURE DATED 15th October 1924

How the charity is constituted

BY GOVERNING DOCUMENT OF THE TRUST

Trustee selection methods

APPOINTED BY TRUSTEES.

Additional governance issues (Optional information)

You **may choose** to include additional information, where relevant, about:

- policies and procedures adopted for the induction and training of trustees;
- the charity's organisational structure and any wider network with which the charity works;
- relationship with any related parties;
- trustees' consideration of major risks and the system and procedures to manage them.

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Section C Objectives and activities

Summary of the objects of the charity set out in its governing document

VILLAGE ROOM FOR THE BENEFIT OF THE INHABITANTS OF HAMPSHAWITE.

Summary of the main activities undertaken for the public benefit in relation to these objects (include within this section the statutory declaration that trustees have had regard to the guidance issued by the Charity Commission on public benefit)

FREE WEEKLY LIBRARY WITH REFRESHMENTS.

CLASSES FOR WELLBEING, eg. Yoga, pilates.

ART + CRAFT CLASSES,

USE FOR LOCAL DRAMA SOCIETY and STORAGE OF COSTUMES.

Venue for meetings for PARISH council, and other local societies.

Meeting room for ladies charity group.

Additional details of objectives and activities (Optional information)

You **may choose** to include further statements, where relevant, about:

- policy on grantmaking;
- policy programme related investment;
- contribution made by volunteers.

Summary of the main achievements of the charity during the year

The main achievement was total renovation and refurbishment of the room which had fallen into disrepair.

Installation of solar panels to achieve zero carbon footprint.

Establishment of local free library.

application (successful) for installation of audio/visual equipment as well as soundproofing.

Section E

Financial review

Brief statement of the charity's policy on reserves

Small saving accounts income of
unfrozen expenditure..

Details of any funds materially in deficit

None

Further financial review details (Optional information)

You **may choose** to include additional information, where relevant about:

- the charity's principal sources of funds (including any fundraising);
- how expenditure has supported the key objectives of the charity;
- investment policy and objectives including any ethical investment policy adopted.

grants, fundraising and good use of room which brings in excess of required income.

Section F

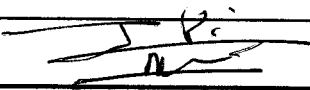
Other optional information

Section G

Declaration

The trustees declare that they have approved the trustees' report above.

Signed on behalf of the charity's trustees

Signature(s)		
Full name(s)	MOZAFFAR NAMI	
Position (eg Secretary, Chair, etc)	Chair	
Date	22-11-2024	



CHARITY COMMISSION
FOR ENGLAND AND WALES

Charity Name HAMPSTHWAITE VILLAGE ROOM		No (if any)	
Receipts and payments accounts			
For the period from	Period start date 01/09/23	To	Period end date 31/03/24

CC16a

	Unrestricted funds to the nearest £	Restricted funds to the nearest £	Endowment funds to the nearest £	Total funds to the nearest £	Last year to the nearest £
A1 Receipts					
ROOM HIRE	162		0	162	0
DONATIONS	1,065		0	1,065	0
BANK INTEREST	9		0	9	0
N. YORKSHIRE COUNCIL GRANT		91,214	0	91,214	0
LOTTERY GRANT		8,700	0	8,700	0
			0		0
			0		0
			0		0
Sub total (Gross income for AR)	1,236	99,914	0	101,150	0

A2 Asset and investment sales, (see table).					
	0	0	0	0	0
	0	0	0	0	0
Sub total	0	0	0	0	0

Total receipts	0	0	0	0	0
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A3 Payments					
UTILITIES	331		0	331	0
COUNCIL TAX	146		0	146	0
MISCELLANEOUS	42		0	42	0
INSURANCE	326		0	326	0
			0		0
REFURBISHMENT WORKS		71,812	0	71,812	0
ARCHITECT'S FEES		6,148	0	6,148	0
LOTTERY WORKS		8,290	0	8,290	0
			0		0
Sub total	845	86,550	0	87,395	0

A4 Asset and investment purchases, (see table)					
	0	0	0	0	0
	0	0	0	0	0
Sub total	0	0	0	0	0

Total payments	845	86,550	0	0	0
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Net of receipts/(payments)	391	13,364	0	0	0
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A5 Transfers between funds			0		0
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A6 Cash funds last year end	2,294		0		0
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Cash funds this year end	2,685	13,364	0	0	0
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B1 Cash funds

BANK ACCOUNT	2,685	13,364	0
			0
			0
Total cash funds	2,685	13,364	0

(agree balances with receipts and payments account(s))

OK

Unrestricted

OK

Restricted funds

OK

Endowment

B2 Other monetary assets

	funds to nearest £	funds to nearest £	funds to nearest £
GRANT DEBTORS		11 212	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0

B3 Investment assets

	Fund to which asset belongs	Cost (optional)	Current value (optional)
		0	0
		0	0
		0	0
		0	0
		0	0

B4 Assets retained for the charity's own use

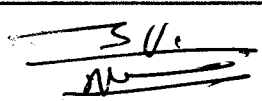
	Fund to which asset belongs	Cost (optional)	Current value (optional)
		0	0
		0	0
		0	0
		0	0
		0	0
		0	0
		0	0
		0	0

B5 Liabilities

	Fund to which liability relates	Amount due (optional)	When due (optional)
REFURBISHMENT CREDITORS	25 570	0	
		0	
		0	
		0	
		0	

Signed by one or two trustees on behalf of
all the trustees

Signature



Print Name

M. NAM

Date of approval

22/11/2024



CHARITY COMMISSION
FOR ENGLAND AND WALES

Independent examiner's report on the accounts

Section A

Independent Examiner's Report

Report to the trustees

Charity Name
HAMPSTHWAITE VILLAGE ROOM

On accounts for the year ended

Charity no (if any) **248935** year ended **2024**

Set out on pages

1 - 2
(remember to include the page numbers of additional sheets)

I report to the trustees on my examination of the accounts of the above charity ("the Trust") for the year ended **2024**.

Responsibilities and basis of report

As the charity's trustees, you are responsible for the preparation of the accounts in accordance with the requirements of the Charities Act 2011 ("the Act").

I report in respect of my examination of the Trust's accounts carried out under section 145 of the 2011 Act and in carrying out my examination, I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the Act.

Independent examiner's statement

[The charity's gross income exceeded £250,000 and I am qualified to undertake the examination by being a qualified member of [insert name of applicable listed body]]. *Delete [] if not applicable.*

I have completed my examination. I confirm that no material matters have come to my attention in connection with the examination (other than that disclosed below *) which gives me cause to believe that in, any material respect:

- the accounting records were not kept in accordance with section 130 of the Charities Act; or
- the accounts did not accord with the accounting records; or
- the accounts did not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair' view which is not a matter considered as part of an independent examination.

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.

** Please delete the words in the brackets if they do not apply.*

Signed:

Date: **R Selby 28/11/2024**

Name:

ROBERT SELBY

Relevant professional
qualification(s) or body (if
any):

A.C.A.

Address:

**28 HOLLINS LANE, HAMPSTHWAITE,
HARROGATE, HG3 2EJ**

Section B

Disclosure

Only complete if the examiner needs to highlight material matters of