

**SWORN AFFIDAVIT – B-BBEE EXEMPTED MICRO ENTERPRISE – SPECIALISED ENTITY -  
GENERAL**

I, the undersigned,

Full name & Surname	MS. CAROL DYANTYI
Identity number	5605060492080

Hereby declare under oath as follows:

1. The contents of this statement are to the best of my knowledge a true reflection of the facts.
2. I am a Director of the following enterprise and am duly authorised to act on its behalf:

Enterprise Name:	IKAGENC ITIREWENC A. MINISTRY
Trading Name (If Applicable):	- IKAGENC
Registration Number:	NPO-046-028
Enterprise Physical Address:	DEPARTMENT OF SOCIAL SERVICES 3299 SISULU ROAD ORLANDO WEST
Type of Entity (NPO, PBO etc.):	NPO
Nature of Business:	NON PROFIT ORGANISATION
Definition of "Black People"	As per the Broad-Based Black Economic Empowerment Act 53 of 2003 as Amended by Act No 46 of 2013 "Black People" is a generic term which means Africans, Coloureds and Indians –  (a) who are citizens of the Republic of South Africa by birth or descent; or (b) who became citizens of the Republic of South Africa by naturalisation- i. before 27 April 1994; or ii. on or after 27 April 1994 and who would have been entitled to acquire citizenship by naturalization prior to that date;"
Definition of "Black Designated Groups"	"Black Designated Groups means:  (a) unemployed black people not attending and not required by law to attend an educational institution and not awaiting admission to an educational institution; (b) Black people who are youth as defined in the National Youth Commission Act of 1996; (c) Black people who are persons with disabilities as defined in the Code of Good Practice on employment of people with disabilities issued under the Employment Equity Act; (d) Black people living in rural and under developed areas; (e) Black military veterans who qualifies to be called a military veteran in terms of the Military Veterans Act 18 of 2011;"

3. I hereby declare under Oath that:

- The Enterprise has 100 % Black Beneficiaries as per Amended Code Series 100 of the Amended Codes of Good Practice issued under section 9 (1) of B-BBEE Act No 53 of 2003 as Amended by Act No 46 of 2013,
- The Enterprise has 86 % Black Female Beneficiaries as per Amended Code Series 100 of the Amended Codes of Good Practice issued under section 9 (1) of B-BBEE Act No 53 of 2003 as Amended by Act No 46 of 2013,
- The Enterprise has ~~86~~ 100 % Black Designated Group Beneficiaries as per Amended Code Series 100 of the Amended Codes of Good Practice issued under section 9 (1) of B-BBEE Act No 53 of 2003 as Amended by Act No 46 of 2013,
- Black Designated Group Beneficiary % Breakdown as per the definition stated above:
  - Black Youth % = 96,4 %
  - Black Disabled % = 3,6 %
  - Black Unemployed % = \_\_\_\_\_ %
  - Black People living in Rural areas % = \_\_\_\_\_ %
  - Black Military Veterans % = \_\_\_\_\_ %
- Based on the Financial Statements/Management Accounts and other information available on the latest financial year-end of 2019, the annual Total Revenue/Allocated Budget/Gross Receipts was R10,000,000.00 (Ten Million Rands) or less

- Please Confirm on the below table the B-BBEE Level Contributor, by ticking the applicable box.

At Least 75% Black Beneficiaries	Level One (135% B-BBEE procurement recognition level)	<input checked="" type="checkbox"/>
At Least 51% Black Beneficiaries	Level Two (125% B-BBEE procurement recognition level)	<input type="checkbox"/>
Less than 51% Black Beneficiaries	Level Four (100% B-BBEE procurement recognition level)	<input type="checkbox"/>

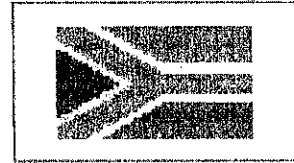
- 4. I know and understand the contents of this affidavit and I have no objection to take the prescribed oath and consider the oath binding on my conscience and on the Owners of the Enterprise which I represent in this matter.
- 5. The sworn affidavit will be valid for a period of 12 months from the date signed by commissioner.

Deponent Signature: D. Agnew

Date: 16-04-2020

[Signature]  
Commissioner of Oaths  
Signature & stamp





### CERTIFICATE OF REGISTRATION OF NONPROFIT ORGANIZATION

In terms of the Nonprofit Organisation Act, 1997, I am satisfied that .....

**Ikageng Itireleng Aids Ministry**

.....  
*(name of the nonprofit organization)*

meets the requirements for registration.

**17 January 2006**

The organisation's name was entered into the register on .....

*(date)*

Registration number

**046-028-NPO**

Director's signature

*M BSC*

**17 January 2006**

Date .....

