2025 Accessibility Compliance Report

Instructions

All information you provide is subject to the Freedom of Information and Protection of Privacy Act.

If you are a public sector organization with **20 or more employees** that is not designated under the IASR (O. Reg. 191/11: Integrated Accessibility Standards) you are to comply with the IASR as a business/non-profit organization and complete the appropriate Accessibility Compliance Report. If you are a public sector organization with **fewer than 20 employees** that is not designated under the IASR (O. Reg. 191/11: Integrated Accessibility Standards), you are to comply with the IASR as a small business/non-profit organization and are exempt from the requirement to submit a report.

Fields marked with an asterisk (*) are mandatory.

A. Organizatio	n information							
Organization cate	• .		nber of employees	Reporting year				
				9 employees	yees 2025			
Business deta								
Organization legal name *					Number of employees in Ontario * Help			
Venture Ontario					8			
Business number (BN9) * Help								
Check if operation	ating/business nam	e is same a	s legal name					
Organization ope	rating/business na	me						
Venture Ontario)							
Sector that best of 91 - Public adm		nization's p	rincipal business acti	ivity *	<u>Help</u>			
Subsector (if pos 912 - Provincial	sible) and territorial pu	blic adminis	stration					
Industry group (if 9129 - Other pr	possible) ovincial and territe	orial public	administration					
Mailing addres	ss							
Address where le	tters can be sent to	the person	responsible for coor	dinating the organ	ization's AC	DDA compliance activities.		
Country*								
The fields below	will change based	on your sele	ction.					
Canada Ousa				OInternationa	national			
Type of address * • Street address						ner		
Unit number	Street number*	Street nan	ne *					
3001	250	Yonge						
Street type	Street direction		City*		Province*			
Street			Toronto		ON (Ontario)			
Postal code (e.g. M5B 2L7	A1A 1A1) *							
Business addı	ress							
(Address at which	letters can be sent	to the compa	any director/officer acc	countable for the o	rganization's	s compliance with the AODA.)		
✓ Check if busing	ness address is san	ne as mailin	g address					
		-			_			

Country*						
The fields below	w will change based o	on your sele	ction.			
Canada	OUSA		○ Interna			
Type of address * • Street address •			Street address served by route Ohther			
Unit number 3001	Street number* 250	Street nan Yonge	ne *			
Street type Street	Street direction		City* Toronto	Province* ON (Ontario)		
Postal code (e. M5B 2L7	g. A1A 1A1) *					

Use the "Add new organization" button to add additional organizations to which this accessibility report is to be applied (maximum 20).

Note: All organizations must have the same organization category, number of employees range, compliance answers and certifier, and have different business numbers, in order to file under the same form.



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Organization category Designated Public Sector						
Number of employees range 1-49						
Filing organization legal name Venture Ontario						
Filing organization AODA identifier AD100076						
Fields marked with an asterisk (*) are mandatory.						
B. Understand your accessibility requirements						
Before you begin your report, you can learn about your accessibility requirements at ontario.ca/accessibility						
Additional accessibility requirements apply if you are: • <u>a library board</u>						
a producer of education material (e.g. textbooks)						
• an education institution (e.g. school board, college, university or school)						
• <u>a municipality</u>						
C. Accessibility compliance report certification						
Section 15 of the <i>Accessibility for Ontarians with Disabilities Act, 2005</i> requires that accessibility reports include a statement certifying that all the required information has been provided and is accurate, signed by a person with authority to bind the organization(s).						
Note: It is an offence under the Act to provide false or misleading information in an accessibility report filed under the AODA.						
The certifier may designate a primary contact for the Ministry for Seniors and Accessibility to contact the organization(s); otherwise the certifier will be the main contact.						
Certifier: Someone who can legally bind the organization(s).						
Primary Contact: The person who will be the main contact for accessibility issues.						
Acknowledgement						
✓ I certify that all the information is accurate and I have the authority to bind the organization *						
Certification date (yyyy-mm-dd) * 2025-06-02						
Certifier information						
Last name* Romanyshyn First name* Steve						
Position title * Business phone number* Extension Check here if TTY Chief Executive Officer 416-268-0976						

					T		
Email* steve.romanyshyn@ontario.ca			Alterna	te phone number	Extension	Fax number	
Primary contact for the org	ganization(s)				•		
Check if the primary contact i	s same as the certifier						
Last name* Blackmore			First name* Kim				
Position title * General Manager				ension Check here if TTY			
Email* kim.blackmore@ontario.ca			Alterna	te phone number	Extension	Fax number	
D. Accessibility complian	ce report questions						
Instructions							
Please answer each of the follow	wing compliance questions.	Use t	he Comi	ments box if you v	vish to comm	ent on any response.	
If you need help with a specific question, click the help links which will open in a new browser window. Use the link on the left to view the relevant AODA regulations and the link on the right to view relevant accessibility information resources.							
General							
1. Is your organization in com	pliance with all applicable	requi	rements	s of the General S	Section? *	Yes ○No	
Read O. Reg. 191/11, Part I: Ge	Read O. Reg. 191/11, Part I: General Learn more about your requirements for question 1						
				Use this self-assessment tool to identify which requirements apply to your organization under the			
				General Requirements			
Comments for Include any additional information or explanation to accompany your yes/no answer to the question 1 question.							
Information and communic	cations						
2. Is your organization in compliance with all applicable requirements of the Information and Communications Standards? *							
Read O. Reg. 191/11, Part II: Information and communications standards				Learn more about your requirements for question 2			
				Use this self-a	ssessment to	ol to identify which	
				requirements apply to your organization under the			
				Information an	d Communica	ations Standards	
Comments for Include any additional information or explanation to accompany your yes/no answer to the question 2 question.							

Employment				
3. Is your organization in compliance with all applicable requirements of the Standards? *	he Employment Yes No			
Read O. Reg. 191/11, Part III: Employment Standards	Learn more about your requirements for question 3			
	Use this self-assessment tool to identify which requirements apply to your organization under the Employment Standards			
Comments for Include any additional information or explanation to question 3 question.	accompany your yes/no answer to the			
Transportation				
4. Is your organization in compliance with all applicable requirements of the Standards? *	he Transportation Yes No			
Read O. Reg. 191/11, Part IV: Transportation standards	Learn more about your requirements for question 4			
	The Transportation Standards Reference Guide provides information about accessibility requirement from the Transportation Standards			
Comments for Note that the standards do not apply to Venture Onta question 4 designated public sector transportation organizations	ario, given that the standards apply to			
Design of public spaces				
 Is your organization in compliance with all applicable requirements of t Spaces Standards? * 	the Design of Public Yes No			
Read O. Reg. 191/11 Part IV.1: Design of public spaces standards	Learn more about your requirements for question 5			
	The DOPS Reference Guide provides an overview of the scope, applicability and specific requirements of DOPS			

Comments for Note that the standards do not apply to Venture Ontario, given that the standards only apply to

new construction and renovated existing public spaces.

question 5

Customer Service

6. Is your organization in compliance with all applicable requirements of the Customer Service Standards? *

Yes

O No

Read O. Reg. 191/11 Part IV.2: Customer Service standards

Learn more about your requirements for question 6

Use this self-assessment tool to identify which requirements apply to your organization under the Customer Service Standards

Comments for Include any additional information or explanation to accompany your yes/no answer to the question 6 question.

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Organization category Designated Public Sector

Number of employees range 1-49

Filing organization legal name Venture Ontario

Filing organization AODA identifier AD100076

Fields marked with an asterisk (*) are mandatory.

E. Accessibility compliance report summary

Your responses to the questions on your accessibility report indicate that your organization is in compliance with AODA standards.

Next Steps:

- 1. Your organization may be audited to verify compliance.
- 2. You must make this completed accessibility report available to the public.