NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com

Send with fee and attachments to:

NYS Office of the Attorney General
Charities Bureau Registration Section
28 Liberty Street
New York, NY 10005

2022

Open to Public Inspection

1.General Information

| i. General imormau | On . | | | | |
|--|---|--|----------------------------------|--|--|
| For Fiscal Year Beginning | (mm/dd/yyyy) 01/01 | /2022 and Ending | (mm/dd/yyyy) 12/31/ | 2022 | |
| Check if Applicable: Address Change | Name of Organization: BIG BROTHERS- | Employer Identification Number (EIN): 13-2983815 | | | |
| Name Change | Mailing Address: 257 S. MIDDLE | | NY Registration Number: 02-57-78 | | |
| Initial Filing | | TOWN MOND | | Telephone: | |
| Final Filing | City / State / ZIP: NANUET, NY 1 | 0954 | | 845 634-2199 | |
| Amended Filing | Website: | | | Email: | |
| Reg ID Pending | website. | | | gballard@bbbsofrc.c | |
| Check your organization's registration category: | paramata p | 「L only X DUAL (7A | & EPTL) EXEMPT* | Confirm your Registration Category in the Charities Registry at <u>www.CharitiesNYS.com</u> . | |
| 2. Certification | | | | | |
| See instructions for certifi | cation requirements. Improp | per certification is a violation | n of law that may be subject | to penalties. The certification requires | |
| two signatories. | | | | | |
| We certify under n | enalties of periury that we re | eviewed this report, includin | o all attachments, and to the | e best of our knowledge and belief, | |
| they are | true, correct and complete | in accordance with the law | s of the State of New York a | pplicable to this report. | |
| | | | GILLIAN BA | LLARD \ \ | |
| President or Authorized | Officer: | - Jallos | CEO | 8/29/23 | |
| | Signature | | Print Nam | ne and Title Date | |
| | 114 | Acres - | | - donlar | |
| Chief Financial Officer or | Treasurer: | Menter | latrice | DE 1000 OF 100 | |
| | Signature _ | | Print Nam | ne and Title Date | |
| | | The second secon | ; | | |
| 3. Annual Reporting | | | | | |
| | | | | egory (7A or EPTL only filers) or both | |
| categories (DUAL filers) th | at apply to your registration | , complete only parts 1, 2, | and 3, and submit the certifi | ied Char500. No fee, schedules, or | |
| ¥ | | im an exemption or are a D | UAL filer that claims only or | ne exemption, you must file applicable | |
| schedules and attachmer | ts and pay applicable fees. | | | | |
| | | | | t | |
| 3a. 7A filing exemption: Total contributions from NY State including residents, foundations, government agencies, etc. did not exceed \$25,000 and the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit | | | | | |
| exceed \$25,000 and the organization did not engage a professional fund raiser (PFH) or full draising courser (FHO) to solicitions during the fiscal year. | | | | | |
| Contributions during the mounty own | | | | | |
| 3b. EPTL filing exemption: Gross receipts did not exceed \$25,000 and the market value of assets did not exceed \$25,000 at any time | | | | | |
| during the fiscal year. | | | | | |
| | | | | | |
| 4. Schedules and Attachments | | | | | |
| See the following page | | | | | |
| for a checklist of Yes X No 4a. Did your organization use a professional fund raiser, fund raising counsel or commercial co-venturer | | | | | |
| schedules and for fund raising activity in NY State? If yes, complete Schedule 4a. | | | | | |
| attachments to | | | | | |
| complete your filing. X Yes No 4b. Did the organization receive government grants? If yes, complete Schedule 4b. | | | | | |
| | | | | | |
| 5. Fee | | | | | |
| See the checklist on the | 7A filing fee: | EPTL filing fee: | Total fee: | Make a single check or money order | |
| next page to calculate you | ır | | | payable to: | |
| fee(s). Indicate fee(s) you | | | 1 | "Department of Law" | |
| are submitting here: | \$ 25. | \$ 100. | \$ 125. | | |

CHAR500 Annual Filing for Charitable Organizations (Updated January 2022)

^{*}The "Exempt" category refers to an organization's NYS registration status. It does not refer to its IRS tax designation.

Annual Filing Checklist

Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:

- Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
- Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.
- Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

Checklist of Schedules and Attachments

| Check the schedules you must submit with your CHAR500 as described in Part 4 If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Rais If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants | |
|---|--|
| Check the financial attachments you must submit with your CHAR500: X IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable X All additional IRS Form 990 Schedules, including Schedule B (Schedule of disclosure and will not be available for public review. Our organization was eligible for and filed an IRS 990-N e-postcard. Our revisiting year. We have included an IRS Form 990-EZ for state purposes only. | |
| If you are a 7A only or DUAL filer, submit the applicable independent Certified Pul X Review Report if you received total revenue and support greater than \$250, Audit Report if you received total revenue and support greater than \$1,000, If the fiscal year begins before that date, an Audit Report is required if total No Review Report or Audit Report is required because total revenue and su We are a DUAL filer and checked box 3a, no Review Report or Audit Report Calculate Your Fee | 000 and up to \$1,000,000 000 and the fiscal year begins on or after July 1, 2021. revenue and support is greater than \$750,000 pport is less than \$250,000 |
| Calculate four Fee | |
| For 7A and DUAL filers, calculate the 7A fee: \$0, if you checked the 7A exemption in Part 3a X \$25, if you did not check the 7A exemption in Part 3a | Is my Registration Category 7A. EPTL. DUAL or EXEMPT? Organizations are assigned a Registration Category upon registration with the NY Charities Bureau: 7A filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A") |
| For EPTL and DUAL filers, calculate the EPTL fee: \$0, if you checked the EPTL exemption in Part 3b \$25, if the NET WORTH is less than \$50,000 \$50, if the NET WORTH is \$50,000 or more but less than \$250,000 \$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000 \$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000 \$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000 \$1500, if the NET WORTH is \$50,000,000 or more | EPTL filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY. DUAL filers are registered under both 7A and EPTL. EXEMPT filers have registered with the NY Charities Bureau and meet conditions in Schedule E - Registration Exemption for Charitable Organizations. These organizations are not required to file annual financial reports but may do so voluntarily. Confirm your Registration Category and learn more about NY law at www.CharitiesNYS.com. |
| Send Your Filing | 1411 |
| Send your CHAR500, all schedules and attachments, and total fee to: | Where do I find my organization's NET WORTH? NET WORTH for fee purposes is calculated on: |
| NYS Office of the Attorney General | - IRS Form 990 Part I, line 22 |

New York, NY 10005

Need Assistance?

28 Liberty Street

Visit: www.CharitiesNYS.com

Call: (212) 416-8401

Email: Charities.Bureau@ag.ny.gov

Charities Bureau Registration Section

- IRS Form 990 EZ Part I, line 21

- IRS Form 990 PF, calculate the difference between Total Assets at Fair Market Value (Part II, line 16(c)) and Total Liabilities (Part II, line 23(b)).

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Schedule 4b: Government Grants www.CharitiesNYS.com

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If you checked the box in question 4b in Part 4, complete this schedule and list EACH government grant award by a domestic (federal, state or local) agency; interstate or intergovernmental agency (for example Port Authority of New York and New Jersey); and state or local authorities.

Use additional pages if necessary. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations.

1. Organization Information

| Name of Organization: | | | | | NY Registration Number: |
|-----------------------|------------|----------|---------|-----|-------------------------|
| BIG BROTHERS-BIG | SISTERS OF | ROCKLAND | COUNTY, | INC | 02-57-78 |

2. Government Grants

| Name of Government Agency | Amount of Grant |
|-----------------------------|-----------------|
| 1. US DEPARTMENT OF JUSTICE | 1. 208212. |
| 2. COUNTY OF ROCKLAND | 2. 103913. |
| 3. STATE OF NEW YORK | з. 13000. |
| 4. | 4. |
| 5. | 5. |
| 6. | 6. |
| 7. | 7. |
| 8. | 8. |
| 9. | 9. |
| 10. | 10. |
| 11. | 11. |
| 12. | 12. |
| 13. | 13. |
| 14. | 14. |
| 15. | 15. |
| Total Government Grants: | Total: 325125. |

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1.General Information

| For Fiscal Year Beginning | 1 (mm/dd/w | yy) 01/01 | /2022 and Ending | g (mm/dd/yyyy) 12/31, | /2022 | | |
|--|--|---------------------------------------|--|---|--|--|--|
| | | | /ZUZZ and Ending | J (IIIII/UU/YYYY) 12/31/ | ····· | | |
| Check if Applicable: Address Change | Name of O | • | Employer Identification Number (EIN): 13-2983815 | | | | |
| Name Change | | | OTO STRIETS OF | F ROCKLAND COU | | | |
| | Mailing Add | | OWN ROAD | | NY Registration Number: 02-57-78 | | |
| Initial Filing | | | OWN KOAD | | | | |
| Final Filing | City / State NANUE | | 954 | | Telephone: | | |
| Amended Filing | | I, MI I(| 7334 | | 845 634-2199 | | |
| Reg ID Pending | Website: | | | | Email: gballard@bbbsofrc.c | | |
| Check your organization's | ····· | | | | | | |
| registration category: | 7A c | nly EPTI | only X DUAL (7A | & EPTL) EXEMPT* | Confirm your Registration Category in the Charities Registry at www.CharitiesNYS.com . | | |
| 2. Certification | | | | | | | |
| See instructions for certifi- | cation requi | ements. Imprope | er certification is a violation | n of law that may be subject | t to penalties. The certification requires | | |
| two signatories. | | · · · · · · · · · · · · · · · · · · · | | · | | | |
| We certify under po | enalties of p | eriury that we rev | iewed this report, includin | g all attachments, and to the | e best of our knowledge and belief, | | |
| | | | | s of the State of New York a | | | |
| | | | | GILLIAN BA | | | |
| President or Authorized (| Officer: | | | CEO | to channel administrative to the second seco | | |
| | | Signature | | | ne and Title Date | | |
| | | | | THILITAGI | le and This Bate | | |
| Chief Financial Officer or | Treasurer: | | | | | | |
| | · · · · · · · · · · · · · · · · · · · | Signature | | Print Nam | ne and Title Date | | |
| | | o.g.rata.o | | i intitudii | le and Title Bate | | |
| 3. Annual Reporting | Exemption | on | | | | | |
| Check the exemption(s) th | at apply to y | our filing. If your | organization is claiming a | n exemption under one cate | egory (7A or EPTL only filers) or both | | |
| | | | | | ed Char500. No fee, schedules, or | | |
| | | | | | e exemption, you must file applicable | | |
| schedules and attachment | | | | ,,,,,,,,,,,,,,, | a compliant, you made me approach | | |
| | | | | | | | |
| 3a, 7A filino | exemption: | Total contribution | ons from NY State includir | no residents, foundations, or | overnment agencies, etc. did not | | |
| | | | | | raising counsel (FRC) to solicit | | |
| | ns during the | | | ` , | , , | | |
| | | | | | | | |
| 3b, FPTI fil | ina exemptia | nr Gross receint | s did not exceed \$25 000 | and the market value of ass | sets did not exceed \$25 000 at any time | | |
| 3b. EPTL filing exemption: Gross receipts did not exceed \$25,000 and the market value of assets did not exceed \$25,000 at any time during the fiscal year. | | | | | | | |
| • | • | | | | | | |
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| for a checklist of Yes X No 4a. Did your organization use a professional fund raiser, fund raising counsel or commercial co-venturer | | | | | | | |
| schedules and for fund raising activity in NY State? If yes, complete Schedule 4a. | | | | | | | |
| schedules and | The same of the sa | | | | | | |
| | | 1 mm - 1 | | | | | |
| attachments to |] Yes | No 4b Did th | ne organization receive go | vernment grants? If yes, co. | molete Schedule 4h | | |
| attachments to | Yes | No 4b. Did th | ne organization receive go | vernment grants? If yes, co | mplete Schedule 4b. | | |
| attachments to complete your filing. | Yes | No 4b. Did th | ne organization receive go | vernment grants? If yes, co | mplete Schedule 4b. | | |
| attachments to complete your filing. | Yes | | ne organization receive go | vernment grants? If yes, co Total fee: | | | |
| attachments to complete your filing. 5. Fee See the checklist on the | 7A filing | | | - | Make a single check or money order | | |
| attachments to | 7A filing | | | - | | | |

CHAR500 Annual Filing for Charitable Organizations (Updated January 2022)

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