CHAR500 Online

For new annual filings, and amendments

Annual Filing for Charitable Organizations

New York State Office of the Attorney General Charities Bureau - Registration Section 28 Liberty Street New York, NY 10005 charitiesnys.com Open to Public Inspection

Filing Year: 2021 New Filing OAmendment Filing Type: **General Information** N/A Current Organization Name: NY Police and Fire Widows & Childrens Benefit Fund, Inc. Updated Name: DUAL NY Registration Number: 04-05-75 Registration Category: 133340675 Corporation EIN: Organization Type: Current Fiscal Year End: 12/31 Updated Fiscal Year End: N/A lauren.profeta@answerthecall.org Organization's Phone: 646-731-9630 Organization Email: 501(c)(3) Website: WWW.ANSWERTHCALL.ORG Tax Exempt Status: **Organization Address** Mailing Address NY State Address Principal Address 156 WEST 56TH STREET 156 WEST 56TH STREET NA **NEW YORK NEW YORK** NY NY 10019 10019 UNITED STATES **UNITED STATES Primary Contact Information** _____Title: Executive Director First Name: Lauren Last Name: Profeta Email: lauren.profeta@answerthecall.org Phone: 646-731-9630 **Organization Type** Organization Type: Public IRS990 Type of IRS document filed with IRS: Third Party Preparer Information First Name: Daniel Last Name: Romano Title: Firm Name: Grant Thornton LLP Phone: 212-599-0100 Email: Daniel.Romano@us.gt.com **Third Party Address** Street: 757 Third Avenue, 3rd Floor City: New York State: NY Country: United States Zip: 10017-2013

Registration Category
 Does the organization conduct activity in New York State (other than soliciting)? This may include, but is not limited to, maintaining an office, having employees or running a program. Yes
 Does the organization have assets in New York State? Yes O No
3. Is the organization incorporated or formed in New York State? O Yes O No N/A
4. Does the organization solicit, or plan to solicit or receive more than \$25,000 annually in total contributions from New York State residents, foundations, corporations, or government agencies?
 Yes ONo Does the organization use a professional fundraiser or fundraising counsel? Yes No
Based on your responses to the above questions, this organization's registration category remains as DUAL
Public Charity
 Did the organization solicit or receive contributions during the fiscal year in New York State? Yes O No
2. Was the organization required to submit a Schedule B to the IRS in this reporting period? • Yes ONo
3. Organizations have two options, to submit a redacted Schedule B, or to enter the total New York State contributions in the fiscal year:
OI would like to enter the total New York State Contributions I would like to submit a redacted Schedule B
4. Choose the total contributions in New York State this fiscal year: N/A
Annual Exemptions
 Were the total contributions from New York State, including residents, foundations, government agencies, etc. unde \$25,000 during the fiscal year? Yes No
 Did the organization use a professional fundraiser or fundraising counsel during the fiscal year? Yes No
 Were the organization's gross receipts under \$25,000 and the market value of its assets under \$25,000 during the fiscal year? O Yes No
Based on your responses to annual exemption questions, this organization is required to file under <u>DUAL</u> during this fiscal year.

Financial Information			
Type of IRS document filed with IRS	IRS990	Organization's total revenu	_{ue:} 16,506,243
Organization's total contributions:	5,471,120	Organization's total assets	N/A
Organization's net assets:	62,359,610	Organization's total revenue N/A	
Organization's total liabilities:	N/A	and contributions:Organization's total assets	/ N/A
Organization's total income:	N/A	worth:	,
Was the organization required to su OYes ONo N/A For the current filing year, does you			harities Bureau Registration?
□Closing □ Withdrawing		☑ None	-
Is this your final filing with New Yor	k State? OYes	O _{No} N/A	
Filing Information			
Did the organization use a profession	nal fundraiser or fundr	aising counsel to solicit contribut	ions in New York State?
O _{Yes} ⊙ No			
General Informa	ition	Description of Services	Description of Compensation
Name of Firm: N/A		N/A	N/A
Type: N/A Reg	Number: <u>N/A</u>	-	
Contract Start: N/A Cont	ract End: <u>N/A</u>	_	
Amount Paid: N/A	Phone : N/A	_	
Mailing Address: N/A			
Name of Firm: N/A		N/A I	N/A
Type: N/A Registration ID: N/A		_	
Contract Start: N/A Contr	act End: N/A		
Amount Paid: N/A	Phone : N/A		
Mailing Address: N/A			
Name of Firm: N/A		N/A	N/A

Registration ID: N/A

Contract End: N/A

Phone : N/A

Type: N/A

Contract Start: N/A

Amount Paid: N/A

Mailing Address: N/A

Did the organization receive government grants during this fiscal year?

O Yes ● No

Government Grant Agency	Grant Amount
N/A	N/A

Documents

Attached organization's required documents:

- ☑ IRS document
- ☑ Certified Public Accountant's Audit Report
- ☐ Certified Public Accountant's Review Report
- ☐ Complete Certificate of Amendment or other document amending the name
- ☐ Schedule B
- Redacted Schedule B
- ☑ Other documents

Signatures

We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

Role	First Name	Last Name	Email
Chairman	Stephen	Dannhauser	stephen.dannhauser@weil.com
Treasurer	John	Nolan	john.nolan@answerthecall.org

Signature of Chairman Stylen Dannlawer

Signature of Treasurer C684036ED2E4480

Date: 11/1/2022

Date: 11/2/2022