### 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: 2022 New Filing OAmendment Filing Type: **General Information** N/A Current Organization Name: Access Justice Brooklyn, Inc. **Updated Name:** DUAL 05-20-67 Registration Category: NY Registration Number: 113155182 Corporation EIN: Organization Type: 12/31 Updated Fiscal Year End: N/A **Current Fiscal Year End:** Heidi@accessjusticebk.org Organization's Phone: 7186245446 Organization Email: 501(c)(3) Website: https://accessjusticebrooklyn.org Tax Exempt Status: **Organization Address** Mailing Address NY State Address Principal Address 44 COURT STREET, SUITE 44 COURT STREET, SUITE NA 1206 1206 **BROOKLYN BROOKLYN** NY NY 11201 11201 **UNITED STATES UNITED STATES Primary Contact Information** \_\_\_\_Title: President & CEO First Name: Heidi Last Name: Henderson Email: heidi@accessjusticebk.org Phone: 7186245446 **Organization Type** Organization Type: Public IRS990 Type of IRS document filed with IRS: Third Party Preparer Information First Name: N/A Last Name: N/A Title: N/A Firm Name: N/A Phone: N/A Email: N/A **Third Party Address** Street: N/A City: N/A State: N/A N/A Country: N/A Zip:

Registration Category
<ol> <li>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 staff, or running a program.</li> <li>Yes ONo</li> </ol>
<ol> <li>Does the organization have assets in New York State?</li> <li></li></ol>
<ol> <li>Is the organization incorporated or formed in New York State?</li> <li></li></ol>
4. Does the organization solicit, or plan to solicit, or receive \$25,000 or more annually in total contributions from
New York State residents, foundations, corporations, or government agencies, etc.?  ● Yes ○ No
5. Does the organization use a professional fundraiser or fundraising counsel?
O Yes ● No
Based on your responses to the above questions, this organization's registration category remains as DUAL
Public Charity
<ol> <li>Did the organization solicit or receive contributions during the fiscal year in New York State?</li> <li>Yes ONo</li> </ol>
3. Choose the total contributions in New York State this fiscal year: \$1,000,000-\$4,999,999
Annual Exemptions
<ol> <li>Were the total contributions from New York State, including residents, foundations, government agencies, etc. under \$25,000 during the fiscal year?</li> </ol>
<ul> <li>Yes</li> <li>No</li> <li>N/A</li> <li>Did the organization use a professional fundraiser or fundraising counsel during the fiscal year?</li> <li>Yes</li> <li>No</li> <li>N/A</li> </ul>
<ul> <li>3. Were the organization's gross receipts under \$25,000 and the market value of its assets under \$25,000 during the fiscal year?</li> <li>○ Yes  No</li> </ul>
Based on your responses to annual exemption questions, this organization is required to file under <u>DUAL</u> during this fiscal year.

Financial Information				
Гуре of IRS document filed with IRS	IRS990	Org	anization's total reven	ue: <u>1,712,976</u>
Organization's total contributions:	1,741,066	Org	anization's total asset	s: N/A
Organization's net assets: 1,665,382			ganization's total rever	nue N/A
Organization's total liabilities:	zation's total liabilities:  N/A  Organization's total assets/	s/ N/A		
Organization's total income:	N/A	-	rth:	<i></i>
For this filing year, does your organiz	zation plan to com	nplete any of t	he following with the I	New York State Charities Burea
□Closing □ Withdrawing	□ Dissolving	☑ None		
s this your final filing with New Yorl	« State? OY	es ONo	N/A	
O <sub>Yes</sub> $\Theta_{No}$				D (0
General Informa  Name of Firm: N/A	tion	N/A	ription of Services	Description of Compensation N/A
	Number: N/A			
_	act End: N/A			
Amount Paid: N/A	Phone : N/A			
Mailing Address: N/A				
Name of Firm: N/A		N/A		N/A
Type: N/A Registra	ation ID: <u>N/A</u>			
Contract Start: N/A Contra	act End: <u>N/A</u>			
<u> </u>	Phone : N/A			
Mailing Address: N/A				
		N/A		N/A
Name of Firm: 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?

Yes O No

Government Grant Agency	Grant Amount
NYS IOLA	\$197,139.00
NYS Office of the Attorney General (HOPP)	\$203,679.00
Center for New York City Neighborhoods	\$95,000.00
NYS OCA Judicial Civil Legal Sevices	\$495,295.00
	To be continued in Appendix page 2

#### **Documents**

Attached	organization'	's required	documents:
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- ☑ IRS document
- ☑ Certified Public Accountant's Audit Report
- ☐ Certified Public Accountant's Review Report
- ☐ Complete Certificate of Amendment or other document amending the name
- □ 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.

First Name	Last Name	Email
Heidi	Henderson	Heidi@accessjusticebk.org
Scottye	Lindsey	scottye.lindsey@gmail.com
	Heidi	Heidi Henderson

Signature of President — Docusigned by: Heidi Henderson

Date: 11/13/2023

Signature of Treasurer

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Date: 11/13/2023

# Filing Information

General Information	Description of Services	Description of Compensation
Name of Firm: N/A	N/A	N/A
Type: N/A Registration ID: N/A		
Contract Start: N/A Contract End: N/A		
Amount Paid: N/A Phone : N/A		
Mailing Address: N/A		
Name of Figure		N / 2
Name of Firm: N/A	N/A	N/A
Type: N/A Registration ID: N/A		
Contract Start: N/A Contract End: N/A		
Amount Paid: N/A Phone : N/A		
Mailing Address: N/A		
Name of Firm: N/A	N/A	N/A
Type: N/A Registration ID: N/A		
Contract Start: N/A Contract End: N/A		
Amount Paid: N/A Phone : N/A		
Mailing Address: N/A		
Name of Firm: N/A	N/A	N/A
Type: N/A Registration ID: N/A		
Contract Start: <u>N/A</u> Contract End: <u>N/A</u>		
Amount Paid: N/A Phone : N/A		
Mailing Address: N/A		

Government Grant Agency	Grant Amount
NYS Division of Criminal Justice Services	\$60,824.00
New York City Council	\$7,500.00
N/A	N/A