## 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 Type:	New Filir	ng OAm	endment	Filing Year: 202	22	_
General Inf	ormation					
		Center for S	Safety and Change, Inc.	Updated Nan	ne:	N/A
NY Registration		02-56-77		Registration Category:		DUAL
Organization T		Corporation	n	EIN:	<b>.</b>	132989233
Current Fiscal \		12/31		Updated Fisca	al Year End:	N/A
Organization E			entersc.org	' Organization'		845-634-3391
Tax Exempt Sta		501(c)(3)		Website:		WWW.CENTERFORSAFETYANDCHANGE.OI
Organization A	Address					
M	lailing Address		Principal A	ddress		NY State Address
9 Johnson New City NY 10956 UNITED S			9 Johnsons Lane New City NY 10956 UNITED STATES	3	NA 	
Primary Contact Information  First Name: STEVEN  Last Name: CARROLL Title: FINANCE DIRECTOR  Phone: 845-634-3391  Email: SCARROLL@CENTERSC.ORG						
Organization T	••	vith IRS: <u>I</u>	RS990 Orga	nization Type:	Public	
Third Party	Preparer I	nformatio	n			
First Name: _[	David		Last Name: Rail	ken	Title:	Auditor
Firm Name: <u>I</u>	Berard & Asso	ociates	Phone: <u>845</u>	3575668	Email:	dave@berardcpas.com
Third Party Ad	ldress					
Street: 44 P	ark Ave					
City: Suffe	ern		State	: NY		
Zip: 1090	)1		Country	: United States		

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 running a program.</li> <li>Yes</li> </ol>
<ol> <li>Does the organization have assets in New York State?</li> <li>Yes O No</li> </ol>
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 fro New York State residents, foundations, corporations, or government agencies?
<ul> <li>Yes ONo</li> <li>Does the organization use a professional fundraiser or fundraising counsel?</li> <li>Yes No</li> </ul>
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</li> <li>○ No</li> </ol>
<ol> <li>Was the organization required to submit a Schedule B to the IRS in this reporting period?</li> <li>●Yes ○No</li> </ol>
3. Organizations have two options, to submit a redacted Schedule B, or to enter the total New York State contributions in the fiscal year:
●I 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: \$5,000,000-\$9,999,999
Annual Exemptions
<ol> <li>Were the total contributions from New York State, including residents, foundations, government agencies, etc. unde \$25,000 during the fiscal year?</li> <li>O Yes</li> <li>O No</li> <li>N/A</li> </ol>
<ol> <li>Did the organization use a professional fundraiser or fundraising counsel during the fiscal year?</li> <li>Yes</li> <li>No</li> </ol> N/A
<ol> <li>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> </ol>
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 reven	ue: <u>7,758,292</u>
Organization's total contributions:	7,080,407	Organization's total assets	: <u>N</u> /A
Organization's net assets:	2,734,093	Organization's total revenue N/ and contributions: Organization's total assets/ N/	ue N/A
Organization's total liabilities:	N/A		s/ <u>N/A</u>
Organization's total income:	N/A	worth:	
Was the organization required to su OYes ONo N/A  For the current filing year, does you Closing Withdrawing Is this your final filing with New Yor  Filing Information  Did the organization use a profession	ur organization plan to do □Dissolving ☑ rk State? OYes	o any of the following with its C None ONo N/A	
Oyes •No	mai iuliuraisei oi iuliura	ising counser to solicit contribu	tions in New York State:
General Informa	ation	Description of Services	Description of Compensation
Name of Firm: N/A		N/A	N/A
Type: N/A Reg	Number: N/A		
Contract Start: N/A Cont	ract End: <u>N/A</u>		
Amount Paid: N/A	Phone : N/A		

Name of Firm: N/A	N/A	N/A
Type: <u>N/A</u> Reg Number: <u>N/A</u>	_	
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: N/A Contract End: N/A	_	
Amount Paid: N/A Phone : N/A	_	
Mailing Address: N/A		

Did the organization receive government grants during this fiscal year?

Yes O No

Government Grant Agency	Grant Amount	
OFFICE FOR THE PREVENTION DOMESTIC VIOLENCE - PEAF	\$151,172.42	
OFFICE FOR THE PREVENTION DOMESTIC VIOLENCE - SAFE	\$25,708.98	
OFFICE FOR VICTIMS OF CRIME	\$30,618.75	
OFFICE FOR VICTIMS OF CRIME	\$2,932,493.06	
	To be continued in Appendix page 2	

## Documents

Attached	organization's	s required	documents:
Attacheu	Organization .	3 required	documents.

- ☑ IRS document
- ☐ 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
Executive Director	ELIZABETH	SANTIAGO	esantiago@centersc.org
Director of Finance	STEVEN	CARROLL	scarroll@centersc.org

Signature of Executive Director Elizabeth Santiago	Date:	5/15/2023
Signature of Director of Finance Struck Carroll	Date:	5/12/2023

# 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 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: N/A Contract End: N/A		
Amount Paid: N/A Phone : N/A		
Mailing Address: N/A		

Government Grant Agency	Grant Amount	
DEPARTMENT OF JUSTICE - JUSTICE FOR FAMILIES PROGR	\$202,413.08	
DEPT OF JUSTICE SEXUAL ASSAULT SERVICES PROGRAM	\$8,639.46	
NYS - DIVISION OF CRIMINAL JUSTICE SERVICES - SASP	\$45,722.00	
NYS - DIVISION OF CRIMINAL JUSTICE SERVICES - SA C	\$80,910.00	
NYS - OFFICE FOR THE PREVENTION OF DOMESTIC VIOLEN	\$64,833.87	
Sen. Reichlin-Melnick Gun Violence	\$50,000.00	
NYS - DIVISION OF CHILD CARE SERVICES	\$45,708.32	
ROCKLAND COUNTY DEPT OF SOCIAL SERVICES	\$516,802.33	
ROCKLAND COUNTY PROBATION DEPT	\$63,200.00	
-	To be continued in Appendix page2	

# 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 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: N/A Contract End: N/A		
Amount Paid: N/A Phone : N/A		
Mailing Address: N/A		

Government Grant Agency	Grant Amount	
US DEP HOUSING AND URBAN DEVELOPMENT - COC	\$319,535.89	
NYS DIV CRIMINAL JUSTICE SERVICES	\$326,250.00	
FEMA EMERGENCY FOOD AND SHELTER PROGRAM	\$23,900.00	
NYS OFFICE OF CHILDREN AND FAMILY SERVICES	\$319,743.05	
N/A	N/A	

Statement of Financial Position December 31, 2022

ASSETS	
Cash	\$ 75,611
Grants and accounts receivable, net	1,092,262
Contributions receivable, net	186,236
Prepaid expenses	23,971
Security deposit	8,333
Other receivable	1,950
Operating lease right-of-use assets	344,736
Property and equipment, net	 2,485,741
Total Assets	\$ 4,218,840
LIABILITIES AND NET ASSETS	
Liabilities	
Accounts payable and accrued expenses	\$ 432,826
Accrued vacation	41,203
Line of credit	304,865
Note payable	89,117
Operating lease liability	344,736
Promissory note payable	 272,000
Total Liabilities	 1,484,747
Net Assets	
Without donor restrictions	
Undesignated	537,469
Investment in property and equipment, net	 2,124,624
Total without donor restrictions	2,662,093
With donor restrictions	72,000
Total Net Assets	2,734,093
Total Net Assets and Liabilities	\$ 4,218,840

Statement of Activities Year Ended December 31, 2022

	hout Donor estrictions	th Donor strictions	Total
REVENUE, SUPPORT AND RECLASSIFICATIONS			
Grants from governmental agencies Governmental shelter services Corporate, foundation and individual contributions Special events Direct cost of donor benefits In-kind revenue	\$ 5,405,798 566,867 280,426 710,908 (142,925) 431,026	\$ - - 50,000 - - -	\$ 5,405,798 566,867 330,426 710,908 (142,925) 431,026
Paycheck protection program revenue	747,431	<u>-</u>	747,431
Net assets released from restrictions	95,000	 (95,000)	
Total Revenue, Support and Reclassifications	 8,094,531	(45,000)	8,049,531
EXPENSES			
Program Services			
Residential programs	659,364	-	659,364
Non-residential programs	 6,095,502	 <del>-</del>	6,095,502
Total Program Services	6,754,866	-	6,754,866
Supporting Services			
General and administrative	672,280	-	672,280
Fundraising	306,703	 	306,703
Total Supporting Services	 978,983	 	978,983
Total Expenses	7,733,849		7,733,849
Change in Net Assets	360,682	(45,000)	315,682
NET ASSETS			
Beginning of year	 2,301,411	117,000	2,418,411
End of year	\$ 2,662,093	\$ 72,000	\$ 2,734,093

CENTER FOR SAFETY & CHANGE, INC.
Statement of Expenses
Year Ended December 31, 2022

			Prograr	Program Services				Supp	Supporting Services					
	ፎ ፲	Residential Programs	Non-F Pro	Non-Residential Programs	Total F	Total Programs	General and Administrative		Fundraising		Total	Direct Cost of Donor Benefits	To	Total Expenses
PERSONNEL COSTS Salaries and wages Payroll taxes and employee benefits	↔	278,435 49,943	↔	3,641,122 8 653,103	€	3,919,557 \$ 703,046	2	299,208 \$ 53,669	185,817 33,330	↔	485,025 86,999	; ; \$	↔	4,404,582 790,045
Total Personnel Costs		328,378		4,294,225	•	4,622,603	352	352,877	219,147		572,024	1		5,194,627
OTHER EXPENSES							,	0			7			7
Consultants and professional fees				300,854		300,854	127	7,500 127,589			127,589	ı		7,300 428,443
Data processing				122,696		122,696	43	43,127	- 0		43,127	1		165,823
Depreciation Equipment and maintenance		19,184		49,963 21,119		69,14 <i>/</i> 21,119	ر٠.	3,587	10,676		14,263			83,410
Food		1,930		18,235		20,165	_	1,062			1,062			21,113
Advertising		,		3,176		3,176		,	•			•		3,176
Insurance		7,768		23,052		30,820	w	8,736	İ		8,736	•		39,556
Interest		11,445		29,807		41,252	(N	2,140	6,369		8,509	1		49,761
Legal services		1		17,227		17,227			İ		1	•		17,227
Lodging and housing assistance		1		266,670		266,670			ı		•	- 442 024		266,670 442,025
Occupancy		118 057		- 787 626		300 544	71	- 17 673	52 607		- 080 02	142,923		142,925
Occupancy Office supplies and printing		1947		115.459		117 406	25	25 706	755		76,461			143 867
Postage		)		545		545	í	) '	1,652		1,652	•		2,197
Program supplies		629		61,100		61,779						•		61,779
Telephone		7,712		59,583		67,295	(T)	3,491	10,391		13,882	•		81,177
Travel, conferences and meetings		1,736		176,132		177,868	22	22,068	1		22,068	•		199,936
Other		729		18,003		18,732	30	30,666	5,106		35,772	•		54,504
Total expenses		499,565		5,850,333	-	6,349,898	646	646,222	306,703		952,925	142,925		7,445,748
Less expenses included with revenues on the statement of activities	φ	1		·		·		,	1		'	(142,925)		(142,925)
Total Expenses Before In-Kind		499,565		5,850,333		6,349,898	646	646,222	306,703		952,925			7,302,823
IN-KIND In-kind professional services		20,013		175,853		195,866	N	2,058	1		2,058	ı		197,924
In-kind legal services		•		63,983		63,983			•		•	•		63,983
In-kind goods In-kind space		139,786		5,333		139,786 5,333	24	24,000	' '		24,000	' '		139,786 29,333
Total In-Kind		159,799		245,169		404,968	26	26,058	'		26,058			431,026
Total Expenses	₩	659,364	₩	6,095,502	φ	6,754,866 \$		672,280 \$	306,703	<del>s</del>	978,983	٠	↔	7,733,849

Statement of Cash Flows Year Ended December 31, 2022

CASH FLOWS FROM OPERATING ACTIVITIES	
Change in net assets	\$ 315,682
Adjustments to reconcile change in net assets	
to net cash from operating activities	
Depreciation	83,410
Reduction of promissory note payable - Rockland County	(25,000)
Changes in operating assets and liabilities	
Grants and accounts receivable	349,397
Contributions receivable	41,693
Other receivable	(1,950)
Prepaid expenses	(19,673)
Security deposit	(833)
Accounts payable and accrued expenses	157,296
Accrued vacation	(13,297)
Refundable advance	(18,500)
Paycheck Protection Program funding advance	 (747,251)
Net Cash provided by Operating Activities	120,974
CASH FLOWS FROM INVESTING ACTIVITIES	
Purchases of leasehold improvements	(22,180)
Purchases of building improvements	 (488,292)
Net Cash used by Investing Activities	 (510,472)
CASH FLOWS FROM FINANCING ACTIVITIES	
Proceeds from loans, note and promissory note payable	304,865
Repayments of loans, note and promissory note payable	(67,621)
Net Cash provided by Financing Activities	237,244
	_
Net Change in Cash	(152,254)
Not change in cash	(102,204)
CASH	
Beginning of year	 227,865
End of year	\$ 75,611
•	 <u> </u>
SUPPLEMENTAL CASH FLOW INFORMATION	
Cash paid during the year for interest	\$ 49,761
Non-Cash Contributions	\$ 431,026

# CENTER FOR SAFETY & CHANGE, INC. Statement of Expenses Year Ended December 31, 2021

		Program services	SS		Supporting Services	g services	
	Residential Programs	Non-Residential Programs	Total Programs	General and Administrative	Fundraising	Direct cost of donor benefits	Total
PERSONNEL COSTS Salaries and wages Payroll taxes and employee benefits	\$ 243,681	\$ 3,515,555 608,763	\$ 3,759,236	\$ 172,309 29,838	\$ 147,093 25,471	 ↔	\$ 319,402
Total Personnel Costs	285,878	4,124,318	4,410,196	202,147	172,564		374,711
OTHER EXPENSES							
Bad debts	•	•	•	•	•	•	•
Consultants and professional fees	•	343,576	343,576	109,572	•	•	109,572
Data processing	•	98,098	98,098	42,853	•	•	42,853
Depreciation	17,883	46,574	64,457	3,343	9,953	•	13,296
Equipment and maintenance	1,347	44,782	46,129	•		•	1
Food	458	11,054	11,512	96	•	•	96
Advertising	•	3,627	3,627	•	•		1
Insurance	7,371	30,728	38,099	2,000	•	•	2,000
Interest	998'9	17,881	24,747	1,284	3,821	•	5,105
Legal services	•	19,262	19,262	•	•	•	'
Lodging and housing assistance	•	77,882	77,882	'	'	'	•
Meals and entertainment	•	•	•	•	•		•
Occupancy	101,617	273,154	374,771	17,716	52,736	•	70,452
Office supplies and printing	153	93,493	93,646	•	438	•	438
Postage	•	1,608	1,608	•	209	•	209
Program supplies	•	90,675	90,675	'	'	•	'
Telephone	19,960	38,101	58,061	3,012	8,965	•	11,977
Travel, conferences and meetings	972	111,290	112,262	71,221	1	•	71,221
Other	672	7,933	8,605	25,807	-	•	25,807
Total expenses	443,177	5,434,036	5,877,213	479,051	248,686	•	727,737
Less expenses included with revenues on the statement of activities	•	•	•	•	•		
Total Expenses Before In-Kind	443,177	5,434,036	5,877,213	479,051	248,686		727,737
IN-KIND							
In-kind professional services	•	132,499	132,499	•	•	•	•
III-kiid goods	132 080	026,822	132 080	' '			' '
In-kind space	76,553	1	76,553	24,000	•	1	24,000
Total In-Kind	208,633	362,025	570,658	24,000	'	•	24,000

Statement of Activities Year Ended December 31, 2021

	thout Donor estrictions	With Donor Restrictions	2021 Total
Grants from governmental agencies Governmental shelter services Contributions and foundation grants Special events revenue Direct cost of donor benefits In-kind revenue Other revenue Net assets released from restrictions Prior period adjustment	\$ 4,826,394 345,026 285,321 693,465 (102,938) 594,658 668,047 156,860	\$ - 72,500 - - - (156,860)	\$ 4,826,394 345,026 357,821 693,465 (102,938) 594,658 668,047
Total revenues	 7,466,833	(84,360)	7,382,473
EXPENSES  Residential programs  Non-residential programs  Total program expenses	 651,810 5,796,061 6,447,871	- - -	651,810 5,796,061 6,447,871
General and administrative Fundraising	 503,051 248,686		503,051 248,686
Total expenses	 7,199,608		7,199,608
Change in net assets	267,225	(84,360)	182,865
Net assets, beginning	 2,034,186	201,360	2,235,546
Net assets, ending	\$ 2,301,411	\$ 117,000	\$ 2,418,411

# Center for Safety & Change

**Restricted Donations** 

		YE 2021	2022 New	Uses
Carry Forward (Founde Barbara Valente	er's Plrating Support for oor Children and Yo	•	- 50,000.00	45,000.00 50,000.00
				95,000.00

Subject to expenditures for specified purpose	Balance December 31, 2021	Additions	Releases	Balance December 31, 2022
General operating support for future years	\$117,000	-		72,000
Outreach and education	-	50,000	(45,000) (50,000)	-
	\$117,000	\$50,000	(\$95,000)	\$72,000

Subject to expenditures for specified purpose	Balance cember 31, 2021	Α	Additions	F	Releases	Balance cember 31, 2022
General operating support for future years	\$ 117,000	\$	-	\$	(45,000)	\$ 72,000
Outreach and education	-		50,000		(50,000)	-
	\$ 117,000	\$	50,000	\$	(95,000)	\$ 72,000

## **Ending Balance**

Uses

72,000.00 Founders Pledge, General Operating

- 4th Floor Children and Youth

# Schedule B (Form 990)

**Schedule of Contributors** 

OMB No. 1545-0047

2022

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

Name of the organization Employer identification number CENTER FOR SAFETY & CHANGE, INC. 13-2989233 Organization type (check one): Filers of: Section: |X| 501(c)( 3 ) Form 990 or 990-EZ (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions

totaling \$5,000 or more during the year.....

BAA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2022)

Page 2 Schedule B (Form 990) (2022) Name of organization Employer identification number

CENTER FOR SAFETY & CHANGE, INC. 13-2989233

Part I	Contributors	(see instructions).	Use duplicate	copies of Part I	if additional	space is needed.
--------	--------------	---------------------	---------------	------------------	---------------	------------------

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	FEDERAL GOVERNMENT  9 JOHNSON LANE  NEW CITY, NY 10956	\$4,340,475.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2	STATE OF NEW YORK  ALBANY RD  ALBANY, NY 10011	\$241,465.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3	ROCKAND COUNTY  1 SOUTH MAIN STREET  NEW CITY , NY 10901	\$625,711.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
 BAA	TEEA0702L 07/22/22	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

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Name of organization

CENTED FOR SAFETY S. CHANCE THE

Employer identification number

CENTER FOR SAFETY & CHANGE, INC. 13-2989233

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional sp	pace is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A		
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		  \$ 	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ 	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	
		\$ 	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<u> </u>		
	<u> </u>	\$ 	

Schedule B (Form 990) (2022)

	FOR SAFETY & CHANGE, INC.			13-2989233	
Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8),				
	or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of <i>exclusively</i> religious, charitable, etc.,				
	the following line entry. For organizations c contributions of <b>\$1,000</b> or <b>less</b> for the year.	ompleting Part III, enter the total	al of <i>exclusiv</i> ee instruction		
	Use duplicate copies of Part III if additional	space is needed.	ee iristructioi	s.) \$N/A	
(a) No.	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
from Part I	(b) Fullpose of gift	(c) use or gift		(u) Description of now gift is field	
raiti	N/A				
	N/ A			<del> </del>	
				<del> </del>	
				<del> </del>	
	(e) Transfer of gift  Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee		
	<u> </u>				
	<u> </u>				
(a) No.	455 (16	( ) ( ) ( )		(55 ) (1 ) (2)	
from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
Part I					
				<del> </del>	
				<del> </del>	
	<u> </u>			<del> </del>	
	(a) Transfer of gift				
	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
	L				
(a) No.					
from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
Part I					
	<u> </u>			<del> </del>	
				<del> </del>	
				<del> </del>	
		(e) Transfer of gif			
Transferee's name, address, and ZIP + 4 Relationship of			ationship of transferor to transferee		
	L				
(-) N -				T	
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
Part I					
	<b> </b>				
	<b> </b>			<del> </del>	
	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
		<b></b>			

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