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 <u>charitiesnys.com</u> Open to Public Inspection

Filing Type:	New Filir	ng OAm	endment	Filing Year: 202	21	_
General Inf	ormation					
Current Organi	ization Name:	BEHIND	THE BOOK, INC.	Updated Nan	ne:	N/A
NY Registratio	n Number:	20-60-94	Registration C		Category:	DUAL
Organization T	ype:	Corporation	1 EIN:			320086097
Current Fiscal \	Year End:	06/30		Updated Fisca	ıl Year End:	N/A
Organization E	mail:	info@behin	ndthebook.org Organization's		s Phone:	212 222-3627
Tax Exempt Sta	atus:	501(c)(3)	Website:			www.behindthebook.org
Organization A	Address					
M	lailing Address		Principal Address			NY State Address
216 West 135th Street New York NY 10030 UNITED STATES		216 West 135th Street New York NY 10030 UNITED STATES		NA		
Primary Conta	ect Information	n				
First Name: <u>C</u>	Christy		— Last Name: Hoo	od	Title: _	Operations Manager
Phone: 212 222-3627 Email: chood@behindthebook.org						
Organization T Type of IRS do		vith IRS: <u>IF</u>	RS990 Orga	ınization Type: <u> </u>	Public	
Third Party	Preparer I	nformatio	n			
First Name: _	Michael		Last Name: Wal	llace	Title: _	Partner
Firm Name: Lutz and Carr, CPAs LLP		Phone: 212	-697-2299	Email:	mwallace@lutzandcarr.com	
Third Party Ad	ldress					
Street: <u>551</u>	5th Ave,Suite	400				
City: New	York		State	: <u>NY</u>		
Zip: 1017	76		Country	: United States		

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 ONo
 Does the organization have assets in New York State? Yes O No
 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 ONoDoes 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
 Did the organization solicit or receive contributions during the fiscal year in New York State? Yes O No
 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:
• 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: \$1,000,000-\$4,999,999
Annual Exemptions
 Were the total contributions from New York State, including residents, foundations, government agencies, etc. under \$25,000 during the fiscal year? O Yes O No N/A
 Did the organization use a professional fundraiser or fundraising counsel during the fiscal year? O Yes O No N/A
3. 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.

Mailing Address: N/A

Financial Information						
Type of IRS document filed with IRS	IRS990	Organization's total reve	nue: <u>1,375,285</u>			
Organization's total contributions:	1,297,388	Organization's total asset	ts: N/A			
Organization's net assets:	894,490	Organization's total reve	nue N/A			
Organization's total liabilities:	N/A	and contributions:				
Organization's total income: N/A		Organization's total asse worth:	ts/ N/A			
Was the organization required to su OYes ONo N/A	ubmit a Schedule B to th	e IRS in this reporting period?				
For the current filing year, does you	ır organization plan to d	o any of the following with its	Charities Bureau Registration?			
□Closing □ Withdrawing	☐ Dissolving 区	None				
Is this your final filing with New Yor	k State? OYes	O _{No} N/A				
Filing Information						
Did the organization use a professional fundraiser or fundraising counsel to solicit contributions in New York State? Oyes No						
General Informa	ation	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: 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 Registr	ation ID: <u>N/A</u>					
Contract Start: N/A Contr	ract End: <u>N/A</u>					
Amount Paid: N/A	Phone : N/A					
Mailing Address: N/A						
		N/A	N/A			
Name of Firm: N/A	ration ID: N/A	11/ 13	N/ A			
Type: 1VA	ration ID: N/A					
Contract Start:	ract End: <u>N/A</u> Phone : _{N/A}					
Amount Daid: N/A	THULE, N/A		T I			

Did the organization receive government grants during this fiscal year?

Yes O No

Government Grant Agency	Grant Amount
New York City Department of Cultural Affairs	\$50,600.00
U.S. SMALL BUSINESS ADMINISTRATION - PPP	\$80,700.00
N/A	N/A
N/A	N/A
N/A	N/A

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Attached	organization	's required	l c	locuments:
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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
- ☐ 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	Andrew	Frank	andrew@behindthebook.org		
Treasurer	easurer Brian Trauman		btrauman@kpmg.com		
C:	— DocuSigned by:		5.		

Signature of Executive Director Andrew Frank

Date: 2/20/2023

Signature of Treasurer DocuSigned by:

Date:

2/26/2023