# **B**UCHBINDER

FDNY FOUNDATION, INC. 9 METROTECH CENTER BROOKLYN, NY 11201

FDNY FOUNDATION, INC.:

ENCLOSED ARE THE ORIGINAL AND ONE COPY OF THE 2021 EXEMPT ORGANIZATION RETURNS, AS FOLLOWS...

2021 FORM 990

2021 FORM 990-T

2021 NEW YORK FORM CT-13

2021 NEW YORK FORM CHAR500

EACH ORIGINAL SHOULD BE DATED, SIGNED AND FILED IN ACCORDANCE WITH THE FILING INSTRUCTIONS. THE COPY SHOULD BE RETAINED FOR YOUR FILES.

VERY TRULY YOURS,

BUCHBINDER TUNICK & CO. LLP

One Pennsylvania Plaza Suite 3200 New York, NY 10119 212.695.5003 150 Clove Road 5<sup>th</sup> Floor Little Falls, NJ 07424 862.946.6100 6720-A Rockledge Drive Suite 510 Bethesda, MD 20817 240.200.1400 500 North Broadway Suite 101 Jericho, New York 11753 212.695.5003 Buchbinder Tunick & Company LLP Certified Public Accountants buchbinder.com Follow us on **inkedim** 

## TAX RETURN FILING INSTRUCTIONS

NEW YORK FORM CHAR500

#### FOR THE YEAR ENDING

JUNE 30, 2022

	Prepared for
. LLP 3200 )2	Prepared by
	Amount due or refund
	Make check payable to
GENERAL TRATION SECTION	Mail tax return and check (if applicable) to
POSSIBLE.	Return must be mailed on or before
IGNED AND DATED BY THE AUTHORIZED	Special Instructions
3200 D2 GENERAL TRATION SECTION POSSIBLE. IGNED AND DATED BY THE AUTHORIZED	Amount due or refund Make check payable to Mail tax return and check (if applicable) to Return must be mailed on or before Special

# CHAR500

NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com

Open to Public Inspection

1.General Information	on							
For Fiscal Year Beginning	(mm/dd/yyyy) 07/01/	2021 and Ending (r	mm/dd/yyyy) 06/30/	2022				
Check if Applicable:	Name of Organization: FDNY FOUNDATIO	N, INC.		Employer Identification Number (EIN): $11 - 2632404$				
Name Change	Mailing Address: <b>9 METROTECH CE</b>	NTER		NY Registration Number: 02-98-21				
Final Filing								
Reg ID Pending	Website: WWW • FDNYFOUNDA	TION.ORG		Email: JEAN.OSHEA@FDNY.NYC				
Check your organization's registration category: 7A only EPTL only X DUAL (7A & EPTL) EXEMPT* Confirm your Registration Category in the Charities Registry at www.CharitiesNYS.com.								
2. Certification								
See instructions for certific two signatories.	cation requirements. Imprope	r certification is a violation	of law that may be subject	t to penalties. The certification requires				
	enalties of perjury that we revi true, correct and complete in			e best of our knowledge and belief, applicable to this report.				
President or Authorized (	Officer:		JEAN O'SHE EXECUTIVE					
Chief Financial Officer or	Signature Treasurer:		Print Name MATTHEW DI TREASURER					
	Signature		Print Name	e and Title Date				
3. Annual Reporting	Exemption							
Check the exemption(s) th	at apply to your filing. If your	organization is claiming an	exemption under one cate	egory (7A or EPTL only filers) or both				
categories (DUAL filers) th	at apply to your registration,	complete only parts 1, 2, a	nd 3, and submit the certif	ied Char500. No fee, schedules, or				
	e required. If you cannot clain ts and pay applicable fees.	n an exemption or are a DU	AL filer that claims only or	ne exemption, you must file applicable				
exceed \$25	· · · · ·			overnment agencies, etc. did not raising counsel (FRC) to solicit				
3b. EPTL fi during the	<u> </u>	s did not exceed \$25,000 a	and the market value of as	ssets did not exceed \$25,000 at any time				
4. Schedules and At	tachments							
See the following page for a checklist of Schedules and Yes X No 4a. Did your organization use a professional fund raiser, fund raising counsel or commercial co-venturer 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 next page to calculate you	7A filing fee: Ir	EPTL filing fee:	Total fee:	Make a single check or money order payable to:				
fee(s). Indicate fee(s) you are submitting here:	\$	\$ <u>750.</u>	\$ <u>775.</u>	"Department of Law"				

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.

	DAT TOORDATION, I	
	CUADEOO	Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:
	<b>CHAR500</b>	- Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
	Annual Filing Checklist	- Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.
Annual I ling Checklist	- 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 If you answered "yes" in Part 4a, submit Schedule 4a: Professional F X If you answered "yes" in Part 4b, submit Schedule 4b: Government	und Raisers (PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)
<ul> <li>Check the financial attachments you must submit with your CHAR500:</li> <li>X IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable</li> <li>X All additional IRS Form 990 Schedules, including Schedule B (Schedisclosure and will not be available for public review.</li> <li>Our organization was eligible for and filed an IRS 990-N e-postcard. filing year. We have included an IRS Form 990-EZ for state purpose</li> </ul>	. Our revenue exceeded \$25,000 and/or our assets exceeded \$25,000 in the
If you are a 7A only or DUAL filer, submit the applicable independent Cer Review Report if you received total revenue and support greater the Audit Report if you received total revenue and support greater than If the fiscal year begins before that date, an Audit Report is require No Review Report or Audit Report is required because total revenu We are a DUAL filer and checked box 3a, no Review Report or Audit	an \$250,000 and up to \$1,000,000 n \$1,000,000 and the fiscal year begins on or after July 1, 2021. d if total revenue and support is greater than \$750,000 le and support is less than \$250,000
Calculate Your Fee	Is my Registration Category 7A, EPTL, DUAL or EXEMPT?
For 7A and DUAL filers, calculate the 7A fee:	Organizations are assigned a Registration Category upon registration with the NY Charities Bureau:
\$0, if you checked the 7A exemption in Part 3a \$25, if you did not check the 7A exemption in Part 3a	<b>7A</b> filers are registered to solicit contributions in New York

For EPTL and DUAL filers, calculate the EPTL fee:

\$0, if you checked the EPTL exemption in Part 3b	act
\$25, if the NET WORTH is less than \$50,000	DU
50, if the NET WORTH is \$50,000 or more but less than \$250,000	EX
\$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000	and
\$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000	Exe
X \$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000	org
1500, if the NET WORTH is \$50,000,000 or more	but

#### Send Your Filing

Send your CHAR500, all schedules and attachments, and total fee to:

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

Need Assistance?

Visit: www.CharitiesNYS.com (212) 416-8401 Call: Email: Charities.Bureau@ag.ny.gov under Article 7-A of the Executive Law ("7A")

EPTL filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct tivities for charitable purposes in NY.

UAL filers are registered under both 7A and EPTL.

**XEMPT** filers have registered with the NY Charities Bureau nd meet conditions in Schedule E - Registration xemption for Charitable Organizations. These ganizations are not required to file annual financial reports ut may do so voluntarily.

Confirm your Registration Category and learn more about NY law at www.CharitiesNYS.com.

#### Where do I find my organization's NET WORTH?

NET WORTH for fee purposes is calculated on:

- IRS Form 990 Part I, line 22
- 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)).

## CHAR500

Open to Public Inspection

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: 02 - 98 - 21FDNY FOUNDATION, INC. 2. Government Grants Name of Government Agency Amount of Grant 1. DEPARTMENT OF HOMELAND SECURITY 992,895. 1. 105,826. 2 PPP LOAN FORGIVENESS 2. 3. 3. 4. 4. 5. 5. 6. 6. 7. 7. 8. 8. 9. 9. 10. 10. 11. 11. 12. 12. 13. 13. 14. 14. 15. 15. 1,098,721. Total: Total Government Grants:

## FDNY FOUNDATION, INC.

Financial Statements and Supplemental Schedules

For the Years Ended June 30, 2022 and 2021

## FDNY FOUNDATION, INC. Financial Statements and Supplemental Schedules For the Years Ended June 30, 2022 and 2021

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# BUCHBINDER

## INDEPENDENT AUDITOR'S REPORT

Board of Directors FDNY Foundation, Inc.

## Opinion

We have audited the accompanying financial statements of FDNY Foundation, Inc. (the "Foundation") (a not-for-profit organization), which comprise the statements of financial position as of June 30, 2022 and 2021, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of FDNY Foundation, Inc. as of June 30, 2022 and 2021, and the changes in its net assets and its cash flows for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

## **Basis for Opinion**

We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of FDNY Foundation, Inc. and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

## **Responsibilities of Management for the Financial Statements**

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about FDNY Foundation, Inc.'s ability to continue as a going concern within one year after the date that the financial statements are available to be issued.



## Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements, including omissions, are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards and *Government Auditing Standards*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of FDNY Foundation, Inc.'s internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about FDNY Foundation, Inc.'s ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

## Other Matters - Supplemental Schedule

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal awards, as required by *Title 2 U.S. Code of Federal Regulations, Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal awards is fairly stated, in all material respects, in relation to the financial statements as a whole.

## Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated May 5, 2023, on our consideration of FDNY Foundation, Inc.'s internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of FDNY Foundation, Inc.'s internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering FDNY Foundation, Inc.'s internal control over financial reporting and compliance.

Buchbinder Junice & Company UP

BUCHBINDER TUNICK & COMPANY LLP

New York, NY May 5, 2023

## FDNY FOUNDATION, INC. Statements of Financial Position June 30, 2022 and 2021

	2022	2021
ASSETS		
Assets: Cash and cash equivalents Pledges receivable, net Grants receivable Royalties and other receivables Investments Inventory Prepaid expenses and other assets Property and equipment, net Total assets	<pre>\$ 4,539,006 3,889,065 1,608,645 141,071 9,947,312 1,031,889 56,252 3,927,879 \$ 25,141,119</pre>	<pre>\$ 4,235,000 4,931,494 216,989 36,233 11,136,959 709,652 47,865 4,545,192 \$ 25,859,384</pre>
LIABILITIES AND NET AS	SETS	
Liabilities: Accounts payable and accrued expenses Grants payable Deferred revenue PPP loan Total liabilities	\$ 92,485 1,650,000 - - - 1,742,485	\$ 127,523 1,500,000 599,220 105,826 2,332,569
Commitments and contingencies Net assets: Without donor restrictions: Undesignated Board-designated endowment	8,053,578 9,947,312 18,000,890	5,954,540 11,136,959 17,091,499
With donor restrictions	5,397,744	6,435,316
Total net assets	23,398,634	23,526,815
Total liabilities and net assets	\$ 25,141,119	\$ 25,859,384

See notes to financial statements.

## FDNY FOUNDATION, INC. Statements of Activities For the years ended June 30, 2022 and 2021

		2022			2021							
	-	Without		With			Without	With				
	Don	or Restrictions	Done	or Restrictions	Total	Dor	or Restrictions	Donor Restrictions	Total			
Public support and revenue:												
Contributions and private grants	\$	2,381,009	\$	1,115,890	\$ 3,496,899	\$	1,174,973	\$ 1,064,858	\$ 2,239,831			
In-kind contributions		2,300,027		150,000	2,450,027		3,786,674	-	3,786,674			
Government grants		1,098,721		-	1,098,721		285,666	-	285,666			
Special events (net of direct expenses of \$391,388 and \$18,915												
for 2022 and 2021, respectively)		3,210,844		-	3,210,844		2,335,875	-	2,335,875			
Licensing royalties and commissions		138,273			138,273		74,067		74,067			
Merchandise sales - Fire Zone retail (net of cost of goods sold of \$239,483												
and \$363,012 for 2022 and 2021, respectively)		1,005,353		-	1,005,353		298,875	-	298,875			
Publications		89,333		-	89,333		142,950	-	142,950			
Interest and dividends, net		226,578			226,578		127,000	-	127,000			
Net realized and unrealized (losses) gains on investments		(1,684,604)		-	(1,684,604)		2,053,943		2,053,943			
Document control unit processing		74,307		-	74,307		48,380	-	48,380			
Rental income		6,000			6,000		-	-	-			
Other		294,694			294,694		515	-	515			
		9,140,535		1,265,890	10,406,425		10,328,918	1,064,858	11,393,776			
Net assets released from restrictions		2,303,462		(2,303,462)			2,863,787	(2,863,787)	<u> </u>			
Total public support and revenue		11,443,997		(1,037,572)	10,406,425		13,192,705	(1,798,929)	11,393,776			
Expenses:												
Program services:												
Fire zone educational and retail		2,041,204		-	2,041,204		1,663,775	-	1,663,775			
Wellness programs		540,828		-	540,828		445,814	-	445,814			
Fire and life safety programs		7,378,979		-	7,378,979		7,885,382	-	7,885,382			
Total program services		9,961,011		•	9,961,011		9,994,971		9,994,971			
Supporting services:												
Management and general		232,503		-	232,503		271,124	-	271,124			
Fundraising		341,092		-	341,092		150,283		150,283			
Total supporting services		573,595			573,595		421,407		421,407			
Total expenses		10,534,606		-	10,534,606		10,416,378		10,416,378			
Change in net assets		909,391		(1,037,572)	(128,181)		2,776,327	(1,798,929)	977,398			
Net assets:												
Beginning of year		17,091,499		6,435,316	23,526,815		14,315,172	8,234,245	22,549,417			
End of year	\$	18,000,890	\$	5,397,744	\$ 23,398,634	\$	17,091,499	\$ 6,435,316	<u>\$ 23,526,815</u>			

See notes to financial statements.

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## FDNY FOUNDATION, INC. Statements of Functional Expenses For the year ended June 30, 2022

		Program	n Services			Totals		
	Fire Zone Educational and Retail	Wellness Programs	Fire and Life Safety Programs	Total Program Services	Management and General	Fundraising	Total Supporting Services	2022
Salaries	\$ 192,869	) \$ -	\$ 257,086	\$ 449,955	\$ 64,217	\$ 128,545	\$ 192,762	\$ 642,717
Payroll taxes and benefits	22,862		30,482	53,344	7,621	15,241	22,862	76,206
Professional fees	890	) -	120,677	121,567	60,476	-	60,476	182,043
Counseling services		- 315	130,000	130,315	-	-	-	130,315
Meeting space rental and related expenses	1,05	5 -	62,900	63,955	7,790	106,400	114,190	178,145
Printing and publications	370	) -	19,011	19,381	300	25,821	26,121	45,502
Dues and subscriptions	13,81		10,403	24,215	7,908	849	8,757	32,972
Supplies and materials	65,52	5 5,675	154,776	225,976	2,061	8,924	10,985	236,961
Advertising and promotion	121,272	-	1,609,787	1,731,059	2,225	1,052	3,277	1,734,336
Rent	587,500	430,609	714,426	1,732,535	4,000	-	4,000	1,736,535
Postage, shipping and delivery	123,40		423	123,824	265	175	440	124,264
Grants to Fire Department		6,682	2,199,422	2,206,104	-	-	-	2,206,104
Donated equipment and supplies	500	) -	580,601	581,101	-	-	-	581,101
Equipment	474		524,434	524,908	235	500	735	525,643
Telephone	19,000	5 20,920	7,394	47,320	5,997	-	5,997	53,317
Repairs and maintenance	111,000	5 1,703	3,919	116,628	250	19,750	20,000	136,628
Communication and internet	8,95	6,481	816	16,252	250	-	250	16,502
Bank charges and other fees	28,950	266	10,617	39,833	13,274	20,408	33,682	73,515
Utilities	1,820	37,061	1,950	40,831	500	-	500	41,331
Travel	642	-	22,337	22,979	100	12,212	12,312	35,291
Temporary help	105,822		428,479	534,301	5,004	-	5,004	539,305
Support for fallen uniform members			216,107	216,107	-	-	-	216,107
Support for uniform members			93,930	93,930	-	-	-	93,930
Other	7,564	31,116	179,002	217,682	50,030	1,215	51,245	268,927
Total expenses before depreciation	1,414,29	540,828	7,378,979	9,334,102	232,503	341,092	573,595	9,907,697
Depreciation	626,909			626,909				626,909
Total expenses	\$ 2,041,204	\$ 540,828	\$ 7,378,979	\$ 9,961,011	\$ 232,503	\$ 341,092	\$ 573,595	\$ 10,534,606

See notes to financial statements.

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## FDNY FOUNDATION, INC. Statements of Functional Expenses For the year ended June 30, 2021

		Program Services					Supporting Services						_	Totals	
	Educ	Zone ational Retail	Wellness Programs	L	Fire and ife Safety Programs	afety Program		Program and		and		Total Supporting Services			2021
Salaries	\$	137,787	\$ -	\$	230,994	\$	368,781	\$	62,024	\$	111,265	\$	173,289	\$	542,070
Payroll taxes and benefits		18,231	-		11,420		29,651		35,144		-		35,144		64,795
Professional fees		101,073	2,831		99,411		203,315		64,726		750		65,476		268,791
Counseling services		-	-		2,500		2,500		-		-		-		2,500
Meeting space rental and related expenses		1,238	-		7,401		8,639		526		14,698		15,224		23,863
Printing and publications		(122)	-		32,916		32,794		265		9,066		9,331		42,125
Dues and subscriptions		7,947	-		11,095		19,042		9,169		3,534		12,703		31,745
Supplies and materials		30,317	2,645		67,570		100,532		856		2,740		3,596		104,128
Advertising and promotion		83,763	-		1,000,587		1,084,350		-		-		-		1,084,350
Rent	(	626,118	377,465		543,854		1,547,437		33,533		-		33,533		1,580,970
Postage, shipping and delivery		93,951	33		7,960		101,944		3,676		60		3,736		105,680
Grants to Fire Department		-	-		1,967,167		1,967,167		-		-		-		1,967,167
Donated educational items		-	=5		2,205,019		2,205,019		-		-		-		2,205,019
Equipment		2,435	-		832,391		834,826		-		-		-		834,826
Telephone		12,386	20,626		7,148		40,160		5,734		-		5,734		45,894
Repairs and maintenance		81,173	1,239		1,296		83,708		250		-		250		83,958
Communication and internet		10,705	5,808		-		16,513		250		-		250		16,763
Bank charges and other fees		24,107	48		8,808		32,963		12,398		7,757		20,155		53,118
Utilities		-	34,704		1,500		36,204		500		-		500		36,704
Travel		655	-		22,286		22,941		-		413		413		23,354
Temporary help		65,502	-		277,743		343,245		6,519		-		6,519		349,764
Support for fallen uniform members		-	-		58,541		58,541		-		-		-		58,541
Support for uniform members		800	-		390,380		391,180		-		-		-		391,180
Other		22,819	415		97,395	_	120,629		35,554		-		35,554		156,183
Total expenses before depreciation	1,:	320,885	445,814		7,885,382		9,652,081		271,124		150,283		421,407		10,073,488
Depreciation	:	342,890					342,890		<u> </u>			_	-		342,890
Total expenses	<u>\$ 1,0</u>	663,775	\$ 445,814	\$	7,885,382	\$	9,994,971	\$	271,124	\$	150,283	\$	421,407	\$	10,416,378

See notes to financial statements.

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## FDNY FOUNDATION, INC. Statements of Cash Flows For the years ended June 30, 2022 and 2021

		2022	2021	
Cash flows from operating activities:				
Change in net assets	\$	(128,181)	\$ 977,398	8
Adjustments to reconcile change in net assets				
to net cash provided by operating activities:				
Donated retail facilities		617,850	617,850	
Depreciation		626,909	342,890	С
Net realized and unrealized losses (gains)				
on investments		1,684,604	(2,053,943	3)
PPP loan forgiveness		(105,826)	(113,121	1)
(Increase) decrease in operating assets:				
Pledges receivable		424,579	(232,136	-
Grants receivable		(1,391,656)	469,461	
Royalties and other receivables		(104,838)	76,410	
Inventory		(322,237)	(71,389	-
Prepaid expenses and other assets		(8,387)	1,52	5
Increase (decrease) in operating liabilities:				
Accounts payable and accrued expenses		(35,038)	(159,977	
Grants payable		150,000	600,000	
Deferred revenue	-	(599,220)	473,724	4
Net cash provided by operating activities		808,559	928,692	2
Cash flows from investing activities:				
(Purchases) of investment securities		(1,622,789)	(1,294,054	4)
Proceeds from sales of investment securities		1,127,832	1,171,377	7
(Purchases) of property and equipment		(9,596)	(753,989	Ð)
Net cash (used in) investing activities		(504,553)	(876,666	6)
Cash flows from financing activities:				
Proceeds from PPP loan			105,826	6
Net cash provided by financing activities		_	105,826	5
				_
Net increase in cash and cash equivalents		304,006	157,852	2
Cash and cash equivalents:				
Beginning of year	_	4,235,000	4,077,148	8
End of year	\$	4,539,006	\$ 4,235,000	C

See notes to financial statements.

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#### Note 1 - Nature of Operations

The FDNY Foundation, Inc. (the "Foundation") is a not-for-profit organization established in New York in 1981, previously known as the FDNY Fire Safety Education Fund, to provide varied fire-safety education programs and activities in furtherance of the fire-safety education programs of the New York City Fire Department (the "FDNY"). The Foundation provides programs (i) to promote the professional development, training, and educational interests of the members of the FDNY and others in all areas of fire administration, firefighting, and fire prevention and investigation; and (ii) to provide support to emergency medical services and their residual beneficial effects to the residents of New York City and New York State.

The funds raised assist the FDNY in its mission to prevent and respond to fires, medical emergencies, disasters and terrorist acts, thereby protecting the lives and property of residents and visitors in New York City. The Foundation funds programs to help meet the FDNY's training, equipment, and educational needs.

The FDNY, in collaboration with the Foundation, applies for and receives multiple federal, state and private grants. The grants' intended purpose is to provide counseling and wellness services for FDNY members and their families, public education, and training to members.

The Foundation also operates the FDNY Fire Zone, which provides varied fire-safety and fire-awareness education programs to children and others. The FDNY Fire Zone also operates a retail store which offers various FDNY merchandise for sale to the general public.

Except for certain types of income subject to unrelated business income tax (primarily from merchandise sales), the Foundation is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code and from state and local income taxes under comparable laws.

## Note 2 - Summary of Significant Accounting Policies

## **Basis of Accounting**

The Foundation's financial statements are presented on the accrual basis in accordance with accounting principles generally accepted in the United States of America.

## Note 2 - Summary of Significant Accounting Policies (Continued)

#### Basis of Presentation

The Foundation is required to report information regarding its financial position and activities according to the following net asset classifications:

**Net assets without donor restrictions**: net assets that are not subject to donorimposed restrictions and may be expended for any purpose in performing the primary objectives of the organization. These net assets may be used at the discretion of the Foundation's management and the Board of Directors.

Board-designated endowment is an endowment fund created by the not-forprofit entity's governing board by designating a portion of its net assets without donor restrictions as unrestricted net assets to be invested to provide income for a long but not necessarily specified period.

**Net assets with donor restrictions**: net assets subject to stipulations imposed by donors, and grantors. Some donor restrictions are temporary in nature; those restrictions will be met by actions of the Foundation or by the passage of time. Other donor restrictions are perpetual in nature, whereby the donor has stipulated the funds be maintained in perpetuity.

Donor restricted contributions are reported as increases in net assets with donor restrictions. When a restriction expires, net assets are reclassified from net assets with donor restrictions to net assets without donor restrictions in the statements of activities.

## Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting periods. Actual results could differ from those estimates.

## Cash and Cash Equivalents

For financial reporting purposes, the Foundation considers all highly liquid investments with maturities of three months or less when purchased to be cash equivalents, except for that portion of cash held as part of the investment portfolio.

## Note 2 - Summary of Significant Accounting Policies (Continued)

#### Investment Valuation and Income Recognition

The Foundation's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See note 5 for discussion of fair value measurements.

Investment income is reflected in the statements of activities as increases and decreases in net assets without donor restrictions unless their use is temporarily restricted by explicit donor stipulations. Investment income includes interest and dividends earned on investments. Realized and unrealized gains and losses on investments reported at fair value are reported as a separate line item in the accompanying statements of activities.

## Contributions and Pledges Receivable

Contributions are recorded as revenue upon the receipt of cash or unconditional pledges. Contributions are considered available for use without donor restrictions, unless specifically restricted by the donor. Conditional contributions are recorded when the specified conditions have been met. Contributions to be received over periods longer than a single year are discounted at an interest rate commensurate with the risk involved.

The Foundation reports contributions in the net assets with donor restrictions classification if they are received with donor stipulations or time considerations as to their use. When a donor's restriction is met, that is, when a stipulated time restriction ends or the purpose of the restriction is accomplished, net assets with donor restrictions are reclassified as net assets without donor restrictions and reported in the accompanying statements of activities as net assets released from restrictions.

## Special Event

The Foundation holds its annual FDNY Humanitarian Dinner to honor those who have supported the Department. Special event revenue is primarily derived from admissions, donations, and journal ad sales related to the humanitarian dinner. Special event revenue is recognized when pledged and/or received.

## Note 2 - Summary of Significant Accounting Policies (Continued)

## Revenue from Contracts with Customers

The Foundation determines revenue through the following steps:

- Identification of the contract(s) with a customer;
- · Identification of the performance obligations in the contract;
- Determination of the transaction price;
- · Allocation of transaction price to the separate performance obligations;
- Recognition of revenue when, or as, performance obligations are satisfied.

Revenue is measured as the amount of consideration the Foundation expects to receive in exchange for providing goods or services. The primary sources of revenue from contracts with customers for the Foundation are licensing and royalty income, merchandise sales, and publication income.

## Licensing and Royalty Income

The Foundation has an agreement with a third-party licensing agent of the City of New York, whereby the third-party licensing agent is responsible for the performance of the marketing and licensing services of the FDNY logo. In return, the Foundation receives 70% of the annual royalty income, net of expenditures.

## **Merchandise Sales**

Through the FDNY Fire Zone, the Foundation operates a retail store which offers various FDNY merchandise for sale to the general public. Revenue is recognized when the risks and rewards of ownership and title to the product have transferred to the buyer. This generally occurs at the time of in-store sales or upon delivery to the customer.

## **Publication Income**

Publication income is recognized over the annual subscription in the year received.

## Note 2 - Summary of Significant Accounting Policies (Continued)

## Property and Equipment

Property and equipment are recorded at their original costs or, if contributed, at their appraised value at the dates of contributions. Depreciation of property and equipment is provided using the straight-line method over estimated useful lives of five to seven years; leasehold improvements are amortized over the term of the lease.

#### Inventory

Inventories consist of "FDNY" retail merchandise available for sale and are reported at the lower of cost or market value, using the first-in, first-out method. There were no write offs of obsolete inventory during 2022 and 2021.

## Accrued Vacation

Based on their tenure, employees are entitled to be paid for unused vacation time if they leave the Foundation. The accrued vacation obligation was approximately \$47,000 and \$49,000 for fiscal years 2022 and 2021, respectively, and was reported as part of accrued expenses in the accompanying statements of financial position.

## Deferred Revenue

Contract amounts received in advance are reported as deferred revenue until the related expense is incurred or service is performed, at which time revenue is recorded.

## Endowment Funds

The Foundation reports all applicable disclosures to its board-designated funds treated as endowments (see Note 9). There are no donor-restricted endowment funds.

## Note 2 - Summary of Significant Accounting Policies (Continued)

#### Rental Income

The Foundation leases space to an unrelated party in accordance with a signed lease agreement. Rental income is recognized in accordance with the lease agreement.

## Government Grants

Government grants revenue is recognized in the period the qualifying allowable expenditures are incurred. During fiscal year 2022, the PPP loan in the amount of \$105,826 was forgiven and is included in the grants revenue.

#### **Donated Goods and Services**

Donated goods and services that meet the requirements for recognition under generally accepted accounting principles are reported as both revenue and expense (or, in some cases, as assets) in the accompanying statements of activities, at amounts determined by management to be reasonable for obtaining such goods and services.

## Functional Expenses

The costs of providing program and other activities have been summarized on a functional basis in the statements of activities. Accordingly, certain costs have been allocated among program services and supporting services benefited. Such allocations are determined by management on an equitable basis.

## Note 2 - Summary of Significant Accounting Policies (Continued)

The expenses that are allocated include the following:

## Expense

- Method of Allocation
- Salaries, payroll taxes and benefits Professional fees Meeting space rental and related expenses Printing, publications, dues and subscriptions Supplies and materials Advertising and promotion Rent and utilities Postage, shipping and delivery Telephone, communication and internet Repairs and maintenance Bank charges and other fees Travel Temporary help Other

Time and effort Purpose of services provided Asset usage Asset usage Purpose of services provided Asset usage Asset usage Asset usage Purpose of services provided Purpose of services provided Purpose of services provided Purpose of services provided Asset usage

## Advertising Costs

Advertising costs are expensed as incurred.

## Income Taxes

The Foundation files an annual Form 990, *Return of Organization Exempt from Income Tax*, with the Internal Revenue Service ("IRS"). At June 30, 2022, the Foundation's Form 990s for the years 2018 through 2021 remain eligible for examination by the IRS.

The Foundation adopted the provisions of the Financial Accounting Standards Board's ("FASB") Accounting Standards Codification ("ASC") Topic 740-10-05, relating to the accounting and reporting for uncertainty on income taxes. For the Foundation, these provisions could be applicable to the incurrence of unrelated business income tax ("UBIT") attributable to some of the Fire Zone retail store merchandise. Because of the Foundation's general tax-exempt status, ASC Topic 740-10-05 did not have, and is not anticipated to have, a material impact on the Foundation's financial statements.

## Note 2 - Summary of Significant Accounting Policies (Continued)

#### **New Accounting Pronouncements**

New leasing standard, ASC 842, effective January 1, 2022. Under the new guidance, lessees will be required to recognize the following for all leases (with the exception of short-term leases) at the commencement date: (a) a lease liability, which is a lessee's obligation to make lease payments arising from a lease, measured on a discounted basis; and (b) a right-of-use asset, which is an asset that represents the lessee's right to use, or control the use of, a specified asset for the lease term. The impact of the new standard is not known at this time to the Foundation's financial statements.

## Subsequent Events

The Foundation has evaluated subsequent events and transactions through May 5, 2023, the date that the financial statements were available to be issued.

## Note 3 - Availability and Liquidity

The following represents the Foundation's liquid financial assets at June 30, 2022 and 2021:

Financial apparts at user and	2022	2021
Financial assets at year end: Cash and cash equivalents Pledges, grants, royalties and other receivables, net Investments	\$ 4,539,006 5,409,494 <u>9,947,312</u>	\$ 4,235,000 5,184,716 <u>11,136,959</u>
Total financial assets	19,895,812	20,556,675
Less amounts not available to be used within one year: Net assets with donor restrictions Less net assets with purpose restrictions to be	5,397,744	6,435,316
met in less than one year Board-designated endowment	(1,054,350) 9,947,312	(1,502,829) 
Financial assets available to meet general	14,290,706	
expenditures over the next twelve months	<u>\$ 5,605,106</u>	<u>\$ 4,487,229</u>

The Foundation's intent is generally to maintain financial assets to meet no less than 60 days of operating expenses (approximately \$1,100,000). As part of its liquidity plan, excess cash and cash equivalents are held or invested at the direction of the Finance Committee of the Board of Directors.

#### Note 4 - Risks and Uncertainties

The Foundation maintains its cash balances at major money center financial institutions. Balances fluctuate during the year and may exceed the FDIC insurance limits. The Foundation has not experienced any losses in such accounts and management does not anticipate nonperformance by its financial institutions.

The Foundation invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the statements of financial position.

## Note 5 - Fair Value Measurements

Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 820, Fair Value Measurements and Disclosures, provides the framework for measuring fair value. It defines fair value as an exit price, which is the price that would be received for an asset or paid to transfer a liability in the Foundation's principal or most advantageous market for the asset or liability, in an orderly transaction between market participants on the measurement date.

The fair value hierarchy generally requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value. Observable inputs reflect the assumptions market participants would use in pricing the asset or liability and are developed based on market data obtained from sources independent of the reporting entity. Unobservable inputs reflect the entity's own assumptions based on market data and the entity's judgments about the assumptions that market participants would use in pricing the asset or liability, and are to be developed based on the best information available in the circumstances.

The Foundation determines the fair market value of its investments based on the established fair value definition and hierarchy levels. The three levels within the hierarchy that may be used to measure fair value are:

Level 1: Unadjusted quoted prices in active markets for identical assets or liabilities.

Level 2: Observable inputs, including Level 1 prices that have been adjusted; quoted prices for similar assets or liabilities; quoted prices in markets that are less active than traded exchanges; and other inputs that are observable or can be substantially corroborated by observable market data.

#### Note 5 - Fair Value Measurements (Continued)

Level 3: Unobservable inputs that are supported by little or no market activity and that are a significant component of the fair value of the assets or liabilities.

The lowest level of input that is a significant component of the fair value measurements determines the placement of the entire fair value measurement in the hierarchy. The Foundation's assessment of the significance of a particular input to the fair value measurement requires judgment, and may affect the classification of fair value assets and liabilities within the fair value hierarchy levels.

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at June 30, 2022 and 2021.

Corporate bonds:

Corporate bonds are valued using a non-call spread scale that is created for each issuer for maturities going out to forty years. The spreads represent credit risk and are obtained from the new issue market, secondary trading and dealer quotations, using pricing models maximizing the use of observable inputs for similar securities.

Equity securities:

Equity securities are valued using quoted market prices in active markets.

Mutual funds and exchange-traded funds:

Mutual funds and exchange-traded funds (the "Funds") are valued at the closing price every business day. The Funds held by the Foundation are registered with the Securities and Exchange Commission. These Funds are required to publish their daily net asset value (NAV) and to transact at that price. The Funds held by the Foundation are deemed to be actively traded.

Money market fund:

The money market fund is stated at cost which approximates fair value.

The preceding valuation methods may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Foundation believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

## Note 5 - Fair Value Measurements (Continued)

The following table sets forth, by level, the Foundation's assets that were accounted for at fair value on a recurring basis as of June 30, 2022 and 2021:

Investments in securities:

investments in securites.	2022				2021			
Investments at fair value:	Total Fair Value	Quoted Prices (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Other Unobservable Inputs (Level 3)	Total Fair Value	Quoted Prices (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Other Unobservable Inputs (Level 3)
Corporate bonds:								
Preferred	\$ 84,433	\$ -	\$ 84,433	\$ -	\$ 81,805	\$-	\$ 81,805	\$-
Other	164,081	-	164,081		192,630		192,630	-
	248,514		248,514		274,435		274,435	
Equity securities:								
Materials	95,993	95,993	-	-	108,440	108,440	-	-
Consumer goods	233,237	233,237	-	-	293,353	293,353	-	-
Financial	357,531	357,531	-	-	450,430	450,430	-	-
Foreign	319,231	319,231	-	-	400,056	400,056	-	-
Health care	298,690	298,690		-	342,613	342,613	-	-
Industrials	215,703	215,703	-	-	275,463	275,463	-	-
Services	153,915	153,915	-	-	178,158	178,158	-	-
Technology	747,933	747,933	-	-	1,067,090	1,067,090	-	-
Other	155,939	155,939		<u> </u>	164,476	164,476		
	2,578,173	2,578,173			3,280,079	3,280,079		
Mutual and exchange-traded funds:	*							
Emerging markets	215,987	215,987	-	-	306,479	306,479	-	-
Foreign	392,097	392,097	-	-	479,561	479,561	-	-
Blend	1,097,910	1,097,910		-	1,230,856	1,230,856	-	-
Growth	144,564	144,564	-	-	211,209	211,209	-	-
Bonds	3,965,553	3,965,553	-	-	4,089,459	4,089,459	-	-
Other -	457,184	457,184			436,475	436,475		
	6,273,295	6,273,295	<u> </u>		6,754,039	6,754,039		
Money market fund	847,330		847,330	<u> </u>	828,406		828,406	
Total investments	\$ 9,947,312	\$ 8,851,468	\$ 1,095,844	<u>\$                                    </u>	\$ 11,136,959	<u> </u>	\$ 1,102,841	<u>\$</u>

## Note 6 - Receivables

## Pledges Receivable

At June 30, 2022 and 2021, pledges receivable are due as follows:

	2022	2021
Less than one year One to five years	\$ 1,054,350 <u>3,245,643</u>	\$ 1,502,829 <u>3,759,414</u>
	4,299,993	5,262,243
Reduction of pledges due in excess of one year to present value at 3.30% and 1.98% for fiscal years 2022 and 2021, respectively	(410,928)	(330,749)
Total pledges receivable, net	\$ 3,889,065	<u>\$ 4,931,494</u>

For fiscal years 2022 and 2021, pledges receivable included \$3,387,757 and \$3,934,392, respectively, that represented the value of the donated facilities reserved for use by the Foundation. Based on management's past experience, no reserve for non-collectability was established for fiscal years 2022 and 2021.

## Receivables from Grants, Royalties and Other Sources

At June 30, 2022 and 2021, receivables from grants and royalties consisted of amounts arising from exchange transactions with the Foundation. All amounts are due within one year. Based on management's past experience, no reserve for non-collectability was deemed necessary for fiscal years 2022 and 2021.

## Note 7 - Property and Equipment

Property assets, stated at cost, consist of the following for the years ended June 30, 2022 and 2021:

	2022	2021
Furniture, fixtures and equipment Leasehold improvements	\$    774,655 <u>    4,656,183</u>	\$     765,058 4,656,183
	5,430,838	5,421,241
Less: accumulated depreciation	1,502,959	876,049
Property and equipment, net	<u>\$ 3,927,879</u>	<u>\$ 4,545,192</u>

Depreciation expense for fiscal years 2022 and 2021 was \$626,909 and \$342,890, respectively.

## Note 8 - Net Assets With Donor Restrictions

Net assets with donor restrictions at June 30, 2022 and 2021 consisted of the following:

20		2021
Specific purpose:		
Fire Zone safety learning center	\$ 5,150	\$ 84,660
Family assistance	555,243	593,344
Fire department equipment and apparatus	786,224	977,979
Emergency Medical Services	53,216	11,098
FDNY Counseling Services Unit	-	25,000
COVID-19 Emergency Fund	167,804	414,242
Other	156,044	66,818
Total specific purpose	1,723,681	2,173,141
Passage of time:		
Fire Zone safety learning center:		
Less than one year	587,850	587,850
One to five years	2,939,250	2,939,250
Thereafter	146,963	735,075
Total passage of time	3,674,063	4,262,175
Total net assets with donor restrictions	\$ 5,397,744	<u>\$ 6,435,316</u>

Net assets released from restrictions during fiscal years June 30, 2022 and 2021 consisted of the following:

		2022		2021	
Satisfaction of purpose restrictions:					
Fire Zone safety learning center	\$	139,860	\$	406,961	
Family assistance		498,953		145,808	
Fire department equipment and apparatus		610,670		239,327	
Emergency Medical Services		58,913		8,755	
FDNY Counseling Services Unit		56,398		179,481	
COVID-19 Emergency Fund		258,333		1,265,605	
Other		92,485		30,000	
Total net assets released from purpose restrictions		1,715,612	_	2,275,937	
Satisfaction of passage of time restrictions:					
Fire Zone safety learning center		587,850	_	587,850	
Total net assets released from restrictions	\$	2,303,462	\$	2,863,787	

## Note 9 - Board-Designated Endowment Funds

The Foundation's endowment funds consist solely of those funds without donor restrictions designated by the Board of Directors to provide a predictable stream of funds for the Foundation's programs.

The Foundation will continue to adhere to New York Prudent Management of Institutional Funds Act's ("NYPMIFA") requirements relating to the Foundation's board-designated endowment funds.

Changes in endowment assets during fiscal years June 30, 2022 and 2021 consisted of the following:

	2022	2021
Endowment net assets, beginning of year	\$11,136,959	<u>\$ 8,960,330</u>
Investment return: Interest and dividends, net Transfer from without donor restrictions fund Other Net realized and unrealized (loses) gains on investments	226,578 250,000 18,379 (1,684,604)	127,000 (4,314) <u>2,053,943</u>
Total investment return	(1,189,647)	2,176,629
Endowment net assets, end of year	<u>\$ 9,947,312</u>	<u>\$11,136,959</u>

## **Return Objectives and Risk Parameters**

The Foundation has adopted investment and spending policies for endowment assets that attempt to provide a predictable stream of funding for programs supported by its endowment while seeking to maintain the purchasing power of the endowment assets and assuming a moderate level of investment risk.

## Strategies Employed for Achieving Objectives

To satisfy its long-term rate of return objectives, the Foundation relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and current yield (interest and dividends). The Foundation targets a diversified asset allocation within prudent risk constraints.

#### Note 10 - Donated Facilities, Assets, and Services (Continued)

For the years ended June 30, 2022, contributed nonfinancial assets recognized within the statements of activities included:

	Revenue Recognized	Utilization in Programs/Activities	Donor Restrictions	Valuation
Use of facilities	\$ 834,42	6 Fire and Life Safety Programs	No associated donor restrictions in month-to-month leases /time restriction on long-term leases	In valuing the various locations of dona the fair value of the signed lease prov the basis of recent comparable rental
Covid-19 supplies	132,03	2 Fire and Life Safety Programs	No associated donor restrictions	FDNY Foundation, Inc. estimated the fa wholesale values that would be recei
Fitness equipment	234,07	0 Fire and Life Safety Programs	No associated donor restrictions	FDNY Foundation, Inc. estimated the fa wholesale values that would be recei
Services	1,000,00	0 Public service announcements for Fire and Life Safety Programs	No associated donor restrictions	FDNY Foundation, Inc. estimated serv estimated fair value based on current
Food	249,49	9 Fire and Life Safety Programs	No associated donor restrictions	FDNY Foundation, Inc. estimated the fa values that would be received for sell
Total	\$ 2,450,02	7		

For the years ended June 30, 2021, contributed nonfinancial assets recognized within the statements of activities included:

	Revenue Recognized	Utilization in Programs/Activities	Donor Restrictions	Valuation
Use of facilities	\$ 581,655	Fire and Life Safety Programs	No associated donor restrictions	In valuing the various locations of dona value of the signed lease provided by recent comparable rental prices in the
Covid-19 supplies	1,931,454	Fire and Life Safety Programs	No associated donor restrictions	FDNY Foundation, Inc. estimated the fa values that would be received for sell
Supplies	8,399	Fire and Life Safety Programs	No associated donor restrictions	FDNY Foundation, Inc. estimated the fa values that would be received for sell
Fitness equipment	213,266	Fire and Life Safety Programs. It is FDNY Foundation, Inc.'s policy to sell all contributed collection items immediately upon receipt unless the items are restricted		
		for use in a specific program by the donor.	No associated donor restrictions	FDNY Foundation, Inc. estimated the fat values that would be received for sell
Collection items	51,900	All items were sold or used for special event dinner.	No associated donor restrictions	FDNY Foundation, Inc. estimated the fa values that would be received for sell
Services	1,000,000	Public service announcements for Fire and Life Safety Programs	No associated donor restrictions	FDNY Foundation, Inc. estimated serv fair value based on current rates for s
Total	\$ 3,786,674			tail value based on current rates for a

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provided rent, FDNY Foundation, Inc. estimated provided by the donor which is determined on natal prices in the area.

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ervices from advertisers are valued at the ent rates for similar advertising services.

e fair value on the basis of estimates of wholesale selling similar products in the United States.

#### ion Techniques and Inputs

by the donor which is determined on the basis of the area.

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e fair value on the basis of estimates of wholesale selling similar products in the United States.

ervices from advertisers are valued at the estimated or similar advertising services.

## Note 10 - Donated Facilities, Assets, and Services (Continued)

#### **Rockefeller Center**

In January 2000, a corporate sponsor donated leased space to the City of New York to be managed under a license agreement by the FDNY Foundation, for the development of a fire safety learning center. The space is also used for the Fire Zone. The general purpose of the learning center is to develop a broader understanding of the FDNY's operations, in order to expand public awareness and generate goodwill. The learning center offers fire safety education exhibits and programs operated and managed by the Foundation in support of the FDNY. In September 2018, the Foundation entered into a direct lease with the same corporate sponsor at a new location for the Fire Zone. The new Fire Zone opened to the public in September 2020. The lease has an expiration date of June 30, 2028.

The space donated for the 48<sup>th</sup> Street learning center was recorded at its estimated fair value. In fiscal years 2022 and 2021, \$587,850, was released from restrictions and is reported in the accompanying statements of activities.

#### Warehouse

The Foundation entered into a license agreement to use space in a FDNY facility. In fiscal years 2022 and 2021, \$38,268 was recorded as both revenue and expense, respectively, in the accompanying financial statements. The agreement is in effect through June 30, 2022.

## Storage Facility

The Foundation entered into a license agreement, effective September 10, 2020, to store PPE equipment that is provided to uniform members. In fiscal year 2022 and 2021, \$616,625 and \$513,854, respectively, were recorded as both revenue and expense in the accompanying financial statements. The agreement was in effect through June 30, 2022 and is being extended every three months until such time as storage is no longer required.

## Note 10 - Donated Facilities, Assets, and Services (Continued)

## Atlantis Marina and Yacht Club

In July 2011, Atlantis Marina and Yacht Club donated space in its marina to maintain and operate a long trailer as Marine 8's headquarters, and a boat slip for fireboats and other vessels which provide emergency response services in Raritan Bay, Lower Bay, Arthur Kill and the Atlantic Ocean. The agreement was renewed in July 2016 for five years and renewed again in July 2021 for an additional five years.

The space donated at the marina was recorded at its estimated fair value. In fiscal years 2022 and 2021, \$30,000 was released from restrictions and is reported in the accompanying statements of activities.

## Public Service Announcements

During fiscal years 2022 and 2021, the Foundation received the benefit of public service announcements ("PSAs") on local television stations. The PSAs are based on a fair value of approximately \$1,000,000 for both years, and were recorded as both revenue and expense in the accompanying statements of activities.

## Educational

During fiscal years 2022 and 2021, the Foundation received various fire prevention materials to assist in fire safety awareness. The materials have a fair value of \$-0- and \$8,399, respectively, and have been reported as revenue and expense in the accompanying statements of activities.

## COVID-19 Emergency Fund

During fiscal years 2022 and 2021, the Foundation received various supplies and materials to assist its COVID-19 Emergency Fund, which supports FDNY and uniformed members on the frontline of the pandemic. The supplies and materials have a fair value of \$132,032 and \$1,931,454 for fiscal years 2022 and 2021, respectively, and have been reported as revenue and expense in the accompanying statements of activities.

## Note 11 - Employee Benefit Plan

The Foundation has an employee benefit plan, as prescribed under U.S. Internal Revenue Code Section 401(k), that covers all eligible employees. All employees who have attained the age of 21 are eligible to participate. Contributions to the 401(k) plan are based on a maximum of 50% on the first 6% of an eligible employee's elective deferral. After completion of six years of service, eligible employees are considered to be 100% vested in employer matching contributions. During fiscal years 2022 and 2021, the Foundation made matching contributions to the 401(k) plan of \$5,372 and \$9,808, respectively.

## Note 12 - Commitments and Contingencies

## Lease Commitments

The Foundation occupies multiple office premises under non-cancelable operating leases expiring through June 30, 2022. Three of the leases contain rent escalation clauses.

Future minimum rental obligations as of June 30, 2022 are as follows:

Year Ending June 30.	Amount	
2023 2024 2025 2026 2027	\$ 265,74 274,16 282,85 290,74 297,75	6 59 6
Total	<u>\$ 1,411,27</u>	<u>'1</u>

Rent expense for fiscal years 2022 and 2021 was \$1,736,535 and \$1,580,970, respectively, which included \$1,301,926 and \$1,199,505 of donated retail and office space in the fiscal years 2022 and 2021, respectively.

## **Government-Supported Projects**

Government-supported projects are subject to audit by the applicable government granting agencies. At June 30, 2022, there were no material obligations outstanding as a result of such audits, and management believes that any subsequent audits will not result in any material obligations.

## Note 13 - Related Party Transactions

The FDNY has authorized the lease rights of the commissary store in the FDNY headquarters lobby to the Foundation. The Foundation entered into a lease arrangement on October 16, 2017 with an unrelated contractor to operate the commissary store through October 15, 2020. The unrelated contractor is paying rent on a month-to-month basis since the lease ended. All amounts received through the lease of the facility are to be used by the Foundation to fund current operations.

During fiscal years 2022 and 2021, the Foundation made grants to the FDNY of \$2,205,921 and \$1,967,166, respectively, for various projects. Approved grants totaling \$1,650,000 will be paid during fiscal year 2023.

## Note 14 - Tax Status

The Foundation has been determined by the IRS to be exempt from federal income tax pursuant to Section 501(c)(3) of the Internal Revenue Code (the "IRC") and has been classified as a publicly supported organization as described in Section 509(a)(1) of the IRC. Accordingly, contributions to the Foundation entitle donors to the maximum charitable contribution deduction allowed under the IRC.

## Note 15 - Paycheck Protection Program Loan

In January 2021, the Foundation entered into a second Paycheck Protection Program Term Note (the "second PPP Note") with Bank of America, NA in the amount of \$105,826. The second PPP Note was issued to the Foundation pursuant to the Coronavirus Aid, Relief, and Economic Security Act's (the "CARES Act"). (P.L. 116-136) Paycheck Protection Program (the "Program"). Under the Program, all or a portion of the second PPP Note may be forgiven in accordance with the Program requirements. The second PPP Note carries a maturity date of January 2026, at a 1% interest rate. The amount of the forgiveness shall be calculated (and may be reduced) in accordance with the requirements of the Program, including the provisions of the CARES Act. No more than 40% of the amount forgiven can be attributable to non-payroll costs, as defined in the Program. In October 2021, the amount of the second PPP Note was forgiven in full.

At June 30, 2022 and 2021, loans payable were \$-0- and \$105,826, respectively.

#### FDNY FOUNDATION, INC. Schedule of Expenditures of Federal Awards For the Year Ended June 30, 2022

FEDERAL AWARDS Program Title	Federal CFDA No.	Grantor No.	Fyn	enditures	
Department of Homeland Security:				chanalos	
Assistance to Firefighters Grant	97.044	EMW-2018-FP-00191	\$	602,634	*
5	97.044	EMW-2019-FP-01042		341,015	
Total Assistance to Firefighters Grant				943,649	
Total U.S Department of Homeland Security				943,649	
Total expenditures of federal awards:			\$	943,649	

\* Major Program

#### Note 1 - Basis of Presentation

The accompanying schedule of expenditures of federal awards (the "Schedule") includes the federal grant activity of the FDNY Foundation, Inc. (the "Foundation") (a not-for-profit organization), under a program funded by the federal government for the year ended June 30, 2022. The information in the Schedule is presented in accordance with the requirements of *Title 2, U.S. Code of Federal Regulations, Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of the FDNY Foundation, Inc., it is not intended to and does not present the financial position, changes in net assets or cash flows of the FDNY Foundation, Inc.

For purposes of the Schedule, federal awards include all grants, contracts and similar agreements entered into directly between the Foundation and agencies and departments of the federal government.

#### Note 2 - Summary of Significant Accounting Policies

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance wherein certain types of expenditures are not allowable or are limited as to reimbursement.

#### Note 3 - Indirect Cost Rate

The Foundation elects not to use the 10% *de minimis* indirect cost rate allowed by the Department of Homeland Security for grant reporting.

# BUCHBINDER

#### INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

To the Board of Directors FDNY Foundation, Inc.

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of FDNY Foundation, Inc. (a non-profit organization), which comprise the statement of financial position as of June 30, 2022, and the related statements of activities, functional expenses and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated May 5, 2023.

#### **Report on Internal Control Over Financial Reporting**

In planning and performing our audit of the financial statements, we considered FDNY Foundation, Inc.'s internal control over financial reporting (internal control) as a basis for determining audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of FDNY Foundation, Inc.'s internal control. Accordingly, we do not express an opinion on the effectiveness of FDNY Foundation, Inc.'s internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

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**@** 

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or, significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

#### **Report on Compliance and Other Matters**

As part of obtaining reasonable assurance about whether FDNY Foundation, Inc.'s financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under Government Auditing Standards.

#### **Purpose of this Report**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with Government Auditing Standards in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Buchbinder Junice & Compray UP BUCHBINDER TUNICK & COMPANY LLP

New York, NY May 5, 2023

## BUCHBINDER

#### INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH MAJOR PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE

To the Board of Directors FDNY Foundation, Inc.

#### **Report on Compliance for Each Major Federal Program**

#### **Opinion on Each Major Federal Program**

We have audited FDNY Foundation, Inc.'s compliance with the types of compliance requirements identified as subject to audit in the *OMB Compliance Supplement* that could have a direct and material effect on each of FDNY Foundation, Inc.'s major federal programs for the year ended June 30, 2022. FDNY Foundation, Inc.'s major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs and summary of results.

In our opinion, FDNY Foundation, Inc. complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2022.

#### Basis for Opinion on Each Major Federal Program

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States; and the audit requirements of *Title 2 U.S. Code of Federal Regulations, Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor's Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of FDNY Foundation, Inc. and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal program. Our audit does not provide a legal determination of FDNY Foundation, Inc.'s compliance with the compliance requirements referred to above.

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#### Responsibilities of Management for Compliance

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to FDNY Foundation, Inc.'s federal programs.

#### Auditor's Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on FDNY Foundation, Inc.'s compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about FDNY Foundation, Inc.'s compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with generally accepted auditing standards, *Government Auditing Standards*, and the Uniform Guidance, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding FDNY Foundation, Inc.'s compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of FDNY Foundation, Inc.'s internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of FDNY Foundation, Inc.'s internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

#### **Other Matters**

The results of our auditing procedures disclosed instances of noncompliance which are required to be reported in accordance with the Uniform Guidance and which are described in the accompanying schedule of findings and questioned costs and summary of results as items 2022-001 and 2022-002. Our opinion on each major federal program is not modified with respect to these matters.

Government Auditing Standards requires the auditor to perform limited procedures on FDNY Foundation, Inc.'s response to the noncompliance findings identified in our audit described in the accompanying schedule of findings and questioned costs and summary of results. FDNY Foundation, Inc.'s response was not subjected to the other auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

#### **Report on Internal Control Over Compliance**

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A *material weakness in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A *significant deficiency in internal control over compliance* is a deficiencies, in internal control over compliance is a deficiencies, in internal control over compliance is a deficiencies, in internal control over compliance is a deficiency, or a combination of deficiency in *internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance. We consider the deficiencies in internal control over compliance described in the accompanying schedule of findings and questioned costs and summary of results as items 2022-001 and 2022-002 to be significant deficiencies.

Our consideration of internal control over compliance was for the limited purpose described in the Auditor's Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance and therefore, material weaknesses or significant deficiencies may exist that were not identified. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, as discussed above, we did identify certain deficiencies in internal control over compliance that we consider to be significant deficiencies.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

Government Auditing Standards requires the auditor to perform limited procedures on FDNY Foundation, Inc.'s response to the internal control over compliance findings identified in our audit described in the accompanying schedule of findings and questioned costs and summary of results. FDNY Foundation, Inc.'s response was not subjected to the other auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Buchbinder Junice & Company UP

**BUCHBINDER TUNICK & COMPANY LLP** 

New York, NY May 5, 2023

#### FDNY FOUNDATION, INC. Schedule of Findings and Questioned Costs and Summary of Results For the year ended June 30, 2022

#### Section I - Summary of Auditor's Results

#### **Financial Statements**

Type of auditor's report issued on whether the financial statements audited were prepared in accordance to GAAP: Unmodified

Internal control over financial reporting:

Material weakness	yes	<u>X</u> no	
Significant deficien	yes	<u>X</u> none	
Noncompliance ma	aterial to financial statements noted?	yes	<u>X</u> no
Federal Awards			
Internal control over	major programs:		
Material weakness	(es) identified?	yes	<u>X</u> no
Significant deficien	<u>X</u> yes	none	
Type of auditor's rep for major programs	Unmodified		
Any audit findings dis in accordance with	<u>X</u> yes	no	
Identification of Majo	r Programs:		
Identification of Majo	<u>r Programs:</u> Name of Federal Program or Cluster		
CFDA Number(s) 97.044 Dollar threshold used	Name of Federal Program or Cluster Assistance to Firefighters Grant	<u>\$750,000</u>	

#### FDNY FOUNDATION, INC. Schedule of Findings and Questioned Costs and Summary of Results (Continued) For the year ended June 30, 2022

#### Section II – Financial Statement Findings

None

#### Section III – Federal Award Findings and Questioned Costs

#### 2022-001

Condition: Written procedures do not specifically address federal funds or the use thereof.

**Criteria:** Compliance requirements for Activities Allowed or Unallowed and Allowable Costs state that the organization must have written polices and control procedures for costs coded to federal awards.

**Cause:** FDNY Foundation employs a small staff of experienced people. Because staff tend to remain employed for longer terms, FDNY Foundation does not find it effective to create extensive written procedures and instead relies on the SKE of the staff.

**Effect:** Noncompliance with Uniform Guidance requirements may make the Foundation ineligible for reimbursement of current year expenditures and for future federal funding.

**Recommendation:** Update the written procedures or create a formal finance manual and specifically address the use of federal funds. Implement a schedule to periodically review and update written procedures.

**Views of Responsible Officials and Planned Corrective Actions:** The Foundation agrees with the recommendation. An internal review is currently in process to evaluate and update policies as needed to address the use of federal funds.

#### FDNY FOUNDATION, INC. Schedule of Findings and Questioned Costs and Summary of Results (Continued) For the year ended June 30, 2022

#### Section III – Federal Award Findings and Questioned Costs (continued)

#### 2022-002

**Condition:** Federal Audit Clearinghouse filing for the current year (2022) was not completed timely.

**Criteria:** 2 CFR § 200.512 requires the auditee to submit a reporting package to the Federal Audit Clearinghouse (FAC) within the earlier of 30 calendar days after receipt of the auditor's report or nine months after the end of the audit period.

**Cause:** FDNY Foundation, Inc. usually receives no more than one federal grant per year. Due to the COVID-19 pandemic, the Foundation received extensions on two grants that caused the grant periods to overlap. The Foundation properly tracked expenditures by grant year, but because of the unusual situation, did not realize that the sum of the two grants exceeded the single audit threshold in the current year.

**Effect:** Noncompliance with Uniform Guidance requirements may make the Foundation ineligible for reimbursement of current year expenditures and for future federal funding.

**Recommendation:** Perform an annual review of all federal funds to verify whether the cumulative total of expenditures of federal funds meets or exceeds the \$750,000 single audit threshold.

**Views of Responsible Officials and Planned Corrective Actions:** The Foundation agrees with and has implemented the recommendation. The Foundation already has a reporting calendar to ensure timely filings and will add dates to review total federal expenditures to the calendar.



9 Metrotech Center, RM 5E-6 Brooklyn, NY 11201 Tel. 718 999 0779 Fax. 718 999 0705

#### May 5, 2023

#### **Board of Directors**

Fire Commissioner Laura R. Kavanagh United States Department of Homeland Security Attn: Amy Kroll Preparedness Officer, Assistance to Firefighters Grant Program

Chairman Stephen L. Ruzow

Vice Chairman Matthew J. DiLiberto The FDNY Foundation, Inc. respectfully submits the following corrective action plans regarding findings from the June 30, 2022 schedule of findings and questioned costs and summary of results. The findings in this corrective action plan are numbered consistently with the numbers assigned in the schedule. These plans are prepared in conjunction with the 2022 single audit, which was conducted by our Independent auditors, Buchbinder Tunick & Company LLP, One Pennsylvania Plaza, Suite 3200, New York, NY 10119.

Peter Arnell William M. Brown Chris J. Carrera Salvatore J. Cassano\* Jon Fox Grace Hightower Chief John Hodgens Howard Koeppel Jonathan B. Kohan Daniel A. Nigro\* **Tony Pasquariello** Amanda Rubin John C. Santora William Schwartz Jerry I. Speyer Jurgen Timperman Robert T. Zito

Findings and Corrective Action Plan – Federal Award Program Audit

Fiscal Year: 2022

Finding Number: 2022-001

Finding: Written procedures do not specifically address federal funds or the use thereof.

**Questioned Costs: None** 

Status: In progress

<u>Recommendation</u>: Update the written procedures or create a formal finance manual and specifically address the use of federal funds. Implement a schedule to periodically review and update writter procedures.

<u>Corrective Action</u>: We agree with the recommendation. An internal review is currently in process to review and update our policies as needed to address the use of federal funds.

**Completion Date: Estimated June 2023** 

<u>Contact:</u> Jean O'Shea, Executive Director 9 Metrotech Center Room 5E-9 Brooklyn, New York 11201

Executive Director

**Chairman Emeritus** 

Thomas Von Essen\*

Treasurer

Secretary Robert S. Tucker

Michael J. Regan

\*Former Fire Commissioners

- 40 -



9 Metrotech Center, RM 5E-6 Brooklyn, NY 11201 Tel. 718 999 0779 Fax. 718 999 0705

**Board of Directors** 

Finding Number: 2022-002

Fiscal Year: 2022

Fire Commissioner Laura R. Kavanagh

Chairman Stephen L. Ruzow

Vice Chairman Matthew J. DiLiberto

Salvatore J. Cassano\*

Peter Arnell William M. Brown

Jon Fox

Chris J. Carrera

**Grace Hightower** 

Chlef John Hodgens Howard Koeppel

Jonathan B. Kohan

Daniel A. Nigro\*

John C. Santora William Schwartz

Jerry I. Speyer Jurgen Timperman

Robert T. Zito

Treasurer

Tony Pasquariello Amanda Rubin Status: In progress

**Questioned Costs: None** 

<u>Recommendation</u>: Perform an annual review of all federal funds to verify whether the cumulative total of expenditures of federal funds meets or exceeds the \$750,000 single audit threshold.

Finding: Federal Audit Clearinghouse filing for the current year (2022) was not completed timely.

<u>Corrective Action</u>: We agree with and have implemented the recommendation. We currently have a reporting calendar to ensure timely fillings and will add dates to review total federal expenditures to the calendar.

#### Completion Date: Estimated May 2023

<u>Contact</u>: Jean O'Shea, Executive Director 9 Metrotech Center Room 5E-9 Brooklyn, New York 11201

Should you have any questions regarding these plans, please do not hesitate to contact me.

Thank you,

Office

Jean O'Shea Executive Director

Secretary Robert S. Tucker

Michael J. Regan

Chairman Emeritus Thomas Von Essen\*

Executive Director Jean O'Shea

\*Former Fire

www.fdnyfoundation.org 1(c)(3) organization established to fund fire safety in New York City and to help meet the Department's training, on needs.

## TAX RETURN FILING INSTRUCTIONS

#### FORM 990

#### FOR THE YEAR ENDING

JUNE 30, 2022

Prepared for	FDNY FOUNDATION, INC.
	9 METROTECH CENTER BROOKLYN, NY 11201
Prepared by	BUCHBINDER TUNICK & CO. LLP ONE PENN PLAZA - SUITE 3200 NEW YORK, NY 10119-0002
Amount due or refund	NOT APPLICABLE
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	NOT APPLICABLE
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-TE TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS. RETURN FORM 8879-TE TO US BY MAY 15, 2023.

Form 8879-TE		IRS e-file Signat	ture Authorization xempt Entity		OMB No. 1545-0047
Form OO/ 9-IE			1 , 2021, and ending JUN 30	<b>…</b> າາ	0004
	For calendar year 202		RS. Keep for your records.	, 20 <b><u>2</u> <u>2</u></b>	2021
Department of the Treasury Internal Revenue Service			879TE for the latest information.		
Name of filer				EIN or SSI	N
FDNY F	OUNDATION	. INC.		11-2	632404
Name and title of officer or pe		JEAN O'SHEA			
		EXECUTIVE DIRE	CTOR		
Part I Type of	Return and Re	eturn Information			
Form 5330 filers may ente or <b>10a</b> below, and the amo	er dollars and cents ount on that line for	. For all other forms, enter wh r the return being filed with th	d enter the applicable amount, if any, ole dollars only. If you check the box o is form was blank, then leave line <b>1b, 2</b> the return, then enter -0- on the applica	on line <b>1a, 2a</b> , 2b, 3b, 4b, 5b	, 3a, 4a, 5a, 6a, 7a, 8a, 9a, , 6b, 7b, 8b, 9b, or 10b,
	nere 🕨 🗶	<b>b. Total revenue</b> if any (F	orm 990, Part VIII, column (A), line 12)		ы10.547.733 <b>.</b>
2a Form 990-EZ che		<b>b</b> Total revenue, if any (F	orm 990-EZ, line 9)		10±0,5±1,1551
3a Form 1120-POL		<b>b</b> Total tay (Form 1120-P	OL, line 22)		20 3b
4a Form 990-PF che			ent income (Form 990-PF, Part V, line		
5a Form 8868 check			8, line 3c)		
6a Form 990-T check			Part III, line 4)		
7a Form 4720 check		<b>b</b> Total tax (Form 4720, F	Part III, line 1)		7b
8a Form 5227 check			of tax year (Form 5227, Item D)		8b
9a Form 5330 check		b Tax due (Form 5330, Pa			9b
10a Form 8038-CP ch			nent requested (Form 8038-CP, Part I	II, line 22)	10b
Part II Declarat	tion and Signa		Officer or Person Subject to		
Under penalties of perjury	, I declare that X	I am an officer of the above	entity or I am a person subject to	o tax with res	pect to (name
entry to the financial institu financial institution to debi later than 2 business days payment of taxes to receiv personal identification nur <b>PIN: check one box only</b>	ution account indic it the entry to this a s prior to the payme ve confidential infor mber (PIN) as my si	cated in the tax preparation so account. To revoke a paymen ent (settlement) date. I also au rmation necessary to answer ignature for the electronic retu	d Financial Agent to initiate an electro oftware for payment of the federal taxe t, I must contact the U.S. Treasury Fin ithorize the financial institutions involv inquiries and resolve issues related to irn and, if applicable, the consent to e	es owed on the ancial Agent red in the pro- the payment	iis return, and the at 1-888-353-4537 no cessing of the electronic . I have selected a Is withdrawal.
X I authorize BU	CHBINDER '	TUNICK & CO. LI	P	to enter my I	
		ERO firm name	9		Enter five numbers, but do not enter all zeros
with a state age	•	charities as part of the IRS Fe	f I have indicated within this return tha d/State program, I also authorize the		v
return. If I have i IRS Fed/State p	indicated within thi program, I will enter		I will enter my PIN as my signature on urn is being filed with a state agency(i usure consent screen.	es) regulating	
Signature of officer or person subjection Part III Certification	ation and Aut	entication	Υ	Dal	e ▶ 03/03/23
ERO's EFIN/PIN. Enter yo					
number (EFIN) followed by	-	-	1308251120 Do not enter all zero		
			the 2021 electronically filed return indi Modernized e-File (MeF) Information fo		
ERO's signature 🕨			Date		
		FRO Must Potain This	Form - See Instructions		
			e IRS Unless Requested To D	Do So	

LHA For Privacy act and Paperwork Reduction Act Notice, see instructions.

Department of the Treasury

## Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

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A	For th		enaing U	UN 30, 2022	
B	Check if applicat	e C Name of organization		D Employer identifie	cation number
	Addr chan		11 00004	o 4	
	chan	ge Doing business as		11-26324	04
	returi Final	Number and street (or P.U. box if mail is not delivered to street address)	Room/suite	E Telephone number 718-999-	
L	returi termi	n-		G Gross receipts \$	12,026,381.
	ated Amer retur	City or town, state or province, country, and ZIP or foreign postal code BROOKLYN, NY 11201		H(a) Is this a group re	
	Appl			for subordinates	
	pend			H(b) Are all subordinates in	
<u> </u>	Tax-ex	xempt status: X 501(c)(3) 501(c) ( )	or 527		list. See instructions
		ite: WWW.FDNYFOUNDATION.ORG		H(c) Group exemption	
		f organization: 🚺 Corporation 🔄 Trust 🔄 Association 🔄 Other 🕨	<b>L</b> Year		State of legal domicile: NY
_	art I	Summary			
-0	1	Briefly describe the organization's mission or most significant activities: $\underline{TO}$ A	SSIST	THE FDNY IN	ITS
Governance		MISSION TO PREVENT AND RESPOND TO FIRES	AND ME	DICAL EMERG	ENCIES,
irna	2	Check this box      if the organization discontinued its operations or dispo	sed of more	e than 25% of its net as	sets.
ove	3	Number of voting members of the governing body (Part VI, line 1a)			25
ۍ مح	4	Number of independent voting members of the governing body (Part VI, line 1b)			25
ŝ	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)			6
viti	6	Total number of volunteers (estimate if necessary)			125
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			202,581.
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.
				Prior Year	Current Year
ē	8	Contributions and grants (Part VIII, line 1h)		7,066,391.	8,422,065.
en	9	Program service revenue (Part VIII, line 2g)		191,629.	327,104.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		398,736.	517,708.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		373,158.	1,280,856.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		8,029,914.	10,547,733.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		2,025,708.	2,422,211.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		606,865.	718,923.
Expenses	16a	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 341,0		0.	0.
Т. В	b			<u> </u>	
	11/	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,269,166.	5,747,387.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		8,901,739.	8,888,521.
	19	Revenue less expenses. Subtract line 18 from line 12		-871,825.	1,659,212.
ts ol				ginning of Current Year 25,859,384.	End of Year
Bala	20	Total assets (Part X, line 16)		2,332,569.	25,141,119. 1,742,485.
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)		23,526,815.	23,398,634.
	art II	Net assets or fund balances. Subtract line 21 from line 20 Signature Block		ZJ, JZ0, OLJ.	43,390,034.
		alties of perjury, I declare that I have examined this return, including accompanying schedule	and atotam	ante and to the best of m	knowledge and belief it is
					y knowledge and bellet, it is
uue	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of w	men preparer	nas any knowledge.	

Sign Here	Signature of officer JEAN O'SUE2, EXACUTIVE Type or print name and title			Date				
Paid	Print/Type preparer's name	Preparer's signature	Date	Check PTIN if self-employed P01366109				
Preparer	Firm's name 🕨 BUCHBINDER TUNIC	K & CO. LLP		Firm's EIN 13-1578842				
Use Only	Firm's address ONE PENN PLAZA -							
	NEW YORK, NY 101	19-0002		Phone no.212-695-5003				
May the II	RS discuss this return with the preparer shown ab	ove? See instructions		X Yes No				
132001 12-0	132001 12-09-21 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2021)							

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

(Rev. January 2022)

### Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File :	a separate	application	for each	n return.

Go to www.irs.gov/Form8868 for the latest information.

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or	Name of exempt organization or other filer, see instru	ictions.		Taxpaye	r identifica	tion number (TIN)
print	FDNY FOUNDATION, INC.					632404
File by the due date for filing your <b>9 METROTECH CENTER</b>						
return. See instructions.	City, town or post office, state, and ZIP code. For a feedback BROOKLYN, NY 11201	oreign add	ress, see instructions.			
Enter the	Return Code for the return that this application is for (fil	e a separa	te application for each return)			0 1
Applicati	on	Return	Application			Return
Is For		Code	Is For			Code
Form 990	or Form 990-EZ	01	Form 1041-A			08
Form 472	0 (individual)	03	Form 4720 (other than individual)			09
Form 990	-PF	04	Form 5227			10
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	-T (trust other than above)	06	Form 8870			12
Form 990	-T (corporation) JEAN O'SHEA	07				
<ul> <li>If the c</li> <li>If this i</li> <li>box ▶ [</li> <li>1 I rea</li> <li>the</li> <li>▶ [</li> </ul>	none No. ▶       718-999-0779         organization does not have an office or place of busines         s for a Group Return, enter the organization's four digit	Group Exe and atta MAX anization's	emption Number (GEN) I         ch a list with the names and TINs of $X 15, 2023$ , to file         a return for:         d ending JUN 30, 2022	f this is fo all memb	r the whole ers the ex npt organiz 	e group, check this
<u>any</u> b If th	is application is for Forms 990-PF, 990-T, 4720, or 6069 nonrefundable credits. See instructions. his application is for Forms 990-PF, 990-T, 4720, or 6069 mated tax payments made. Include any prior year over	), enter an	y refundable credits and	3a 3b	\$	0.
c Bal	ance due. Subtract line 3b from line 3a. Include your pa	ayment wit	h this form, if required, by			î
	ng EFTPS (Electronic Federal Tax Payment System). Se			3c	\$	0.
Caution: instruction	If you are going to make an electronic funds withdrawal ns.	(direct de	bit) with this Form 8868, see Form 8	453-TE ar	nd Form 88	379-TE for payment

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)

Form	n 990 (2021) FDNY FOUNDATION, INC. 11-26	32404	Page <b>2</b>
	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	THE FDNY FOUNDATION IS THE OFFICIAL NOT-FOR-PROFIT ORGANIZATIO	ON OF	THE
	NEW YORK CITY FIRE DEPARTMENT (FDNY) TO HELP THE FDNY SAVE L	IVES A	ND
	PROTECT PROPERTY. WE FUND FDNY PROGRAMS IN FIRE AND LIFE SAF	ETY IN	
	THE COMMUNITY, AND EQUIPMENT, TRAINING, EDUCATION AND HEALTH	AND	
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Yes	XNo
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	XNo
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured to	by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total		
	revenue, if any, for each program service reported.		
4a	0.041.004	878,	050.)
	FIRE ZONE EDUCATIONAL PROGRAM - THE FDNY FOUNDATION OPERATES '		/
	ZONE, A NEW STATE-OF-THE-ART LEARNING CENTER LOCATED IN MIDTO	N	
	MANHATTAN IN ROCKEFELLER CENTER. THE FDNY FIRE ZONE PRE COVID	HAD B	EEN
	PROVIDING FIRE AND LIFE SAFETY EDUCATION TO MORE THAN 100,000	SCHOO:	ն
	CHILDREN, ADULTS AND VISITORS EACH YEAR. AT THE FIRE ZONE, VI		
	EXPERIENCE THE DANGERS OF FIRE AND UNDERSTAND THE IMPORTANCE (		Ξ
	PREVENTION.		
4b	(Code: ) (Expenses \$ 5,667,053. including grants of \$ 2,422,211.) (Revenue \$	293,	723.)
	FIRE AND LIFE SAFETY PROGRAMS - THE FDNY FOUNDATION FUNDS EDU	CATION	,
	TRAINING AND EQUIPMENT FOR FDNY MEMBERS TO SERVE THE PUBLIC,	SAVE L	IVES
	AND PROTECT PROPERTY. FUNDING INCLUDES THE FDNY FIRE SAFETY E	DUCATI	ON
	UNIT, THE FDNY CPR UNIT AND AN ARRAY OF PROGRAMS TO EDUCATE T	HE PUB	LIC
	IN FIRE AND SAFETY. THIS INCLUDES A COMPREHENSIVE SMOKE/CO AL	ARM	
	INSTALLATION IN THOUSANDS OF HI FIRE RISK HOMES. WE ALSO PROV	IDE FUI	NDS
	FOR MANY FDNY MEMBERS AND THEIR FAMILIES NEEDS FOR FDNY FIREF	IGHTER	s,
	EMT'S AND PARAMEDICS AS THEY RESPOND TO AN UNPRECEDENTED NUMB	ER OF	
	EMERGENCY RESPONSES IN NEW YORK CITY.		
4c			<b>333.</b> )
	WELLNESS PROGRAMS - THE FDNY FOUNDATION HELPS TO FUND VARIOUS	FDNY	
	HEALTH AND WELLNESS PROGRAMS TO HELP MEET THE NEEDS OF OUR FI	RST	
	RESPONDERS AND THEIR FAMILIES IMPACTED BY SICKNESS, TRAGEDY A		ER
	CHALLENGES. THIS SUPPORT INCLUDES THE FDNY COUNSELING PROGRAM	, 9/11	
	HEALTH AND WELLNESS INITIATIVES. THE FDNY FOUNDATION FUNDING	ALSO	
	SUPPORTS VARIOUS TRAINING, FITNESS, HEALTH AND WELLNESS PROJE	CTS TO	
	HELP FIRST RESPONDERS STAY IN OPTIMAL CONDITION.		
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	
4e	Total program service expenses 8,249,085.		
		Form 9	<b>90</b> (2021)
13200	02 12-09-21		
	3		

Form	aan	(2021)

Form 990 (2021) FDNY FOUNDATION, INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i>	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
-	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			v
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i>	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			<u> </u>
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

- Form 990 (2021)
   FDNY
   FOUNDATION,
   INC.

   Part IV
   Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			x
~~	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
u	"Yes," complete Schedule L, Part IV	28a		x
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f	200		
•	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		37	
Da	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
19	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 22		169	
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
v	(gambling) winnings to prize winners?	1c	х	

Form	990 (2021) FDNY FOUNDATION, INC.	11-2632	404	P	age <b>5</b>
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)				
		1		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 6	-	v	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur		2b	Х	
-	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions	3	-	v	
		•	3a	X X	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b	~	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	<b>,</b> ,			x
	financial account in a foreign country (such as a bank account, securities account, or other financial a	account)?	4a		
b	If "Yes," enter the name of the foreign country				
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A		-		v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		0-		x
	any contributions that were not tax deductible as charitable contributions?		6a		
D	If "Yes," did the organization include with every solicitation an express statement that such contribut	-	ch		
-	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c). Did the exception requires a payment in process of $$75$ mode partly as a contribution and partly for goods and partly	vises provided to the pover?	7-		x
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser		7a 7b		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	•	7-		x
-1	to file Form 8282?	7d	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year		7-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c		7e 7f		
t	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribution of qualified intellectual property, did the organization file for				
g	If the organization received a contribution of qualified intellectual property, did the organization file For		7g 7h		
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations maintaining donor advised funds. Did a donor advised fund maintained		711		
0	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained	-	8		
9	sponsoring organization have excess business holdings at any time during the year?		0		
э а			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organization make a distribution to a donor, donor advisor, or related person :		30		
	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
~	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b			
с	Enter the amount of reserves on hand	13c			
14a			14a		х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b		
15 15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune				
	excess parachute payment(s) during the year?		15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	t income?	16		х
-	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in	any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes." complete Form 6069.		-		

Form	990	(2021)
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#### FDNY FOUNDATION, INC.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI						Δ
Sec	tion A. Governing Body and Management						
		1.	1	25		Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year	<b>1</b> a		23			
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			25			
b	Enter the number of voting members included on line 1a, above, who are independent	1b		25			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other				
	officer, director, trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customarily performed by or under the	ie dire	ct supervision				
	of officers, directors, trustees, or key employees to a management company or other person?			[	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form	990 w	as filed?	[	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		[	5		Х
6	Did the organization have members or stockholders?			[	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoin	one or				
	more members of the governing body?				7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s						
	persons other than the governing body?				7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye						
а	The governing body?			Г	8a	Х	
	Each committee with authority to act on behalf of the governing body?				8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea			F			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R						
-			,			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			Γ	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such c			F			
	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo				11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	· <b>,</b> · · · ·					
	Did the organization have a written conflict of interest policy? If "No," go to line 13			- 1	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Y			···			
· ·	on Schedule O how this was done				12c	х	
13	Did the organization have a written whistleblower policy?				13	X	
14	Did the organization have a written document retention and destruction policy?				14	X	
15	Did the process for determining compensation of the following persons include a review and approv			···  -	17		
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		ldependent				
~	The organization's CEO, Executive Director, or top management official				15a	х	
					15a 15b	X	
u	Other officers or key employees of the organization			···	130		
160		mont	with a				
104	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange taxable antity during the year?				16-		х
L.	taxable entity during the year?			···	16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate in initial written and take at the organization to evaluate the organization of		-				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga				401-		
800	exempt status with respect to such arrangements?				16b		
	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright$ NY			-)/(0)	a a ca ba d	N	-  -  -
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	ina 99	U-1 (Section 501(	c)(3)s	sonly	) availa	adie
	for public inspection. Indicate how you made these available. Check all that apply.						
• -	X Own website Another's website Upon request Other (explain		,				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, c	onflict	of interest policy	, and	d finar	ncial	
	statements available to the public during the tax year.						
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks a	nd records				
	JEAN O'SHEA - 718-999-0779						
	9 METRO TECH CENTER, BROOKLYN, NY 11201-3857						

Part VII	Compensation of Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensate	d
	Employees, and Independe	ent Contra	ctors					

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(da	not c	Pos			000	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	is bot	h an	compensation	compensation	amount of
	week		cer an	ia a a I	recto	or/trus	itee)	from	from related	other
	(list any	irecto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ruste	l trus		/ee	mpen		1099-NEC)	1033-1120)	and related
	below	ndividual trustee or director	Institutional trustee	-	Key employee	Highest compensated employee	ы			organizations
	line)	Indivi	Institu	Officer	Key e	Highe emplo	Former			0
(1) JEAN O'SHEA	50.00									
EXECUTIVE DIRECTOR				X				227,802.	0.	11,175.
(2) STEPHEN RUZOW	5.00									
CHAIRMAN		Х		X				0.	0.	0.
(3) ROBERT S. TUCKER	2.00									
SECRETARY		Х		X				0.	0.	0.
(4) ROBERT T. ZITO	2.00									
VICE CHAIRMAN		Х		X				0.	0.	0.
(5) RETIRED COMMISSIONR SALVATORE C	2.00									
DIRECTOR		Х						0.	0.	0.
(6) CHRIS J. CARRERA	2.00									
DIRECTOR		Х						0.	0.	0.
(7) JOSEPH COPPOTELLI	2.00									
FORMER DIRECTOR		Х						0.	0.	0.
(8) PETER ARNELL	2.00									
DIRECTOR		Х						0.	0.	0.
(9) HOWARD KOEPPEL	2.00									
DIRECTOR		Х						0.	0.	0.
(10) JOHN C. SANTORA	2.00									
DIRECTOR		Х						0.	0.	0.
(11) WILLIAM B. SCHWARTZ	2.00									
DIRECTOR		Х						0.	0.	0.
(12) JERRY I. SPEYER	2.00									
DIRECTOR		Х						0.	0.	0.
(13) MICHAEL J. REGAN	2.00									
DIRECTOR		Х						0.	0.	0.
(14) WILLIAM BROWN	2.00									
DIRECTOR		Х						0.	0.	0.
(15) DANI JAMES	2.00									
DIRECTOR		Х						0.	0.	0.
(16) ADAM ROSE	2.00									_
DIRECTOR		Х						0.	0.	0.
(17) JURGEN TIMPERMAN	2.00							_	_	_
DIRECTOR		Х						0.	0.	0.

132007 12-09-21

Form 990 (2021)

Form 990 (	2021
Dort VII	•

<b>Fall VII</b> Section A. Officers, Directors, Trus		ploy	ees,			ghe	st (		· · · · · · · · · · · · · · · · · · ·	<u> </u>			
(A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average	(do	Position (do not check more than one					Reportable	Reportable		Es	timate	эd
	hours per					is bot pr/trus			compensation			nount	of
	week							from	from related			other	
	(list any hours for	irecto						the	organizations	,		pensa	
	related	e or d	ee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC 1099-NEC)	1		om th anizat	
	organizations	rustee	trus		ee	npen		1099-NEC)	1099-1120)		•	d relat	
	below	lual tr	tional		yolqr	st cor yee	_	10331120)				nizati	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orgo	un_ati	0110
(18) JON FOX	2.00	-			×	1 0				$\neg$			
DIRECTOR		x						0.	(	0.			0.
(19) EB KELLY	2.00									$\neg$			
DIRECTOR		x						0.	(	0.			0.
(20) JONATHAN KOHAN	2.00									$\neg$			
DIRECTOR		X						0.	(	0.			0.
(21) CHIEF THOMAS RICHARDSON	2.00												
FORMER DIRECTOR		X						0.	(	0.			Ο.
(22) AMANDA RUBIN	2.00												
DIRECTOR		X						0.	(	0.			0.
(23) MATT DILIBERTO	5.00												
TREASURER		X		Х				0.	(	0.			0.
(24) ANTHONY PASQUARIELLO	2.00												
DIRECTOR		Х						0.		0.			0.
(25) COMMISSIONER LAURA KAVANAGH	2.00												
DIRECTOR		Х						0.		0.			0.
(26) GRACE HIGHTOWER	2.00												
DIRECTOR		Х						0.		0.			0.
1b Subtotal								227,802.		0.	1	1,1	
c Total from continuation sheets to Part V	II, Section A							0.		0.			<u>    0     </u>
d Total (add lines 1b and 1c)								227,802.		0.	1	1,1	75.
2 Total number of individuals (including but r	not limited to th	nose	liste	ed a	bove	e) wł	no r	received more than \$100,	000 of reportable				4
compensation from the organization												X	
										Г	_	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer	, ,								,				v
line 1a? If "Yes," complete Schedule J for s											3		X
4 For any individual listed on line 1a, is the s			•					•	ne organization			Х	
and related organizations greater than \$15											4	Λ	
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes," con							eiai	ted organization or individ	Juai for services		5		х
Section B. Independent Contractors	ipiele Schedul	e J 1	01 50	JUIT	pers	<u>son</u> .				···	5		- 21
1 Complete this table for your five highest co	mpensated in	dona	ondo	nt c	onti	racto	ore f	that received more than 9	\$100.000 of comp	oner	f	rom	
the organization. Report compensation for	-									01130	100111	10III	
(A)	the outeridar y	our	orrai	ing v	vicii	01 10		(B)			(C	:)	
Name and business	address							Description of se	ervices	С	omper		n
ADIL BUSINESS SYSTEMS, I	NC.												
167 MADISON AVENUE, NEW	YORK, N	Y 1	100	)1(	5			TEMP EMPLOYM	ENT		49	0,0	90.
9 Total number of independent contractions	including but	ot !!	mit -	d +-	+h -	00 10			are then				
2 Total number of independent contractors (		iut II	nite	u 10	110	รย II: 1	steo	above) who received me	ore man				

Form 990 FDNY FOUL	NDATION	, 1	INC	2.					11-263	2404	
Part VII Section A. Officers, Directors, Tru	nplo	oyee	es, a	nd I	ligh	est	Compensated Employees (continued)				
(A) Name and title	<b>(B)</b> Average hours	(cl	<b>(C)</b> Position (check all that apply)				oly)	(D) Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of	
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
(27) JOHN HODGENS	2.00	v						0.	0.	0	
DIRECTOR (28) RETIRED COMMISSIONER DANIEL A.	2.00	Х			-		-	0.	0.	0.	
DIRECTOR		x						0.	0.	0.	
Total to Part VII, Section A, line 1c											

		Check if Schedule O					(A)	(B)	(C)	(D)
							Total revenue	Related or exempt		Revenue exclud
2	1 a	Federated campaigns		1a						
	b	Membership dues		1b						
	с	Fundraising events		1c		3,210,844.				
		Related organizations								
	е	Government grants (contr	ibuti	ons) <b>1e</b>		1,098,721.				
2	f	All other contributions, gifts,	grant	s, and						
		similar amounts not included	abov	/e 1f		4,112,500.				
	g	Noncash contributions included in	lines	1a-1f <b>1g</b>	\$	615,601.				
	h	Total. Add lines 1a-1f				►	8,422,065.			
						Business Code				
	2 a	EMS SEMINAR FEES				900099	162,493.	162,493.		
	b	PUBLICATION				511120	89,333.	89,333.		
	с	DOCUMENT CONTROL UN	IT E	ROCESSI	1G	511190	74,307.	74,307.		
	d	FIREZONE TICKET SAL	ES			900099	971.	971.		
	е									
	f	All other program service	reve	nue						
	g	Total. Add lines 2a-2f				►	327,104.			
	3	Investment income (includ	ding	dividends,	intere	est, and				
		other similar amounts)				►	292,419.			292,4
	4	Income from investment of	of tax	exempt b	ond p	oroceeds 🕨 🕨				
	5	Royalties	. <u></u> .			►	138,273.			138,2
				(i) Rea	ıl	(ii) Personal				
	6 a	Gross rents	6a	6,	000.					
	b	Less: rental expenses	6b		0.					
	с	Rental income or (loss)	6c	6,	000.					
	d	Net rental income or (loss)	)			►	6,000.			6,0
	7 a	Gross amount from sales of		(i) Securi	ties	(ii) Other				
		assets other than inventory	7a	1,073,	066.					
	b	Less: cost or other basis								
		and sales expenses	7b	847,	777.					
	с	Gain or (loss)	7c	225,	289.					
	d	Net gain or (loss)			<u>.</u>	►	225,289.			225,2
	8 a	Gross income from fundraising	ng ev	ents (not						
		including \$ 3,	210,	,844. of						
		contributions reported on	line	1c). See						
		Part IV, line 18			8a	391,388.				
	b	Less: direct expenses			8b	391,388.				
	с	Net income or (loss) from	fund	raising eve	nts	►	٥.			
	9 a	Gross income from gamin	g ac	tivities. Se	e					
		Part IV, line 19			9a					
	b	Less: direct expenses			9b					
	с	Net income or (loss) from	gam	ing activitie	es	►				
·	10 a	Gross sales of inventory, I	ess i	returns		]				
		and allowances			10a	1,244,836.				
	b	Less: cost of goods sold			10b	239,483.				
	С	Net income or (loss) from	sales	s of invento	ory	►	1,005,353.	802,772.	202,581.	
						Business Code				
	11 a	MISCELLANEOUS				900099	131,230.	131,230.		
	b									
	с									
	d	All other revenue								
		Total. Add lines 11a-11d				►	131,230.			
	12	Total revenue. See instruction	ne				10,547,733.	1,261,106.	202,581.	661,9

#### FDNY FOUNDATION, INC. Statement of Revenue

Form 990 (2021)
Part VIII

Form 990 (2021) FDNY FOUNDATION,
Part IX Statement of Functional Expenses INC.

Fart ix Statement of Functional Expenses	
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All ot	her organizations must complete column (A).

	Check if Schedule O contains a response	se or note to any line in	this Part IX		
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
•	and domestic governments. See Part IV, line 21	2,206,104.	2,206,104.		
2	Grants and other assistance to domestic	2/200/2010	2,200,1010		
2		216,107.	216,107.		
~	individuals. See Part IV, line 22	210,107.	210,107.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	247,688.	125 102	27 152	05 133
-	trustees, and key employees	247,000.	125,102.	37,153.	85,433.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	407 624	222 420		46 056
7	Other salaries and wages	407,634.	332,428.	28,950.	46,256.
8	Pension plan accruals and contributions (include	1 800	1 010	4 5 0	246
	section 401(k) and 403(b) employer contributions)	-1,729.	-1,210.	-173. 1,952.	-346.
9	Other employee benefits	19,489.	13,633.	1,952.	-346. 3,904. 8,539.
10	Payroll taxes	45,841.	33,346.	3,956.	8,539.
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
с	Accounting	60,476.		60,476.	
d	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	65,841.		65,841.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	121,567.	121,567.		
12	Advertising and promotion	734,336.	734,336.		
13	Office expenses	670,187.	572,962.	22,147.	75,078.
14	Information technology	16,502.	16,252.	250.	
15	Royalties				
16	Occupancy	1,065,940.	1,061,440.	4,500.	
17	Travel	35,291.	22,979.	100.	12,212.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	178,145.	63,955.	7,790.	106,400.
20	Interest				-
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	626,909.	626,909.		
23	Insurance				
23 24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	DONATED EQUIPMENT AND S	581,101.	581,101.		
a b	TEMPORARY HELP	539,305.	534,301.	5,004.	
u c	EQUIPMENT EXPENSE	525,643.	524,908.	235.	500.
c d	MISCELLANEOUS	268,927.	214,405.	52,255.	2,267.
		257,217.	248,460.	7,908.	849.
	All other expenses	8,888,521.	8,249,085.	298,344.	341,092.
25	Total functional expenses. Add lines 1 through 24e	0,000,5410	0,23,003.	270, 544.	541,094.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form <b>990</b> (2021)

11-2632404 Page 11

1

2

3 4

1,231,171.

5,148,483. 36,233.

(B)

End of year

3,938,839.

1,447,498.

5,497,710. 141,071.

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year 3,832,236.

FDNY FOUNDATION, INC.

Cash - non-interest-bearing

Savings and temporary cash investments

3 Pledges and grants receivable, net

4 Accounts receivable, net Loans and other receivables from any current or former officer, director,

	5	Loans and other receivables from any current or	Ionnei	onicer, director,			
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes	e perso	ons		5	
	6	Loans and other receivables from other disqualif	ied per	rsons (as defined			
		under section 4958(f)(1)), and persons described	l in sec	tion 4958(c)(3)(B)		6	
sts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			709,652.	8	1,031,889.
◄	9	Prepaid expenses and deferred charges			47,865.	9	56,252.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	5,430,838.			
	b	Less: accumulated depreciation	10b	1,502,959.	4,545,192.	10c	3,927,879.
	11	Investments - publicly traded securities			10,308,552.	11	9,099,981.
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line 1	1			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equa			25,859,384.	16	25,141,119.
	17	Accounts payable and accrued expenses			127,523.	17	92,485.
	18	Grants payable			1,500,000.	18	1,650,000.
	19	Deferred revenue		599,220.	19		
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete F				21	
Se	22	Loans and other payables to any current or form	er offic	er, director,			
Liabilities		trustee, key employee, creator or founder, substa	antial c	contributor, or 35%			
iabi		controlled entity or family member of any of thes	e perso	ons		22	
	23	Secured mortgages and notes payable to unrela	ted thi	rd parties		23	
	24	Unsecured notes and loans payable to unrelated	l third j	parties	105,826.	24	
	25	Other liabilities (including federal income tax, pay	ables	to related third			
		parties, and other liabilities not included on lines	17-24)	. Complete Part X			
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			2,332,569.	26	1,742,485.
		Organizations that follow FASB ASC 958, chee	ck her	e ▶ X			
čě		and complete lines 27, 28, 32, and 33.					
lan	27	Net assets without donor restrictions			17,091,499.	27	18,000,890.
Ba	28	Net assets with donor restrictions			6,435,316.	28	5,397,744.
Fund Balances		Organizations that do not follow FASB ASC 95	58, che	eck here 🕨 🗌			
		and complete lines 29 through 33.					
0 5	29	Capital stock or trust principal, or current funds				29	
Net Assets or	30	Paid-in or capital surplus, or land, building, or equ			30		
: As	31	Retained earnings, endowment, accumulated inc			31		
Net	32	Total net assets or fund balances		23,526,815.	32	23,398,634.	
	33	Total liabilities and net assets/fund balances		25,859,384.	33	25,141,119.	
							Form <b>990</b> (2021)

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Form 990 (2	2021
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	1 990 (2021) FDNY FOUNDATION, INC.	11 - 2	532404	Paç	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,54		
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,888		
3	Revenue less expenses. Subtract line 2 from line 1	3	1,659		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	23,520		
5	Net unrealized gains (losses) on investments	5	-1,909		
6	Donated services and use of facilities	6	122	2,5	00.
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	23,398	<u>3,6</u>	34.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<b>2</b> a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		<b>2</b> b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>		000	Ĺ

Form **990** (2021)

Department of the Treasury

Internal Revenue Service

(Form	990)
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## Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

	OMB No. 1545-0047					
	2021					
	Open to Public Inspection					
٦r	r identification number					

Name of the organization
--------------------------

Nam	Name of the organization Employer identification number								
	FDNY FOUNDATION, INC. 11-2632404 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.						1-2632404		
Pa	rtI	Reason for Public	Charity Status.	All organizations must c	omplete tl	his part.) S	See instruction	ns.	
The	organ	ization is not a private found							
1		A church, convention of ch	urches, or associatio	on of churches describe	d in <b>sectio</b>	on 170(b)(*	1)(A)(i).		
2		A school described in sect	ion 170(b)(1)(A)(ii). (/	Attach Schedule E (Forn	n 990).)				
3		A hospital or a cooperative	hospital service orga	anization described in <b>s</b> e	ection 170	)(b)(1)(A)(i	ii).		
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,							
		city, and state:							
5		An organization operated for		llege or university owned	d or opera	ted by a g	overnmental	unit describ	bed in
		section 170(b)(1)(A)(iv). (C							
6		A federal, state, or local go							
7	Χ	An organization that norma		ntial part of its support f	rom a gov	ernmental	unit or from t	the general	public described in
_		section 170(b)(1)(A)(vi). (C							
8		A community trust describe							
9		An agricultural research org	-			-		-	-
		or university or a non-land-o	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state o	f the colleg	e or
10		university:		then 00 1/00/ of its own		+ - :   + : -		hin face	ad average variate from
10		An organization that norma							
		activities related to its exen income and unrelated busin							
		See section 509(a)(2). (Con				sses acqu		Iganization	allei Julie 30, 1973.
11		An organization organized a	,	ively to test for public sa	fety See	section 50	)9(a)(4)		
12		An organization organized a	-	•	•			arry out the	purposes of one or
		more publicly supported or	-	-				-	
		lines 12a through 12d that							
а		<b>Type I.</b> A supporting orga				-		-	giving
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or truste	ees of the s	supporting
		organization. You must o	complete Part IV, Se	ections A and B.					
b		<b>Type II.</b> A supporting org	anization supervised	l or controlled in connec	tion with it	ts support	ed organizatio	on(s), by ha	ving
		control or management o	of the supporting orga	anization vested in the s	ame perso	ons that co	ontrol or mana	age the sup	ported
		organization(s). You mus	t complete Part IV,	Sections A and C.					
С		Type III functionally interpretent of the second	grated. A supporting	g organization operated	in connec	tion with, a	and functiona	Illy integrate	ed with,
		its supported organizatio	n(s) (see instructions	s). You must complete l	Part IV, Se	ections A,	D, and E.		
d		Type III non-functionally	<b>y integrated.</b> A supp	orting organization oper	ated in co	nnection w	vith its suppo	rted organi	zation(s)
		that is not functionally int	tegrated. The organiz	zation generally must sa	tisfy a dist	ribution re	quirement an	d an attent	iveness
		requirement (see instruct	ions). <b>You must con</b>	nplete Part IV, Sections	s A and D,	, and Part	V.		
е		☐ Check this box if the orga					а Туре I, Туре	e II, Type III	
	_	functionally integrated, or		nally integrated support	ing organi	zation.			
f		er the number of supported of	•						
g		vide the following information i) Name of supported	ii) EIN	d organization(s).	(iv) Is the orga	inization listed	(v) Amount o	fmonetary	(vi) Amount of other
		organization		(described on lines 1-10	in your governi Yes	inization listed ing document? <b>No</b>	support (see in		support (see instructions)
				above (see instructions))	165	NO			
Tota	1								

Schedule	A (Fo	orm 99	90) 2	202

FDNY FOUNDATION, INC.

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

See	Section A. Public Support								
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	(d) 2020	(e) 2021	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	7106875.	6536046.	7939532.	7066391.	8422065.	37070909.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge $\dots$								
4	Total. Add lines 1 through 3	7106875.	6536046.	7939532.	7066391.	8422065.	37070909.		
5	The portion of total contributions								
	by each person (other than a								
	governmental unit or publicly								
	supported organization) included								
	on line 1 that exceeds 2% of the								
	amount shown on line 11,								
	column (f)						1585082.		
6	Public support. Subtract line 5 from line 4.						35485827.		
See	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total		
7	Amounts from line 4	7106875.	6536046.	7939532.	7066391.	8422065.	37070909.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources $\dots$	345,274.	426,898.	365,087.	268,083.	436,692.	1842034.		
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI.)	488,928.	607,330.	307,810.	191,845.		2054247.		
11	Total support. Add lines 7 through 10						40967190.		
12	Gross receipts from related activities,	, etc. (see instruction	ons)			12			
13	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section §	501(c)(3)			
	organization, check this box and stop						<b>)</b>		
See	ction C. Computation of Publ	ic Support Pe	rcentage						
	Public support percentage for 2021 (					14	86.62 %		
	Public support percentage from 2020					15	84.70 %		
<b>16</b> a	33 1/3% support test - 2021. If the o								
	stop here. The organization qualifies								
b	33 1/3% support test - 2020. If the o								
	and <b>stop here.</b> The organization qual								
17a	10% -facts-and-circumstances tes	<b>t - 2021.</b> If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,		
	and if the organization meets the fact	s-and-circumstanc	es test, check this	s box and <b>stop he</b>	r <b>e.</b> Explain in Part	VI how the organiz	zation		
	meets the facts-and-circumstances te	est. The organization	on qualifies as a p	ublicly supported of	organization		▶∟		
b	10% -facts-and-circumstances tes	<b>t - 2020.</b> If the org	anization did not o	check a box on line	e 13, 16a, 16b, or 1	17a, and line 15 is	10% or		
	more, and if the organization meets the								
	organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization								
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17t	o, check this box a	ind see instruction	ns ►		
	Schedule A (Form 990) 2021								

DNY	FOUNDATION,	INC.

### Part III Support Schedule for Organizations Described in Section 509(a)(2)

 $\mathbf{F}_{i}$ 

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	,	,				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
-	ization's benefit and either paid to						
	or expended on its behalf						
F							
5	The value of services or facilities						
	furnished by a governmental unit to						
-	the organization without charge						
	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support					_	
	endar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain					1	
	or loss from the sale of capital						
12	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)	l na arganization's f	l	fourth or fifth tox		[ 501(a)(2) argan	ization
14	First 5 years. If the Form 990 is for the	-			-		
50	check this box and stop here		rcentage				
	-			column (f)		15	0/
	Public support percentage for 2021 (					15	%
<u>16</u>	Public support percentage from 2020 ction D. Computation of Inve					16	%
	-						
	Investment income percentage for 20					17	%
18	Investment income percentage from					18	%
192	<b>33 1/3% support tests - 2021.</b> If the	-					
	more than 33 1/3%, check this box a						►
k	<b>33 1/3% support tests - 2020.</b> If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	▶∟

FDNY FOUNDATION, INC.

Yes No

#### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer lines 3b and 3c below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If* "Yes," *describe in* **Part VI** *when and how the organization made the determination.*
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "*Yes*," *provide detail in* **Part VI**.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Schedule A	(Form 990)	2021	FDNY	FOUNDATION,	INC
Part IV	Support	ing Org	janizations <sub>((</sub>	continued)	

1

2

...

Yes

No

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			

	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
2	Did the organization operate for the benefit of any supported organization other than the supported
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,
	supervised, or controlled the supporting organization.

effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported

Section C.	Type II Suppo	orting Organizations	

			Yes	NO
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Se	ection D. All Type III Supporting Organizations			

		_
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	
	the organization maintained a close and continuous working relationship with the supported organization(s).	2
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a	

3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a	
	significant voice in the organization's investment policies and in directing the use of the organization's	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	
	supported organizations played in this regard.	3

#### Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the	e organization used t	to satisfy the Integral Part	Test during the yea(see instructions)
---	-------------------------------------------	-----------------------	------------------------------	---------------------------------------

- a \_\_\_\_ The organization satisfied the Activities Test. Complete line 2 below.
- **b** L The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- c L The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" provide details in **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*

6

Distributable Amount. Subtract line 5 from line 4, unless subject to

Schedule A	(Form 990)	) 2021	
Dart V	Type III	Non-Eunc	tio

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		

emergency temporary reduction (see instructions). 6 7 - Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2021

Schedule A		
Dort V	Type III	Non

Par	t V   Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(contine</sub>	ued)	
Secti	on D - Distributions		·		Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exemption				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	าร	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in <b>Part VI</b> )		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	e		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	ns	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
с	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2017				
-	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
е	Excess from 2021				

Schedule A (Form 990) 2021

Schedule A	(Form 990) 2021		FOUNDA					11-2632404 Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D, Section D, lines 5, 6, and (See instructions.)	l, 2, 3b, 3c, lines 2 and	4b, 4c, 5a, 6 3; Part IV, S	, 9a, 9b, 9c ection E, lin	, 11a, 11b es 1c, 2a,	, and 11c; Part I\ 2b, 3a, and 3b; I	/, Section B, lines <sup>·</sup> Part V, line 1; Part <sup>v</sup>	1 and 2; Part IV, Section C, V, Section B, line 1e; Part V,

# Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Our and in ation to us a laboration

# **Schedule of Contributors**

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

OMB No. 1545-0047

2021

Employer identification number

1	1	_	2	6	3	2	4	0	4	
-	-		~	~	-	~	-	~	-	

FDNY	FOUNDATION,	INC.
------	-------------	------

organization type (check one).					
Filers of:	Section:				
Form 990 or 990-EZ	X 501(c)( 3) (enter number) organization				
	4947(a)(1) nonexempt charitable trust <b>not</b> 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

X 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 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 for an *exclusively* religious is checked.

**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).

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

#### Schedule B (Form 990) (2021)

Name of organization

Employer identification number

11-2632404

#### FDNY FOUNDATION, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	itional space is needed.	
(a)	(b)	(c)	(d)
<u>No.</u>	Name, address, and ZIP + 4         GOLDMAN SACHS         C/O FDNY FOUNDATION, INC	Total contributions	Type of contribution         Person       X         Payroll
(a) No.	BROOKLYN, NY 11201 (b) Name, address, and ZIP + 4	(c) Total contributions	noncash contributions.) (d) Type of contribution
2	FDNY UNIFORMED FIRE OFFICERS ASSOCIATION C/O FDNY FOUNDATION, INC BROOKLYN, NY 11201	\$212,429.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	·	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

FDNY FOUNDATION, INC.

11 - 2632404

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	85,000 BOTTLES OF ORGANIC WATER		
		\$ <u>212,429</u> .	07/15/21
(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
		_	
23453 11-11		\$	Schedule B (Form 990) (2021

Name of or	rganization		Employer identification number
FDNY H	FOUNDATION, INC.		11-2632404
Part III		through (e) and the following line er haritable, etc., contributions of \$1,000 or	section 501(c)(7), (8), or (10) that total more than \$1,000 for the year ntry. For organizations r less for the year. (Enter this info. once.) \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of git	
-	Transferee's name, address, an	Id ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of git Id ZIP + 4	ift Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of git	ift Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of git	
-	Transferee's name, address, an	Id ZIP + 4	Relationship of transferor to transferee

		0		0		OMB No. 1545-00	147
	SCHEDULE D (Form 990) Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990,					2021	-1
(Forr	n 990)	Part IV, line 6, 7, 8, 9, 10				2021	
	ment of the Treasury I Revenue Service		Attach to Form 990.			Open to Pub Inspection	ic
-	e of the organizati				1	oloyer identification nur	nber
		FDNY FOUNDATION, I				11-2632404	
Pa		ations Maintaining Donor Advise		r Similar Funds or <i>I</i>	Αςςοι	Ints.Complete if the	
	organizatio	on answered "Yes" on Form 990, Part IV, lir	1	icad funda	(h) [	de and other accounts	
	Tatal much an at a		(a) Donor adv		(D) Fur	ids and other accounts	
1		nd of year					
2 3		of contributions to (during year) of grants from (during year)					
4		at end of year					
5		on inform all donors and donor advisors in		held in donor advised fu	nds		
	-	on's property, subject to the organization's	-			Yes	No
6	Did the organization	on inform all grantees, donors, and donor a	advisors in writing that	grant funds can be used	only		
	for charitable purp	poses and not for the benefit of the donor	or donor advisor, or fo	r any other purpose confe	rring		-
	impermissible priv						No
Pa		ation Easements. Complete if the or	-		/, line 7	•	
1		servation easements held by the organizat	· · · · · ·	<u>,,</u>		inconstant land aver	
		n of land for public use (for example, recrea of natural habitat	ation or education)	Preservation of a hist     Preservation of a cert			
		n of open space	L	Preservation of a cen	inea ni	stone structure	
2		through 2d if the organization held a qual	ified conservation con	tribution in the form of a c	onserv	ation easement on the la	st
_	day of the tax yea					Held at the End of the Tax	
а	Total number of co	onservation easements			2a		
					2b		
с	Number of conser	vation easements on a certified historic st	ructure included in (a)		2c		
d		vation easements included in (c) acquired					
		nal Register			2d		
3		vation easements modified, transferred, re	eleased, extinguished,	or terminated by the orga	nizatio	n during the tax	
	year		a construct in the extend				
4 5		where property subject to conservation ea					
5		tion have a written policy regarding the pe forcement of the conservation easements				Yes	No
6		er hours devoted to monitoring, inspecting		and enforcing conservat			
•			,	, and enteroning concerna		, series a series g a re y cal	
7	Amount of expens	ses incurred in monitoring, inspecting, han	dling of violations, and	enforcing conservation e	aseme	nts during the year	
	▶\$						
8		rvation easement reported on line 2(d) abo					-
_		i)(4)(B)(ii)?					No
9		be how the organization reports conservat		•			
		d include, if applicable, the text of the foot	note to the organization	on's financial statements t	hat des	scribes the	
Pa		counting for conservation easements. ations Maintaining Collections of	of Art. Historical	Freasures, or Other	Simil	ar Assets.	
		f the organization answered "Yes" on Forn					
-1a	If the organization	elected, as permitted under FASB ASC 9	58, not to report in its	revenue statement and ba	alance	sheet works	
	•	easures, or other similar assets held for pu	· ·				
	service, provide in	Part XIII the text of the footnote to its fina	incial statements that	describes these items.			
b	-	elected, as permitted under FASB ASC 9					
		sures, or other similar assets held for publi	c exhibition, educatior	n, or research in furtherand	ce of pu	ublic service,	
	•	ing amounts relating to these items:				•	
		ided on Form 990, Part VIII, line 1				\$	
•		ed in Form 990, Part X					
2	0	received or held works of art, historical tre unts required to be reported under FASB /	-		, provic		
а	-	l on Form 990. Part VIII. line 1	So soo relating to the			\$	

b	Assets included in Form 990, Part X	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 132051 10-28-21 ▶ \$

Schedule D (Form 990) 2021

	dule D (Form 990) 2021 FDNY FO	UNDATION,		acuras or Ot				Page 2
	Using the organization's acquisition, accessi							uea)
3	collection items (check all that apply):	on, and other record	s, check any of the	Tollowing that make	signincarit	use of its		
а	Public exhibition	d		hange program				
b	Scholarly research	e		nange program				
c	Preservation for future generations	e						
4	-	ollections and explain	how they further t	he organization's ex	empt nurn	oso in Par	+ XIII	
5								
Ŭ	to be sold to raise funds rather than to be ma						Yes	🗌 No
Par	t IV Escrow and Custodial Arran							
	reported an amount on Form 990, Pa		to in the organizatio			o, i aitiv,		
1a	Is the organization an agent, trustee, custod		iary for contribution	ns or other assets n	ot included			
	on Form 990, Part X?						Yes	
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:			······		
	······································						Amount	
с	Beginning balance				1c			
	Additions during the year							
	Distributions during the year							
f	Ending balance							
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or c	ustodial account lia	oility?		Yes	No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided on Part X				
Par								
		(a) Current year	<b>(b)</b> Prior year	(c) Two years back	(d) Three y	years back	(e) Four	years back
1a	Beginning of year balance	11,136,959.	8,960,330.	8,579,149	. 7,9	972,827.	6,	605,689.
b	Contributions	250,000.			2	250,000.		250,000.
	Net investment earnings, gains, and losses	-1,439,647.	2,176,629.	381,181	. 3	356,322.	1,	117,138.
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
g	End of year balance	9,947,312.	11,136,959.	8,960,330	. 8,5	579,149.	7,	972,827.
2	Provide the estimated percentage of the cur	rent year end balanc	e (line 1g, column (a	a)) held as:				
а	Board designated or quasi-endowment		_%					
b	Permanent endowment	%						
С	Term endowment	%						
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.						
3a	Are there endowment funds not in the posse	ession of the organization	ation that are held a	and administered for	the organi	zation	F	
	by:							Yes No
	(i) Unrelated organizations						3a(i)	X
	(ii) Related organizations						3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organization						3b	
4	Describe in Part XIII the intended uses of the		wment funds.					
Par	t VI Land, Buildings, and Equipm							
	Complete if the organization answere							
	Description of property	(a) Cost or of			Accumulate		(d) Book	value
		basis (investr	nent) basis	(other) d	epreciation			
	Land							
	Buildings			C 102	000 4		2 70/	0.
	Leasehold improvements			6,183.	869,4			5,775.
	Equipment			4,655.	633,5	<u>. TC</u>	141	.,104.
	Other		<u> </u>				2 0 0 5	$\frac{0.}{700}$
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part .	X, column (B), line 1	10c.)			<u>ع</u> , ۶۷	7,879.

Schedule D (Form 990) 2021

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market valu
1) Financial derivatives		
2) Closely held equity interests		
) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market valu
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) 🕨		
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.	n Form 000 Port IV line	11d See Form 000 Part V line 15
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" c		
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" complete if the organization" complete if the organization and "Yes" complete if the organization" complete if the organization and "Yes" complete if the organization" complete if the organization" complete if the organization" complete if	on Form 990, Part IV, line Description	e 11d. See Form 990, Part X, line 15.
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)         Part IX         Other Assets.         Complete if the organization answered "Yes" complete if the organization answered "Yes" complete (a) D		
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)         Part IX         Other Assets.         Complete if the organization answered "Yes" complete if the organization answered "Yes" complete         (1)         (2)		
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)         Part IX         Other Assets.         Complete if the organization answered "Yes" complete if the organization answered "Yes" complete (a) D		
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" complete if the organization answered "Yes" complete (a) D (1) (2) (3) (4)		
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" c (a) D (1) (2) (3)		
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" c (a) D (1) (2) (3) (4)		
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" c (a) C (1) (2) (3) (4) (5)		
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" c (a) D (1) (2) (3) (4) (5) (6)		
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶         Part IX       Other Assets.         Complete if the organization answered "Yes" complete if the organization answered "Yes" complete         (1)         (2)         (3)         (4)         (5)         (6)         (7)		
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" c (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line	Description	(b) Book value
ottal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)         Part IX         Other Assets.         Complete if the organization answered "Yes" complete if the organization answered "Yes" complete         (1)         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)         ottal. (Column (b) must equal Form 990, Part X, col. (B) line	Description	(b) Book value
ottal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)         Part IX         Other Assets.         Complete if the organization answered "Yes" complete if the organization answered "Yes" complete         (1)         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)         ottal. (Column (b) must equal Form 990, Part X, col. (B) line	Description	(b) Book value
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" c (a) C (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	Description	(b) Book value
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)         Part IX       Other Assets.         Complete if the organization answered "Yes" complete if the organization answered "Yes" complete         (1)       (a) D         (1)       (a) D         (3)       (b) must equal Form 990, Part X, col. (c)	Description	(b) Book value (b) Book value 
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)         Part IX       Other Assets.         Complete if the organization answered "Yes" complete if the organization answered "Yes" complete         (1)       (a) D         (1)       (a) D         (3)       (4)         (5)       (6)         (7)       (8)         (9)       tal. (Column (b) must equal Form 990, Part X, col. (B) line         Part X       Other Liabilities.         Complete if the organization answered "Yes" complete if the organization answered "Yes" complete if the organization of liability         (1)       (a) Description of liability	Description	(b) Book value (b) Book value 
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)         Part IX       Other Assets.         Complete if the organization answered "Yes" complete if the organization answered "Yes" complete         (1)       (a) D         (1)       (b) must equal Form 990, Part X, col. (c) Part X         (3)       (c) Part X         (6)       (c) Part X         (7)       (c) Part X         (8)       (c) Part X         Other Liabilities.       Complete if the organization answered "Yes" complete if the organization answered "Yes" complete if the organization of liability         (1)       Federal income taxes         (2)       (c) Part X	Description	(b) Book value (b) Book value 
Art IX       Other Assets.         Complete if the organization answered "Yes" or (a) D         (1)         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)         Other Liabilities.         Complete if the organization answered "Yes" or (a) Description of liability         (1)         (5)         (6)         (7)         (8)         (9)         Other Liabilities.         Complete if the organization answered "Yes" or (a) Description of liability         (1)         (2)         (3)	Description	(b) Book value (b) Book value 
Art IX       Other Assets.         Complete if the organization answered "Yes" complete if the organization answered "Yes" complete if the organization answered "Yes" complete         (1)       (a) D         (1)       (a) D         (3)       (a)         (4)       (b) must equal Form 990, Part X, col. (b) line         (7)       (a)         (8)       (c)         (9)       Other Liabilities.         Complete if the organization answered "Yes" complete if the organization answered the organization answered "Yes" comple	Description	(b) Book value (b) Book value 
Other Assets.         Complete if the organization answered "Yes" or (a) D         (1)         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)         Other Liabilities.         Complete if the organization answered "Yes" or (a) Description of liability         (1)         (5)         (6)         (7)         (8)         (9)         Other Liabilities.         Complete if the organization answered "Yes" or (a) Description of liability         (1)         (2)         (3)         (4)         (5)         (3)         (4)         (5)	Description	(b) Book value (b) Book value 
Art IX       Other Assets.         Complete if the organization answered "Yes" or (a) D         (1)         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)         Other Liabilities.         Complete if the organization answered "Yes" or (a) Description of liability         (1)         (5)         (6)         (7)         (8)         (9)         Other Liabilities.         Complete if the organization answered "Yes" or (a) Description of liability         (1)         (2)         (3)         (4)         (5)         (6)         (6)	Description	(b) Book value (b) Book value 
Datal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶         Part IX       Other Assets. Complete if the organization answered "Yes" concentration (a) D         (1)       (a)         (2)       (a)         (3)       (4)         (5)       (6)         (7)       (8)         (9)       Other Liabilities.         Complete if the organization answered "Yes" concentration (b) must equal Form 990, Part X, col. (B) line         Part X       Other Liabilities.         Complete if the organization answered "Yes" concentration (b) must equal Form 990, Part X, col. (C) (B) line         Part X       Other Liabilities.         Complete if the organization answered "Yes" concentration (a) Description of liability         (1)       Federal income taxes         (2)       (3)         (4)       (5)         (6)       (7)	Description	(b) Book value (b) Book value 
Art IX       Other Assets.         Complete if the organization answered "Yes" complete if the organization answered "Yes" complete if the organization answered "Yes" complete         (1)       (a) D         (1)       (a) D         (3)       (b) must equal Form 990, Part X, col. (b) line         (6)       (7)         (8)       (9)         Other Liabilities.       Complete if the organization answered "Yes" complete if the organization answered "Yes" complete if the organization answered "Yes" complete if the organization of liability         (1)       Federal income taxes         (2)       (3)         (4)       (5)         (5)       (6)	Description	(b) Book value (b) Book value 

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) 2021

Sche	edule D (Form 990) 2021 FDNY FOUNDATION, INC.			11-	2632404 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	ents W	ith Revenue per R	letur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	-			
1	Total revenue, gains, and other support per audited financial statements			1	10,406,425.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-1,909,893.		
b	Donated services and use of facilities	2b	1,834,426.		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	-75,467.
3	Subtract line <b>2e</b> from line <b>1</b>			3	10,481,892.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	65,841.		
b	Other (Describe in Part XIII.)	4b			
с				4c	65,841.
				5	10,547,733.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			•	
5 Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	ents V		•	
5 Pa	rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ients V	Vith Expenses per	Retu	irn.
5 Pa 1	rt XII Reconciliation of Expenses per Audited Financial Statem	ients V	Vith Expenses per	•	
	rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ients V	/ith Expenses per	Retu	irn.
1	Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:	ients V	Vith Expenses per	Retu	irn.
1 2	Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities	ents V	/ith Expenses per	Retu	irn.
1 2 a	rt XII       Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments	2a 2b	/ith Expenses per	Retu	irn.
1 2 a b	rt XII       Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses	2a 2b 2c	/ith Expenses per	Retu	ırn. 10,534,606.
1 2 a b c	rt XII       Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses	2a 2b 2c 2d	Vith Expenses per	1 2e	ırn. 10,534,606. 1,711,926.
1 2 a b c	rt XII       Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a 2b 2c 2d	Vith Expenses per		ırn. 10,534,606.
1 2 b c d e	rt XII       Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d	2a 2b 2c 2d	Vith Expenses per	Retu           1           2e           3	ırn. 10,534,606. 1,711,926.
1 2 b c d 3	rt XII       Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	Vith Expenses per	Retu           1           2e           3	ırn. 10,534,606. 1,711,926.
1 2 b c d 3 4	rt XII       Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d	Vith Expenses per	Retu           1           2e           3	urn. 10,534,606. 1,711,926. 8,822,680.
1 2 a b c d e 3 4 a	<b>Reconciliation of Expenses per Audited Financial Statem</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)         Add lines 4a and 4b	2a 2b 2c 2d 4a 4b	Vith Expenses per 1,711,926. 65,841.	Retu           1           2e           3	urn. 10,534,606. 1,711,926. 8,822,680. 65,841.
1 2 d c 3 4 b c 5	rt XII       Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	Vith Expenses per 1,711,926. 65,841.	Retu           1           2e           3	urn. 10,534,606. 1,711,926. 8,822,680.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### PART V, LINE 4:

THE FOUNDATION'S BOARD OF DIRECTORS HAS DESIGNATED PORTIONS OF DONOR

WITHOUT RESTRICTIONS NET ASSETS FOR LONG TERM INVESTMENT. THE INCOME FROM

THE BOARD-DESIGNATED ENDOWMENT WOULD BE AVAILABLE TO BE SPENT ON THE

PROMOTION OF THE FOUNDATION'S MISSION.

PART X, LINE 2:

THE FOUNDATION ADOPTED THE PROVISIONS OF THE FINANCIAL ACCOUNTING

STANDARDS BOARD'S ACCOUNTING STANDARDS CODIFICATION ("ASC") TOPIC

740-10-05, RELATING TO THE ACCOUNTING AND REPORTING FOR UNCERTAINTY ON

FOR THE FOUNDATION, THESE PROVISIONS COULD BE APPLICABLE TO INCOME TAXES.

#### THE INCURRENCE OF UNRELATED BUSINESS INCOME ("UBIT") ATTRIBUTABLE TO SOME

11-2632404 Page 4

Schedule D (Form 990) 2021 FDNY FOUNDATION, INC.	11-2632404 Page 5
Part XIII Supplemental Information (continued)	
OF THE FIRE ZONE RETAIL STORE MERCHANDISE. BECAUSE OF THE	FOUNDATION'S
GENERAL TAX-EXEMPT STATUS, ASC TOPIC 740-10-05 DID NOT HAV	E, AND IS NOT
ANTICIPATED TO HAVE, A MATERIAL IMPACT ON THE FOUNDATION'S	FINANCIAL
STATEMENTS.	

SCHEDULE G	Suppleme	ntal Information Regarding	g Fun	drais	ing or Gaming	Activi	ties	OMB No. 1545-0047
(Form 990)		e organization answered "Yes" or organization entered more than \$1				or 19, oi	r if the	2021
Department of the Treasury Internal Revenue Service	► Go	► Attach to Form 990 to www.irs.gov/Form990 for inst				ion.		Open to Public Inspection
Name of the organization	n					E		dentification number
Darth Francis		UNDATION, INC.					1-263	
	complete this par	<ul> <li>Complete if the organization answitted</li> </ul>	ered "Y	'es" oi	n Form 990, Part IV,	line 17.	Form 990-	EZ filers are not
<ol> <li>Indicate whether the a Mail solicitate</li> <li>Mail solicitate</li> <li>Internet and</li> <li>Phone solicitate</li> <li>In-person social</li> <li>In-person social</li> <li>Did the organization</li> <li>key employees list</li> </ol>	e organization rais tions email solicitations tations dicitations on have a written o red in Form 990, P d highest paid indiv	sed funds through any of the followi e Solicita f Solicita g Specia or oral agreement with any individua art VII) or entity in connection with p viduals or entities (fundraisers) purs	ition of tion of I fundra I (inclue profess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, trus undraising services?	stees, o	<b>Y</b>	es No o be
(i) Name and addres or entity (fund		(ii) Activity	or cor	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	tò (or r fur	nount paid retained by ndraiser d in col. <b>(i)</b>	
			Yes	No				
Tatal								
Total           3 List all states in wh or licensing.	ich the organizatic	n is registered or licensed to solicit	contrik	outions	s or has been notified	d it is ex	empt from	n registration

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990) 2021

FDNY FOUNDATION, INC.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

and the second			of fundraising event contributions and gr		)-EZ,			eve	nts with gross r	eceip	ots greater than \$5,000.
age       (event type)       (event type)       (total number)       col. (c)         1       Gross receipts       3, 602, 232.       3, 602, 233         2       Less: Contributions       3, 210, 844.       3, 210, 844.         3       Gross income (line 1 minus line 2)       391, 388.       391, 381.         4       Cash prizes				(a) Event #1		(b) Event :	#2		.,	S	(d) Total events (add col. (a) through
age       3,602,232.       3,602,232.         2       Less: Contributions       3,210,844.         3       Gross income (line 1 minus line 2)       391,388.         4       Cash prizes						(event tvp	)e)		(total number)		col. <b>(c)</b> )
2       Less: Contributions       3, 210, 844.       3, 210, 844.         3       Gross income (line 1 minus line 2)       391, 388.       391, 381.         4       Cash prizes	anue			(		()	-,		()		
3       Gross income (line 1 minus line 2)       391,388.       391,388.         4       Cash prizes	Reve	1	Gross receipts	3,602,232.							3,602,232.
4       Cash prizes         5       Noncash prizes         6       Rent/facility costs         7       Food and beverages         8       Entertainment         9       Other direct expenses         10       Direct expenses summary. Add lines 4 through 9 in column (d)         11       Noncash prizes         9       Gaming. Complete if the organization answerd "Yes" on Form 990, Part IV, line 19, or reported more than         \$15,000 on Form 990-EZ, line 6a.         9       Cost prizes         1       Gross revenue         1       Gross revenue         2       Cash prizes         3       Noncash prizes         4       Cash prizes         9       Ves.		2	Less: Contributions	3,210,844.							3,210,844.
5       Noncash prizes       197,349.       197,349.         6       Rent/facility costs       197,349.       197,349.         7       Food and beverages       66,563.       66,563.         8       Entertainment       9       127,476.       127,476.         9       Other direct expenses       127,476.       127,476.         10       Direct expense summary. Add lines 4 through 9 in column (d)       391,386.         11       Net income summary. Subtract line 10 from line 3, column (d)       391,386.         11       Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.       (d) Direct expenses in a standard s		3	Gross income (line 1 minus line 2)	391,388.							391,388.
6       Rent/facility costs       197,349.       197,349.         7       Food and beverages       66,563.       66,563.         8       Entertainment       127,476.       127,477         9       Other direct expenses       127,476.       127,477         10       Direct expenses summary. Add lines 4 through 9 in column (d)       391,381       197,349.         11       Net income summary. Subtract line 10 from line 3, column (d)       391,381       197,349.         11       Net income summary. Subtract line 10 from line 3, column (d)       10       100         Part III       Gaming. Complete if the organization answered "Yes" on Form 990. Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.       (d) Total gaming (ac col. (a) through col. (b) Pull tabs/instant bingo/progressive bingo       (c) Other gaming       (d) Total gaming (ac col. (a) through col. (b) Pull tabs/instant         1       Gross revenue       1       1       Gross revenue       1       1         2       Cash prizes       1       1       1       1       1       1         3       Noncash prizes       1       1       1       1       1       1       1         4       Rent/facility costs       1       1       1       1       1       1		4	Cash prizes								
8       Entertainment       127,476.       127,476.         9       Other direct expenses       127,476.       127,477         10       Direct expense summary. Add lines 4 through 9 in column (d)       391,381         11       Net income summary. Subtract line 10 from line 3, column (d)       391,381         Part III       Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.       (d) Total gaming (ac col. (a) through col. (a) through col. (b) Pull tabs/instant bingo/progressive bingo         9       (a) Bingo       (b) Pull tabs/instant bingo/progressive bingo       (c) Other gaming         1       Gross revenue       (d) Total gaming (ac col. (a) through col. (b) Pull tabs/instant bingo/progressive bingo       (c) Other gaming         2       Cash prizes       (a) Bingo       (b) Pull tabs/instant bingo/progressive bingo       (c) Other gaming         3       Noncash prizes       (a) Expense summary. Add lines 2 through 5 in column (d)       (c) Yes       %         4       Rent/facility costs       (c) No       No       No       No         5       Other direct expenses summary. Add lines 2 through 5 in column (d)       No       No       No		5	Noncash prizes								
8       Entertainment       127,476.       127,476.         9       Other direct expenses       127,476.       127,477         10       Direct expense summary. Add lines 4 through 9 in column (d)       391,381         11       Net income summary. Subtract line 10 from line 3, column (d)       391,381         Part III         Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.         9       (a) Bingo       (b) Pull tabs/instant bingo/progressive bingo       (c) Other gaming       (d) Total gaming (ac col. (a) through col. (a) through col. (a) through col. (a) through col. (b) Pull tabs/instant         9       2       Cash prizes	penses	6	Rent/facility costs	197,349.							197,349.
8       Entertainment       127,476.       127,476.         9       Other direct expenses       127,476.       127,477         10       Direct expense summary. Add lines 4 through 9 in column (d)       391,381         11       Net income summary. Subtract line 10 from line 3, column (d)       391,381         Part III         Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.         9       (a) Bingo       (b) Pull tabs/instant bingo/progressive bingo       (c) Other gaming       (d) Total gaming (ac col. (a) through col. (a) through col. (a) through col. (a) through col. (b) Pull tabs/instant         9       2       Cash prizes	irect E>	7	Food and beverages	66,563.							66,563.
9 Other direct expenses 127,476.   10 Direct expense summary. Add lines 4 through 9 in column (d)   11 Net income summary. Subtract line 10 from line 3, column (d)   Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.   9 (a) Bingo   1 Gross revenue   1 Gross revenue   2 Cash prizes   3 Noncash prizes   4 Rent/facility costs   5 Other direct expenses   6 Volunteer labor   7 Direct expense summary. Add lines 2 through 5 in column (d)		8	Entertainment								
11 Net income summary. Subtract line 10 from line 3, column (d)         Part III       Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than         \$15,000 on Form 990-EZ, line 6a.       (a) Bingo         (a) Bingo       (b) Pull tabs/instant         bingo/progressive bingo       (c) Other gaming         1       Gross revenue       (d) Total gaming (ac col. (a) through col. (a) through col. (a) through col. (a) through col. (b) Pull tabs/instant         2       Cash prizes       (a) Bingo         3       Noncash prizes       (b) Pull tabs/instant         4       Rent/facility costs       (c) Other direct expenses         5       Other direct expenses       (c) Yes         6       Volunteer labor       No         7       Direct expense summary. Add lines 2 through 5 in column (d)       No											127,476.
Part III       Caming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.         Image: State of the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.         Image: State of the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.         Image: State of the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.         Image: State of the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.         Image: State of the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.         Image: State of the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.         Image: State of the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.         Image: State of the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.         Image: State of the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.         Image: State of the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.         Image: State of the organization answered "Yes" on Form 990-EZ, line 6a.         Image: State of the organization											391,388.
\$15,000 on Form 990-EZ, line 6a.       (a) Bingo       (b) Pull tabs/instant       (c) Other gaming       (d) Total gaming (ac col. (a) through col. (a) through col. (b) Pull tabs/instant         1       Gross revenue	_	_									0.
and the system of the syste	ιa			answered res on rom	1990	, Fait IV, III	19,01	rep	oneu more inai	1	
1 Gross revenue   2 Cash prizes   3 Noncash prizes   4 Rent/facility costs   5 Other direct expenses   6 Volunteer labor   7 Direct expense summary. Add lines 2 through 5 in column (d)	enue			(a) Bingo					(c) Other gamin	g	(d) Total gaming (add col. (a) through col. (c))
2 Cash prizes   3 Noncash prizes   4 Rent/facility costs   5 Other direct expenses   6 Volunteer labor   7 Direct expense summary. Add lines 2 through 5 in column (d)	Rev	1	Gross revenue								
3 Noncash prizes   4 Rent/facility costs   5 Other direct expenses   6 Volunteer labor   7 Direct expense summary. Add lines 2 through 5 in column (d)		2									
5       Other direct expenses         6       Volunteer labor	nses	2									
5       Other direct expenses         6       Volunteer labor         7       Direct expense summary. Add lines 2 through 5 in column (d)	Expe	3	Noncash prizes								
6       Volunteer labor       Yes%       Yes%       Yes%         7       Direct expense summary. Add lines 2 through 5 in column (d)       Image: Column (d)       Image: Column (d)	Direct	4	Rent/facility costs								
6       Volunteer labor       No       No         7       Direct expense summary. Add lines 2 through 5 in column (d)       No       Image: Column (d)		5	Other direct expenses								
		6	Volunteer labor			٦	%			_ %	
8 Net gaming income summary. Subtract line 7 from line 1, column (d)		7	Direct expense summary. Add lines 2 throug	h 5 in column (d)							
		8	Net gaming income summary. Subtract line 7	7 from line 1, column (d)							

9 Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states	?	Ves	No
<b>b</b> If "No," explain:			

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

132082 10-21-21

Schedule G (Form 990) 2021

Sch	edule G (Form 990) 2021 FDNY FOUNDATION, INC. 11-2	2632	404	Page <b>3</b>
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?		Yes	No No
13	Indicate the percentage of gaming activity conducted in:			
	a The organization's facility	13a		%
	• An outside facility			%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		1	,,,
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	🗌 No
b	o If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount			
	of gaming revenue retained by the third party ▶\$			
c	s If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation 🕨 \$			
	Description of services provided 🕨			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to			<u> </u>
	retain the state gaming license?	📖	Yes	∟ No
C	• Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year <b>&gt;</b> \$			
Pa	<b>Supplemental Information.</b> Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and Part I, line 2b, columns (iii) and (v); and P	art III li	nes 9	9h 10h
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	a e 111, 11	100 0,	00, 100,


SCHEDULE I (Form 990)			irants and Oth vernments, ar					OMB No. 1545-0047
Department of the Treasury       Attach to Form 990, Part IV, line 21 or 22.         Internal Revenue Service       Go to www.irs.gov/Form990 for the latest information.								
Name of the organ	zation FDNY FOUN	DATION, I	-					Employer identification number $11 - 2632404$
-	al Information on Grants a							
criteria used	anization maintain records to award the grants or assis	stance?						
Part II Grants	Part IV the organization's pro and Other Assistance to nt that received more than s	Domestic Organi	zations and Domesti	<b>c Governments.</b> C	omplete if the org	anization answered	∕es" on Form 990, Par	t IV, line 21, for any
• •	d address of organization government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
NEW YORK CITY C/O FDNY FOUND BROOKLYN, NY 1	,	13-6400434		2,206,104.	0.			TRAINING AND EDUCATION
2 Enter total nu	umber of section 501(c)(3) a	I Ind government or	I ganizations listed in th	ne line 1 table			I	· · · · · · · · · · · · · · · · · · ·
	umber of other organization ork Reduction Act Notice							▶ <u>1.</u> Schedule I (Form 990) 2021

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	<b>(c)</b> Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SUPPORT FOR FALLEN UNIFORM MEMBERS	37	216,107.	0.	FMV	

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE FDNY FOUNDATION PROVIDES SCHOLARSHIPS TO UNIFORMED MEMBERS THAT NEED

COLLEGE DEGREES TO FURTHER THEIR EXPERTISE AND ADVANCE IN THE RANKS OF THE

FDNY. SCHOLARSHIP RECIPIENTS MUST GET PRIOR APPROVAL OF CLASSES, RECEIVE A

MINIMUM OF A C GRADE AND WILL BE REIMBURSED AT THE END OF THE SCHOOL YEAR

UPON CHIEF OF TRANING SIGN OFF.

THE FOUNDATION ALSO PROVIDES SCHOLARSHIPS AND OTHER SUPPORT TO

CHILDREN/FAMILIES WHO HAVE LOST A PARENT THAT IS A UNIFORMED MEMBER OF THE

Schedule I (Form 990) FDNY FOUNDATION, INC.	11-2632404 Page 2
Part IV Supplemental Information	
FDNY. THE NAMES ARE PROVIDED AND CONFIRMED BY THE FDNY H	FAMILY ASSISTANCE
UNIT ASSISTANT COMMISSIONER. FUNDS ARE SENT DIRECTLY TO	SCHOOLS, 529
ACCOUNTS, OR BANK ACCOUNTS OF THE RECEIPIENTS FOR EDUCAT	TION AND/OR
ADDITIONAL SUPPORT WHEN REQUESTED AND APPROVED BY FAMILY	ASSISTANCE AND
FDNY FOUNDATION. SCHOLARSHIP RECIPIENTS ARE REQUIRED TO	SEND CONFIRMATION
OF ENROLLMENT TO THE FDNY FAMILY ASSISTANCE UNIT.	

-

SCHEDU	<b>Compensation Information</b>	OMB No.	1545-00	47			
(Form 99	Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest		21				
	Compensated Employees						
Department of	Department of the Treasury Complete if the organization answered "Yes" on Form 990, Part IV, line 23.						
Internal Reven	▶ Go to www.irs.gov/Form990 for instructions and the latest information.		ection				
Name of th	-	mployer identificat		mber			
	FDNY FOUNDATION, INC.	11-263240	4				
Part I	Questions Regarding Compensation						
			Yes	No			
	t the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 99	90,					
	II, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.						
	irst-class or charter travel Housing allowance or residence for personal						
	ravel for companions	lence					
	ax indemnification and gross-up payments	-1					
	Discretionary spending account	chet)					
h lfarr	of the house on line to are checked, did the exception follows without a line reading a second second						
	of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	46					
	ursement or provision of all of the expenses described above? If "No," complete Part III to explain	<u>1b</u>					
	e organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	2					
truste	es, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	<b>Z</b>					
3 Indica	te which, if any, of the following the organization used to establish the compensation of the organization's						
	Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization	u to					
	ish compensation of the CEO/Executive Director, but explain in Part III.	10					
	Compensation committee <b>X</b> Written employment contract						
	ndependent compensation consultant						
	Form 990 of other organizations	omittee					
4 During	the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing						
	zation or a related organization:						
a Recei	ve a severance payment or change-of-control payment?	4a		Х			
<b>b</b> Partic	pate in or receive payment from a supplemental nonqualified retirement plan?	4b		X			
<b>c</b> Partic	pate in or receive payment from an equity-based compensation arrangement?	4c		Х			
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.							
Only	section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.						
5 For pe	ersons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation						
	gent on the revenues of:						
	ganization?			X			
	elated organization?	<u>5b</u>		X			
	" on line 5a or 5b, describe in Part III.						
-	ersons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation						
	gent on the net earnings of:			v			
	rganization?			X			
	elated organization?	6b					
	s" on line 6a or 6b, describe in Part III.						
	ersons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	-		x			
	escribed on lines 5 and 6? If "Yes," describe in Part III						
	any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the contract exception described in Regulations section 53 ( $4958$ $4(a)(3)$ ) If "Ves." describe in Regulations			x			
	contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III						
		9					
	ations section 53.4958-6(c)? Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule J (For	m 000	0021			
	aper work neuronon Act Notice, see the instructions for Form 330.	Schedule 3 (FOr	11 330	, 202 I			

#### 11-2632404

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) JEAN O'SHEA	(i)	227,802.	0.	0.	5,700.	5,475.	238,977.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.		
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2021

Page 3

#### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2021

#### SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

**Open to Public** 

Department of the Treasury	
Internal Revenue Service	

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
 Attach to Form 990.

Attach to Form 990

► Go to www.irs.gov/Form990 for instructions and the latest information.

	Inspection
Employer	identification number
1	1-2632404

L

Name of the organization				
	FDNY	FOUNDATION,	INC.	
Part I Types of P	Property			

		(a)	(6)	(a)	(d)			
		<b>(a)</b> Check if	(b) Number of	(c) Noncash contribution	Method of de	termin	ina	
		applicable		amounts reported on	noncash contribu		•	s
		-1-1	items contributed	Form 990, Part VIII, line 1g				
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other $\blacktriangleright$ ( <u>FITNESS EQUIP</u> )	X	0		CASH VALUE			
26	Other $\blacktriangleright$ ( WATER - 1 BOT )	Х	85,000		CASH VALUE			
27	Other ( HAND SANITIZE )	X	14,976	119,808.	CASH VALUE			
28	Other ( MEALS )	Х	1,400		CASH VALUE			
29	Number of Forms 8283 received by the organi	zation during	g the tax year for o	contributions				
	for which the organization completed Form 82	83, Part V, D	Donee Acknowledg	jement 29				
							Yes	No
30a	During the year, did the organization receive b			-				
	must hold for at least three years from the date	e of the initia	al contribution, and	l which isn't required to be u	sed for			
	exempt purposes for the entire holding period	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that re	equires the review	of any nonstandard contribu	itions?	31	Х	<b> </b>
32a	Does the organization hire or use third parties	or related or	rganizations to soli	cit, process, or sell noncash				1

b If "Yes," describe in Part II.
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

contributions?

describe in Part II.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2021

32<u>a</u>

х

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

#### PART I, OTHER TYPES OF PROPERTY:

LYNC MEDICAL MASK

- (A) CHECK IF APPLICABLE = X
- (B) NUMBER OF CONTRIBUTIONS = 30000
- (C) REVENUE REPORTED ON FORM 990, PART VIII \$ 11994.
- (D) METHOD OF DETERMINING REVENUE: CASH VALUE

#### DINNER PRODUCTS

- (A) CHECK IF APPLICABLE = X
- (B) NUMBER OF CONTRIBUTIONS = 0
- (C) REVENUE REPORTED ON FORM 990, PART VIII \$ 1740.
- (D) METHOD OF DETERMINING REVENUE: CASH VALUE

HAND SANITIZER - 1 GALLON

- (A) CHECK IF APPLICABLE = X
- (B) NUMBER OF CONTRIBUTIONS = 10
- (C) REVENUE REPORTED ON FORM 990, PART VIII \$ 300.
- (D) METHOD OF DETERMINING REVENUE: CASH VALUE

#### COFFEE - 1LBS

- (A) CHECK IF APPLICABLE = X
- (B) NUMBER OF CONTRIBUTIONS = 40
- (C) REVENUE REPORTED ON FORM 990, PART VIII \$ 260.
- (D) METHOD OF DETERMINING REVENUE: CASH VALUE

SCHEDULE O

Department of the Treasury

Internal Revenue Service

(Form 990)

 Supplemental Information to Form 990 or 990-EZ
 OMB №. 1545-0047

 Complete to provide information for responses to specific questions on<br/>Form 990 or 990-EZ or to provide any additional information.
 OMB №. 1545-0047

 ▲ Attach to Form 990 or Form 990-EZ.
 Open to Public<br/>Inspection

Name of the organization

FDNY FOUNDATION, INC.

Employer identification number 11 - 2632404

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

DISASTER AND TERRORIST ACTS, PROTECTING THE LIVES AND PROPERTIES OF

RESIDENTS AND VISITORS IN NEW YORK CITY.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

WELLNESS NEEDS FOR FDNY MEMBERS.

FORM 990, PART VI, SECTION B, LINE 11B:

PROCESS FOR REVIEW OF FORM 990

A DRAFT COPY OF THE FORM 990 IS FIRST REVIEWED BY THE FINANCE COMMITTEE. THE REVISED DRAFT IS GIVEN TO THE FULL BOARD OF DIRECTORS FOR REVIEW AND QUESTIONS. AFTER ALL CHANGES HAVE BEEN ADDRESSED, THE FINAL 990 IS PROVIDED TO THE BOARD BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

CONFLICT OF INTEREST POLICY

BOARD MEMBERS AND PROFESSIONAL STAFF ARE REQUIRED TO ATTEST ANNUALLY TO THEIR FAMILIARITY WITH THE FOUNDATION'S POLICIES AND PROVIDE INFORMATION CONCERNING ANY POSSIBLE CONFLICT OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15:

EXECUTIVE COMPENSATION POLICY

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THE FDNY FOUNDATION PROCESS FOR DETERMINING EMPLOYEE COMPENSATION IS TO
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Schedule O (Form 990) 2021	Page <b>2</b>
Name of the organization FDNY FOUNDATION, INC.	Employer identification number $11 - 2632404$
REVIEW COMPARABLE SALARIES IN OTHER NOT FOR PROFIT ORGANI	ZATIONS, USE
VARIOUS POSTINGS SUCH AS THE CHRONICLE OF PHILANTHROPY AN	D THE CITY GUIDE

IN SALARY SCALES AND ALSO USE THE PROFESSIONALS FOR NON PROFIT SALARY

RANGE. ALL COMPENSATION IS APPROVED BY THE BOARD.

FORM 990, PART VI, SECTION C, LINE 19:

PUBLIC INSPECTION:

CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST. GOVERNING DOCUMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC.

FORM 990, PART XII, LINE 2C:

THE ORGANIZATION'S BOARD OF DIRECTORS ASSUMES RESPONSIBILITY FOR

OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN

INDEPENDENT ACCOUNTANT. THE PROCESS HAS NOT CHANGED FROM THE PRIOR

YEAR.

#### 2021 DEPRECIATION AND AMORTIZATION REPORT

#### FORM 990 PAGE 10

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0101 9	JO FAGE IU							990	_						
Asset No.	Description	Date Acquired	Method	Life	C o r v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	MACHINERY & EQUIPMENT														
1	COMPUTERS	05/01/02	SL	5.00		16	10,406.				10,406.	10,406.		0.	10,406.
2	COMPUTERS	12/01/02	SL	5.00		16	5,663.				5,663.	5,663.		0.	5,663.
7	DIGITAL PROJECTORS	02/01/04	SL	5.00		16	1,650.				1,650.	1,650.		0.	1,650.
8	EQUIPMENT	07/01/13	SL	5.00		16	173,586.				173,586.	173,586.		0.	173,586.
9	PROJECTOR	08/01/06	SL	5.00		16	7,863.				7,863.	7,863.		0.	7,863.
10	HAZARD HOUSES	02/01/05	SL	5.00		16	45,000.				45,000.	45,000.		0.	45,000.
11	AUDIO/VIDEO EQUIPMENT	07/01/00	SL	5.00		16	44,042.				44,042.	44,042.		0.	44,042.
12	PROJECTOR/CAMERAS	02/01/98	SL	5.00		16	13,455.				13,455.	13,455.		0.	13,455.
13	CASH REGISTERS AND SCANNERS	08/01/10	SL	7.00		16	19,662.				19,662.	19,662.		0.	19,662.
14	COMPUTERS	06/01/05	SL	5.00		16	4,720.				4,720.	4,720.		0.	4,720.
15	COMPUTERS	12/01/03	SL	5.00		16	1,105.				1,105.	1,105.		0.	1,105.
16	COMPUTERS	03/01/98	SL	5.00		16	9,660.				9,660.	9,960.		0.	9,960.
17	EQUIPMENT	06/01/15	SL	5.00		16	7,250.				7,250.	7,250.		٥.	7,250.
18	EQUIPMENT	12/31/15	SL	3.00		16	20,744.				20,744.	20,744.		0.	20,744.
19	EQUIPMENT	12/31/15	SL	7.00		16	22,845.				22,845.	17,952.		3,264.	21,216.
20	EQUIPMENT	12/31/15	SL	5.00		16	1,303.				1,303.	1,303.		0.	1,303.
21	EQUIPMENT	12/31/16	SL	5.00		16	2,860.				2,860.	2,573.		287.	2,860.

128111 04-01-21

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

#### 2021 DEPRECIATION AND AMORTIZATION REPORT

#### FORM 990 PAGE 10

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	JO FAGE IO							990							
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
22	EQUIPMENT	12/31/17	SL	5.00		16	1,213.				1,213.	850.		243.	1,093.
23	VECHICLES	12/31/17	SL	7.00		16	207,081.				207,081.	103,541.		29,583.	133,124.
24	COMPUTERS	12/31/17	SL	5.00		16	60,000.				60,000.	42,000.		12,000.	54,000.
25	EQUIPMENT	12/31/17	SL	5.00		16	20,324.				20,324.	14,227.		4,065.	18,292.
26	VECHICLES	12/31/18	SL	7.00		16	41,133.				41,133.	14,690.		5,876.	20,566.
27	EQUIPMENT	06/30/19	SL	5.00		16	1,847.				1,847.	889.		309.	1,198.
28	EQUIPMENT	12/31/18	SL	7.00		16	85.				85.	42.		12.	54.
30	COMPUTERS	12/31/19	SL	5.00		16	6,212.				6,212.	1,863.		1,242.	3,105.
31	CASH REGISTERS AND SCANNERS	12/31/19	SL	7.00		16	3,295.				3,295.	706.		471.	1,177.
32	EQUIPMENT	09/30/20	SL	5.00		16	32,054.				32,054.	3,088.		6,411.	9,499.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT						765,058.				765,058.	568,830.		63,763.	632,593.
	OTHER														
3	LEASEHOLD IMPROVEMENTS	02/01/11	SL	15.00		16	40,303.				40,303.	27,931.		2,686.	30,617.
29	LEASEHOLD IMPROVEMENTS	09/30/20	SL	8.00		16	4,615,879.				4,615,879.	279,289.		559,500.	838,789.
33	EQUIPMENT	01/13/02	SL	5.00		16	9,598.				9,598.			960.	960.
	* 990 PAGE 10 TOTAL OTHER						4,665,780.				4,665,780.	307,220.		563,146.	870,366.
	* GRAND TOTAL 990 PAGE 10 DEPR						5,430,838.				5,430,838.	876,050.		626,909.	1,502,959.

128111 04-01-21

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

## **CARRYOVER DATA TO 2022**

Name FDNY FOUNDATION, INC.	Employer Identification Number 11-2632404
Based on the information provided with this return, the following are possible carryover amounts to next year.	
FEDERAL POST-2017 NET OPERATING LOSS - MERCHANDISE SA	LES 212,099.
FEDERAL PRE-2018 NET OPERATING LOSS	677,313.
NY NET OPERATING LOSS	889,412.

Name:	FDNY FOUNDATI	ON, INC.								FEIN:	11-2632404
	and Entity: MER 382 Annual Limitation	CHANDISE SALE	S POST-2017 NO Section 382 Carryove		DETAIL C	ARRYOVER SCH	IEDULE				
Year Origi- nated	Original Carryover Amount	Total Amount Used	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A 2018 B 2019 C 2020 D 2021 E F G H	14,888. 115,223.										
G H J K											
R S T U											
W Detail Type	E Amount S Used for B C —	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
P Q R S T											
U V W						45.4					

Type a	and Entity: PRE	-2018 NOL FE	D		DETAIL C	ARRYOVER SCH	IEDULE				
Section	382 Annual Limitation		Section 382 Carryove	r			-				
			Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Am
Year	Original	Total	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Use
Origi-	Carryover	Amount									
nated											
2005		0360									-
2005	20 1 E O										_
2000	20,150.										
2007	18,497.										
2008	58,161.										
2009	24,861.										
2010	1,866.										
2011	32 327										
2012	39 205										
2012	200.										
2013	33,019.										
2014	371,241.										
2015	15,345.										
2016	20,305.										
2017	2,429.										1
	Amount 31,899. 28,158. 18,497. 58,161. 24,861. 1,866. 32,327. 39,205. 33,019. 371,241. 15,345. 20,305. 2,429.										
											_
	E Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Am
Detail	S Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amo
Detail Type	S Used for	Amount Used for									Amo
Detail Type	S Used for	Amount Used for									Ame Use
Detail Type	E Amount S Used for B	Amount Used for									Amo Use
Detail Type	S Used for	Amount Used for									Amo Use
Detail Type	S Used for	Amount Used for									Amo Use
Detail Type	S Used for	Amount Used for									Ama Use
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Detail Type	S Used for	Amount Used for									
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Detail	S Used for	Amount Used for									Amı Use
Detail Type	S Used for	Amount Used for									Amı Use
Detail Type	S Used for	Amount Used for									Ama Use

Name:	FDNY FOUNDATI	ON INC.								FEIN:	11-2632404
Type	and Entity: NOL	NY			DETAIL C	ARRYOVER SCH	IEDUI E				
Section	382 Annual Limitation	MI	Section 382 Carryover		DETAIL						
			Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount
Year	Original	Total	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for
Origi-	Carryover	Amount									
nated	Amount	Used									
A 2008 B 2008 C 2007 C 2008 E 2008 E 2008 G 2011 H 2012	28 158										
2001	18 497										
2008	58 161										
2009	24,861.										
2010	1,866.										
G 2011	1 32,327.										
H 2012	39,205.										
2013	33,019.										
J 2014	371,241.										
< 2015 2016	15,345.										
	20,305.										
M 2017 N 2018	$\begin{array}{c} 31,899\\ 28,158\\ 18,497\\ 58,161\\ 24,861\\ 1,866\\ 32,327\\ 39,205\\ 33,019\\ 371,241\\ 15,345\\ 20,305\\ 2,429\\ 54,670\\ 14,888\\ 115,223\\ 27,318\\ \end{array}$										
2019	14 888.										
2019 2020	115,223.										
2021 g	1 27,318.										
Ϋ́,											
2021 3 5 1											
J											
V N											
//	E Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount
Detail Type	S Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for
Туре	В										
	C										
5											
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# TAX RETURN FILING INSTRUCTIONS

### FORM 990-T

### FOR THE YEAR ENDING

JUNE 30, 2022

FDNY FOUNDATION, INC. 9 METROTECH CENTER
BROOKLYN, NY 11201
BUCHBINDER TUNICK & CO. LLP ONE PENN PLAZA - SUITE 3200 NEW YORK, NY 10119-0002
NO AMOUNT IS DUE.
NO AMOUNT IS DUE.
NOT APPLICABLE
NOT APPLICABLE
THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-TE TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS.

0070 TE	F	OMB No. 1545-0047	
Form 8879-TE	for a Tax Exempt Entity For calendar year 2021, or fiscal year beginning JUL $1$ , 2021, and ending JUN 30 ,		0004
		20 <u><b>4</b></u>	2021
Department of the Treasury Internal Revenue Service	<ul> <li>Do not send to the IRS. Keep for your records.</li> <li>Go to www.irs.gov/Form8879TE for the latest information.</li> </ul>		
Name of filer		EIN or SSN	
FDNY F	OUNDATION, INC.	11-26	32404
Name and title of officer or pe			
·	EXECUTIVE DIRECTOR		
Part I Type of	Return and Return Information		
Form 5330 filers may enter or <b>10a</b> below, and the and whichever is applicable, b than one line in Part I.	rn for which you are using this Form 8879-TE and enter the applicable amount, if any, from r dollars and cents. For all other forms, enter whole dollars only. If you check the box on pount on that line for the return being filed with this form was blank, then leave line <b>1b</b> , <b>2b</b> , ank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable	line <b>1a, 2a, 3</b> , <b>3b, 4b, 5b,</b> ( le line below.	ba, 4a, 5a, 6a, 7a, 8a, 9a 6b, 7b, 8b, 9b, or 10b, Do not complete more
1a Form 990 check h			1b
2a Form 990-EZ che			
3a Form 1120-POL			
4a Form 990-PF che 5a Form 8868 check			4b
6a Form 990-T chec			6b 0.
7a Form 4720 check	here <b>b</b> Total tax (Form 4720, Part III, line 1)		7b
8a Form 5227 check			8b
9a Form 5330 check			9b
10a Form 8038-CP ct			10b
Part II Declarat	ion and Signature Authorization of Officer or Person Subject to Ta		
Under penalties of perjury	, I declare that $[\tt X]$ I am an officer of the above entity or $[\hfill ]$ I am a person subject to t	ax with respe	ect to (name
financial institution to deb later than 2 business days payment of taxes to receiv	ution account indicated in the tax preparation software for payment of the federal taxes t the entry to this account. To revoke a payment, I must contact the U.S. Treasury Finan prior to the payment (settlement) date. I also authorize the financial institutions involved re confidential information necessary to answer inquiries and resolve issues related to the nber (PIN) as my signature for the electronic return and, if applicable, the consent to elec	icial Agent at I in the proce e payment. I	1-888-353-4537 no essing of the electronic have selected a
PIN: check one box only			
<b>L</b> I authorize <b>BU</b>		enter my Pl	
	ERO firm name		Enter five numbers, but do not enter all zeros
with a state age on the return's o As an officer or	on the tax year 2021 electronically filed return. If I have indicated within this return that a ncy(ies) regulating charities as part of the IRS Fed/State program, I also authorize the afor lisclosure consent screen. person subject to tax with respect to the entity, I will enter my PIN as my signature on th ndicated within this return that a copy of the return is being filed with a state agency(ies)	orementioned e tax year 20	d ERO to enter my PIN 021 electronically filed
IRS Fed/State p Signature of officer or person subje	rogram, I will enter my international et and of closure consent screen.	Date	▶ 05/05/23
Part III Certifica	tion and Authentication		
	bur six-digit electronic filing identification your five-digit self-selected PIN. 13082511201 Do not enter all zeros		
-	meric entry is my PIN, which is my signature on the 2021 electronically filed return indica accordance with the requirements of <b>Pub. 4163,</b> Modernized e-File (MeF) Information for A		
ERO's signature 🕨	Date		
	ERO Must Retain This Form - See Instructions		
	Do Not Submit This Form to the IRS Unless Requested To Do	So	
LHA For Privacy act and	Paperwork Reduction Act Notice, see instructions.		Form 8879-TE (2021)

Form <b>990-T</b>	Exempt Organization Business Income Tax Return	OMB No. 1545-0047
	(and proxy tax under section 6033(e))	22 2021
	For calendar year 2021 or other tax year beginning JUL 1, 2021 , and ending JUN 30, 202	
Department of the Treasury Internal Revenue Service	<ul> <li>Go to www.irs.gov/Form990T for instructions and the latest information.</li> <li>Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)</li> </ul>	()()
A Check box if address changed.	Name of organization ( Check box if name changed and see instructions.)	DEmployer identification number
B         Exempt under section $X$ $501(\mathbf{C})(3)$ $408(e)$ $220(e)$ $408A$ $530(a)$ $529(a)$ $529A$	Print       FDNY       FOUNDATION, INC.         or       Number, street, and room or suite no. If a P.O. box, see instructions.         9       METROTECH       CENTER         City or town, state or province, country, and ZIP or foreign postal code       BROOKLYN, NY 11201         C       Book value of all assets at end of year       24,911,832.	11-2632404         EGroup exemption number (see instructions)         F       Check box if an amended return.
G Check organization	type ► X 501(c) corporation 501(c) trust 401(a) trust Other trust	an amended return.
H Check if filing only t		
	organization filing a consolidated return with a 501(c)(2) titleholding corporation	
	f attached Schedules A (Form 990-T)	1
		Yes X No
	ame and identifying number of the parent corporation.	
L The books are in ca	re of ▶ JEAN O'SHEA Telephone number ▶ 7	18-999-0779
Part I Total Un	related Business Taxable Income	
1 Total of unrelated	business taxable income computed from all unrelated trades or businesses (see	
instructions)		1 0.
2 Reserved		2
3 Add lines 1 and 2		3
4 Charitable contrib	utions (see instructions for limitation rules)	4 0.
5 Total unrelated b	usiness taxable income before net operating losses. Subtract line 4 from line 3	5
6 Deduction for net	operating loss. See instructions	6 0.
7 Total of unrelated	business taxable income before specific deduction and section 199A deduction.	
Subtract line 6 fro	m line 5	7
8 Specific deduction	n (generally \$1,000, but see instructions for exceptions)	8 1,000.
9 Trusts. Section 1	99A deduction. See instructions	9
10 Total deductions	Add lines 8 and 9	10 1,000.
11 Unrelated busine	ess taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7,	
		11 0.
Part II Tax Com	•	
1 Organizations ta	xable as corporations. Multiply Part I, line 11 by 21% (0.21)	1 0.
2 Trusts taxable a	trust rates. See instructions for tax computation. Income tax on the amount on	
Part I, line 11 from		2
3 Proxy tax. See in		3
	s. See instructions	4
5 Alternative minim	um tax (trusts only)	5
	liant facility income. See instructions	6
	through 6 to line 1 or 2, whichever applies	
LHA For Paperwork	Reduction Act Notice, see instructions.	Form <b>990-T</b> (2021)

	90-T (2021)					P	age <b>2</b>
Part	III Tax and Payments						
1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a	a				
b	Other credits (see instructions)	1k	b				
с	General business credit. Attach Form 3800 (see instructions)	10	c				
d	Credit for prior year minimum tax (attach Form 8801 or 8827)		d				
е	Total credits. Add lines 1a through 1d			1e			
2	Subtract line 1e from Part II, line 7			2			0.
3	Other amounts due. Check if from: Form 4255 Form 8611 Form 8 Other (attach statement)	697	Form 8866	3			
4	Total tax. Add lines 2 and 3 (see instructions).						
	section 1294. Enter tax amount here	▶_		4			0.
5	Current net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), lin	ne 4					0.
6a	Payments: A 2020 overpayment credited to 2021	6a	a				
b	2021 estimated tax payments. Check if section 643(g) election applies	6k	b				
с	Tax deposited with Form 8868	60	c				
d	Foreign organizations: Tax paid or withheld at source (see instructions)		d				
е	Backup withholding (see instructions)		e				
f	Credit for small employer health insurance premiums (attach Form 8941)		f				
g	Other credits, adjustments, and payments: Form 2439 Total		a				
7	Total payments. Add lines 6a through 6g			7			
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached			8			
9	<b>Tax due.</b> If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed						
10	<b>Overpayment.</b> If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpa			10			
11	Enter the amount of line 10 you want: Credited to 2022 estimated tax		Refunded				
Part		ion (					
1	At any time during the 2021 calendar year, did the organization have an interest in or	a sia	nature or other autho	ritv	Y	es	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the	-		-			
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the	-	•				
	here		ie er the lefting i eeu.	)			Х
2	During the tax year, did the organization receive a distribution from, or was it the gran	tor of	f, or transferor to, a				
-	foreign trust?						Х
	If "Yes," see instructions for other forms the organization may have to file.						
3	Enter the amount of tax-exempt interest received or accrued during the tax year		▶ \$				
4	Enter available pre-2018 NOL carryovers here \$ 677,313. Do not in			carrvove			
-	shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by a		• •	-			
5	Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NO						
-	the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for						
	Business Activity Code		vailable post-2017 NC		er		
	453000 \$	,		184,			
	\$			,			
	Did the eventiation change its method of econymting? (acc instructions)						х
b	If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-P		r Form 1128? If "No "				
5		, , 01	1011120:11 110,				
	explain in Part V				<u></u>		

## Part V Supplemental Information

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

Sign	Under penalties of perjore I deplate that many excorrect, and complete. Deplate tion of probarer of	mined his return, including accompanying neuthar taxpayer) is based on all information	schedules and statements, and t of which preparer has any know	o the best of my know ledge.	ledge and belief, it is true,
Here	Signature of oincer		XECUTIVE DIR	ECTOR the	y the IRS discuss this return with preparer shown below (see tructions)? X Yes No
	Print/Type preparer's name	Preparer's signature	Date	Check if	PTIN
Paid				self- employed	
Preparer					P01366109
Use Only		Firm's name ► BUCHBINDER TUNICK & CO. LLP			13-1578842
	ONE PENI	N PLAZA - SUITE 3	200		
	Firm's address 🕨 NEW YORI	K, NY 10119-0002		Phone no. 23	12-695-5003
					- 000 T

(Rev. January 2022)

### Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

Filo a	sonarato	application	for	oach	roturn

Go to www.irs.gov/Form8868 for the latest information.

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or					Taxpayer identification number (TIN)		
print	FDNY FOUNDATION, INC.					632404	
File by the due date for filing your 9 METROTECH CENTER							
City, town or post office, state, and ZIP code. For a foreign address, see instructions. BROOKLYN, NY 11201							
Enter the	Return Code for the return that this application is for (fil	e a separa	ate application for each return)				
Application Return Application					Return		
Is For		Code	Is For			Code	
Form 990	or Form 990-EZ	01	Form 1041-A			08	
Form 472	0 (individual)	03	Form 4720 (other than individual)			09	
Form 990	PF	04	Form 5227			10	
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990	-T (trust other than above)	06	Form 8870			12	
Form 990	-T (corporation) JEAN O'SHEA	07					
<ul> <li>If this is box ▶ [</li> <li>1 I reative</li> <li>1 ► [</li> </ul>	organization does not have an office or place of business is for a Group Return, enter the organization's four digit If it is for part of the group, check this box ▶ quest an automatic 6-month extension of time until organization named above. The extension is for the org calendar year or tax year beginning JUL 1, 2021 the tax year entered in line 1 is for less than 12 months, c Change in accounting period	Group Exe and atta MA` anization's	emption Number (GEN) I         uch a list with the names and TINs of         Y 15, 2023, to file         s return for:         d ending	f this is fo all memb	r the whole pers the ext npt organiz	e group, check this	
<u>any</u> b If th <u>esti</u>	nis application is for Forms 990-PF, 990-T, 4720, or 6069 r nonrefundable credits. See instructions. nis application is for Forms 990-PF, 990-T, 4720, or 6069 imated tax payments made. Include any prior year overp ance due. Subtract line 3b from line 3a. Include your pa	), enter an payment a	y refundable credits and llowed as a credit.	3a 3b	\$	0.	
usir	ng EFTPS (Electronic Federal Tax Payment System). See	e instructio	ons.	3c	\$	0.	
Caution: instructio	If you are going to make an electronic funds withdrawal ns.	(direct de	bit) with this Form 8868, see Form 8	453-TE ar	nd Form 88	379-TE for payment	

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)

#### 11-2632404

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FORM 990-T	PRE-2018	NET OPERATING	LOSS DEDUCTION	STATEMENT 2
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/06	31,899.	0.	31,899.	31,899.
06/30/07	28,158.	0.	28,158.	28,158.
06/30/08	18,497.	0.	18,497.	18,497.
06/30/09	58,161.	0.	58,161.	58,161.
06/30/10	24,861.	0.	24,861.	24,861.
06/30/11	1,866.	0.	1,866.	1,866.
06/30/12	32,327.	0.	32,327.	32,327.
06/30/13	39,205.	0.	39,205.	39,205.
06/30/14	33,019.	0.	33,019.	33,019.
06/30/15	371,241.	0.	371,241.	371,241.
06/30/16	15,345.	0.	15,345.	15,345.
06/30/17	20,305.	0.	20,305.	20,305.
06/30/18	2,429.	0.	2,429.	2,429.
NOL CARRYOV	ER AVAILABLE THIS Y	EAR	677,313.	677,313.

SCHE	DULE	Α
(Form	990-T	)

Department of the Treasury

Internal Revenue Service

# **Unrelated Business Taxable Income** From an Unrelated Trade or Business

► Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

1

Open to Public Inspection for
501(c)(3) Organizations Only

Α	Name of the or	ganization
	FDNY	FOUNDATION,

453000 C Unrelated business activity code (see instructions)

INC.

E	Describe the unrelated trade or business MERCHANDISE	SALI	ES		
Pa			(A) Income	(B) Expenses	(C) Net
	Gross receipts or sales 346,136.		246 126		
b	Less returns and allowances c Balance ►	1c	346,136.		
2	Cost of goods sold (Part III, line 8)	2	143,555.		
3	Gross profit. Subtract line 2 from line 1c	3	202,581.		202,581.
4 a	Capital gain net income (attach Sch D (Form 1041 or Form				
	1120)). See instructions	4a			
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b			
с	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5			
6	Rent income (Part IV)	6			
7	Unrelated debt-financed income (Part V)	7			
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Part VI)	8			
9	Investment income of section 501(c)(7), (9), or (17)				
	organizations (Part VII)	9			
10	Exploited exempt activity income (Part VIII)	10			
11	Advertising income (Part IX)	11			
12	Other income (see instructions; attach statement)	12			
13	Total. Combine lines 3 through 12	13	202,581.		202,581.
Da	+ II Deductions Not Taken Floowhore See instruction	ono fo	r limitationa an dad	uctional Doduction	a must ba

Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

1	Compensation of officers, directors, and trustees (Part X)	1	
2	Salaries and wages		59,986.
3	Repairs and maintenance		30,866.
4	Bad debts		
5	Interest (attach statement). See instructions		
6	Taxes and licenses		
7	Depreciation (attach Form 4562). See instructions 7		
8	Less depreciation claimed in Part III and elsewhere on return 8a	8b	
9	Depletion	9	
10	Contributions to deferred compensation plans		
11	Employee benefit programs		
12	Excess exempt expenses (Part VIII)		
13	Excess readership costs (Part IX)	13	
14	Other deductions (attach statement) SEE STATEMENT 2	14	139,047.
15	Total deductions. Add lines 1 through 14	15	229,899.
16	Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13,		
	column (C)	16	-27,318.
17	Deduction for net operating loss. See instructions		0.
18	Unrelated business taxable income. Subtract line 17 from line 16		-27,318.
LHA	For Paperwork Reduction Act Notice, see instructions.	Schedu	le A (Form 990-T) 2021

1

ly B Employer identification number 11-2632404

of

1

D Sequence:

1

Part I	le A (Form 990-T) 2021 II Cost of Goods Sold Enter	mothod of inventory vely stic			Page 2
		r method of inventory valuation		1	224,341.
	Inventory at beginning of year Purchases				206,138.
	Cost of labor			······	0.
	Additional section 263A costs (attach statement)				0.
	Other costs (attach statement)				0.
	Total. Add lines 1 through 5				430,479.
					286,924.
	Cost of goods sold. Subtract line 7 from line 6. E				143,555.
	Do the rules of section 263A (with respect to prop				Yes X No
Part l'	V Rent Income (From Real Property	and Personal Proper	ty Leased with R	eal Property)	
1	Description of property (property street address,	city, state, ZIP code). Check	if a dual-use. See instr	uctions.	
	A [				
	в 🔄				
	c				
	D []		_	- 1	
		Α	В	C	D
	Rent received or accrued				
	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
3	Total rents received or accrued. Add line 2c colur	man A through D. Enter have	and an Dart L line 6 as		0.
		Ins A through D. Enter here a	and on Part 1, line 6, cc		
	Deductions directly connected with the income				
4	in lines 2(a) and 2(b) (attach statement)				
5	Total deductions. Add line 4 columns A through	D Enter here and on Part I li	ne 6. column (B)	•	0.
Part V					
	Description of debt-financed property (street add	· · · · ·	heck if a dual-use. See	instructions.	
	B				
	c 🗌				
	D				
		A	В	С	D
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
с	Total deductions (add lines 3a and 3b,				
	columns A through D)				
	Amount of average acquisition debt on or allocab				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
	Divide line 4 by line 5		%	%	%
	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A throu	gh D). Enter here and on Part	I, line 7, column (A)		0.
	Allocable deductions. Multiply line 3c by line 6				
	Total allocable deductions. Add line 9, columns				0.
11	Total dividends-received deductions included in	n line 10			0.

	ule A (Form 990-T) 2021 VI Interest, Annu		ovaltion and P	onto fro	m Contro		rappizatio	DC (-		tion c)		Page <b>3</b>
Fart	VI Interest, Annu	iiies, n	byanies, and n				Exempt Contro					
	1. Name of controlled organization		<b>2.</b> Employer identification number	incon	3. Net unrelated income (loss) (see instructions)		4. Total of specified payments made				e connected with	
(1)									9.000			
(2)												
(3)												
(4)												
				1	Controlled O	-	1					
7	. Taxable Income	ir	Net unrelated Icome (loss) e instructions)		otal of specif yments mac		<b>10.</b> Part that is inc controlling gross	luded	in the zation's		conne	ctions directly ected with in column 10
(1)												
(2)												
(3)												
(4)												
							Add colun Enter here line 8, c	and or	n Part I,	Ente	er here	mns 6 and 11. e and on Part I, column (B)
Totals						►			0.			0.
Part	VII Investment	Income	of a Section 50	)1(c)(7),	<u>(</u> 9), or (17	) Orga	nization (s	ee inst	ructions)			
	<b>1.</b> Desc	cription of	income		2. Amou incor		<b>3.</b> Deduction directly conn (attach state	ected	<b>4.</b> Set (attach s	-asides tatemei	nt) a	Total deductions and set-asides idd cols 3 and 4)
(1)												
(2)												
(3)												
(4)					Add amo	unts in						Add amounts in
Totals				Þ	column 2 here and o line 9, colu	n Part I,					he	column 5. Enter ere and on Part I, ne 9, column (B) 0 •
Part	VIII Exploited E	xempt /	Activity Income	. Other	Than Adv	ertisir	ng Income	(see in:	structions	)		
1	Description of exploite									Í		
2	Gross unrelated busin	ess incom	e from trade or busi	iness. Ente	er here and o	on Part I	, line 10, colun	nn (A)		2		
3	Expenses directly con											
										3		
4	Net income (loss) from											
	lines 5 through 7									4		
5	Gross income from ac	tivity that	is not unrelated bus	iness inco	me					5		
6	Expenses attributable									6		
7	Excess exempt expen											
	4. Enter here and on F	Part II, line	12							7		

Schedule A (Form 990-T) 2021

1

Sched Part	ule A (Form 990-T) 2021				Page 4
1	Name(s) of periodical(s). Check box if reporting	g two or more periodicals	on a consolidated bas	SiS.	
	A [				
	В				
	c				
	D				
Enter a	amounts for each periodical listed above in the c	orresponding column.			
	·	A	В	С	D
2	Gross advertising income				
-	Add columns A through D. Enter here and on F				0.
-	Add coldmins A through D. Enter here and on r				
a	Dise standardining and the second direct	<b></b>		1	
3	Direct advertising costs by periodical				
а	Add columns A through D. Enter here and on F	Part I, line 11, column (B)		▶	0.
4	Advertising gain (loss). Subtract line 3 from line	e			
	2. For any column in line 4 showing a gain,				
	complete lines 5 through 8. For any column in				
	line 4 showing a loss or zero, do not complete				
	lines 5 through 7, and enter zero on line 8				
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than				
	line 5, subtract line 6 from line 5. If line 5 is less	s			
	than line 6, enter zero				
8	Excess readership costs allowed as a				
U	deduction. For each column showing a gain or				
	line 4, enter the lesser of line 4 or line 7				
_					
а	Add line 8, columns A through D. Enter the gre				0.
Part	Part II, line 13           X         Compensation of Officers, Dire	actore and Truetoe	C (and instructions)		<u></u>
Fait				2 Deveortere	1 Componentian
		0 TH		3. Percentage	4. Compensation
	1. Name	<b>2.</b> Tit	Ie	of time devoted	attributable to
				to business	unrelated business
<u>(1)</u>				%	
(2)				%	
(3)				%	
(4)				%	
				►	0.
Part	XI Supplemental Information (see	instructions)			

1

FORM 990-T (A)	OTHER DEDUCTIONS	STATEMENT 2
DESCRIPTION		AMOUNT
ADVERTISING AND PROMOTION OFFICE EXPENSE TEMP HELP PROFESSIONAL FEES EQUIPMENT RENTAL DONATED EDUCATIONAL MATERIALS		33,721. 75,383. 29,425. 247. 132. 139.
TOTAL TO SCHEDULE A, PART II, L	INE 14	139,047.

990-T SCH A	POST-2017	NET OPERATING	LOSS DEDUCTION	STATEMENT 3
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/19 06/30/20 06/30/21	54,670. 14,888. 115,223.	0. 0. 0.	54,670. 14,888. 115,223.	54,670. 14,888. 115,223.
NOL CARRYOV	ER AVAILABLE THIS Y	EAR	184,781.	184,781.

# 2021 TAX RETURN FILING INSTRUCTIONS

NEW YORK FORM CT-13

## FOR THE YEAR ENDING

JUNE 30, 2022

Prepared for									
	FDNY FOUNDATION, INC.								
	9 METROTECH CENTER								
	BROOKLYN, NY 11201								
Prepared by									
	BUCHBINDER TUNICK & CO. LLP								
	ONE PENN PLAZA - SUITE 3200								
	NEW YORK, NY 10119-0002								
To be signed and dated by	NOT APPLICABLE								
Amount of tax	Total tax \$ 250.00								
	Less: payments and credits \$ 0.00								
	Plus: other amount \$ 0.00 Plus: interest and penalties \$ 0.00								
	Plus: interest and penalties \$ 0.00 BALANCE DUE \$ 250.00								
Overpayment	Credited to your estimated tax \$ 0.00								
	Other amount \$ 0.00								
	Refunded to you         \$								
Make check payable to	NEW YORK STATE CORPORATION TAX								
Mail tax return and check (if applicable) to	THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE NYSDTF, PLEASE SIGN, DATE AND RETURN FORM TR-579-CT TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE NYSDTF. DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE NYSDTF.								
Return must be mailed on or before	NOT APPLICABLE								
Special Instructions	YOUR PAYMENT SHOULD BE MADE AS INSTRUCTED BELOW ON OR BEFORE MAY 15, 2023.								
	SEPARATELY MAIL NEW YORK FORM CT-200-V WITH A CHECK OR MONEY ORDER FOR \$250.00, PAYABLE TO NEW YORK STATE CORPORATION TAX.								
	MAIL TO: NYS DEPT OF TAXATION & FINANCE CORP-V P.O. BOX 15163 ALBANY, NY 12212-5163								





Department of Taxation and Finance

**Corporation Tax Return Summary** 

. .

1 Legal name of corporation

	1.     FDNY FOUNDATION, INC.     Payment	2.	250.00
3	Return type		3. CT13
4	Employer ID number (EIN)		4. 11 2632404
5	File number (FCC)		5. MM8
6	Period beginning date (mm-dd-yy)		6. 07·01·21
7	Period ending date (mm-dd-yy)		7. 06-30-22
8	Amended (Y=1; N=0)		<u>8.</u> 0
9	Final (Y=1; N=0)		9.
10	NAICS code		10.
11	MTA indicator (None = 0; $Y = 1$ ; $N = 2$ ; Both = 3)		11.
12	Federal 1120-H filed ( $Y = 1; N = 0$ )		12.
13	REIT/RIC indicator ( $Y = 1$ ; $N = 0$ )		
14	Tax due/MTA surcharge	14.	250.00
15	Mandatory first installment (MFI) - no extension filed and tax due is over \$1,000	15.	
16	Balance due	16.	250.00
17	Amount of overpayment credited to next period - NYS	17.	
18	Refund of overpayment	18.	
19	Refund of unused tax credits	19.	
20	Tax credits to be credited as an overpayment to next year's return	20.	
21	Amount of overpayment credited to next period - MTA	21.	
22	Amount of MTA surcharge retaliatory tax credit to be refunded	22.	
23	Fixed dollar minimum	23.	
24	Designated agent's (Article 9-A) or combined parent's (Article 33) EIN 24.		
25	New York receipts	25.	
26	Have you been convicted of an offense (NYS Penal Law, Art. 200 or 496, or section 195.20)?		26.
27	Paid preparer's EIN		27. 13 1578842
28	Preparer's NYTPRIN		28.
29	Excl. code		29. 03



For office use only

# FDNY FOUNDATION, INC.

Page 2 of 2 CT-2 (2021)

### Form CT-186-E filers only

30	Excise tax on telecommunication services - NYS	30.
31	Excise tax on mobile telecommunication services subject to the 2.9% rate	31.
32	Total excise tax on telecommunication services	32.
33	Tax on gross income - NYS	33.
34	MTA surcharge related to non-mobile telecommunication services	34.
35	MTA surcharge related to telecommunication services subject to the 0.721% tax rate	35.
36	Total MTA surcharge related to telecommunication services	36.
37	MTA surcharge on gross income	37.
38	Balance due - NYS	38.
39	Balance due - MTA	39.
40	Provided telecommunication services in the MCTD this year? (None = 0; $Y = 1$ ; $N = 2$ ; Both = 3)	40.
40 41	Provided telecommunication services in the MCTD this year? (None = 0; $Y = 1$ ; $N = 2$ ; Both = 3) Subject to supervision of the Department of Public Service and provided utility services in the MCTD this year? (Non	
41	Subject to supervision of the Department of Public Service and provided utility services in the MCTD this year? (Non	he = 0; Y = 1; N = 2; Both = 3) 41.
41 42	Subject to supervision of the Department of Public Service and provided utility services in the MCTD this year? (Non Overpayment credited to next year's tax - NYS	e = 0; Y = 1; N = 2; Both = 3) 41.
41 42 43	Subject to supervision of the Department of Public Service and provided utility services in the MCTD this year? (Non Overpayment credited to next year's tax - NYS Overpayment credited to next year's tax - MTA	ae = 0; Y = 1; N = 2; Both = 3)       41.         42.
41 42 43 44	Subject to supervision of the Department of Public Service and provided utility services in the MCTD this year? (Non Overpayment credited to next year's tax - NYS Overpayment credited to next year's tax - MTA Refund of overpayment - NYS	ae = 0; Y = 1; N = 2; Both = 3)       41.         42.
41 42 43 44 45	Subject to supervision of the Department of Public Service and provided utility services in the MCTD this year? (Non Overpayment credited to next year's tax - NYS Overpayment credited to next year's tax - MTA Refund of overpayment - NYS Refund of overpayment - MTA	ae = 0; Y = 1; N = 2; Both = 3)       41.         42.
41 42 43 44 45 46	Subject to supervision of the Department of Public Service and provided utility services in the MCTD this year? (Non Overpayment credited to next year's tax - NYS Overpayment credited to next year's tax - MTA Refund of overpayment - NYS Refund of overpayment - MTA Refund of unused tax credits - NYS	ae = 0; Y = 1; N = 2; Both = 3)       41.         42.





NEW YORK STATE

# Department of Taxation and Finance Payment Voucher for E-Filed Corporation Tax Returns and Extensions

Employer identification number	Primary return type	Tax period beginning (mm-dd-	yyyy) Tax period ending (mm-dd-yyyy)	Type of form e-filed (mark correct box; see instructions)			
11-2632404	CT13	07-01-2021		Return X			
Legal name of corporation FDNY FOUNDATION, INC Mailing name (if different from legal name)	•			Extension			
c/o				installment (MFI)			
Number and street or PO Box 9 METROTECH CENTER				Amount(s) due NYS amount			
City	State		Business telephone number	250.00			
BROOKLYN	NY	11201	718-999-0779	MTA amount • 0 0			
COPY							
Make your check or money order payable or clip your check or money order. Detac		w York State Corporatio	on Tax. Do not staple	250.00			
		E	nter payment enclosed				

### File this entire page with your payment

Where to mail

Mail your payment along with this **entire page** to: NYS DEPT OF TAXATION & FINANCE CORP - V PO BOX 15163 ALBANY NY 12212-5163





### Department of Taxation and Finance New York State E-File Authorization for Tax Year 2021

**T** 1 1 0

For Certain Corporation Tax Returns and Estimated Tax Payments for Corporations

Electronic return originator (ERO)/paid preparer: Do not mail this form to the Tax Department. Keep it for your records.

Legal name of	corporation FDI	NY FOUNDATI	LON, INC.				
Return type (ma	ark an $X$ for all tha	at apply): CT-3	CT-3-A	CT-3-M	CT-3-S	ст-13 Х	CT-33
CT-33-A	CT-33-C	CT-33-M	CT-33-NL	CT-183	CT-183-M	CT-184	CT-184-M
CT-186-E	CT-300	CT-400					

#### Purpose

Form TR-579-CT must be completed to authorize an ERO to e-file a corporation tax return and to transmit bank account information for the electronic funds withdrawal.

#### **General instructions**

Part A must be completed by an officer of the corporation who is authorized to sign the corporation's return before the ERO transmits the electronically filed Form CT-3, General Business Corporation Franchise Tax Return; CT-3-A, General Business Corporation Combined Franchise Tax Return; CT-3-M, General Business Corporation MTA Surcharge Return; CT-3-S, New York S Corporation Franchise Tax Return; CT-13, Unrelated Business Income Tax Return, CT-33, Life Insurance Corporation Franchise Tax Return; CT-33-A, Life Insurance Corporation Combined Franchise Tax Return; CT-33-C, Captive Insurance Company Franchise Tax Return; CT-33-M, Insurance Corporation MTA Surcharge Return; CT-33-NL, Non-Life Insurance Corporation Franchise Tax Return; CT-183, Transportation and Transmission Corporation Franchise Tax Return on Capital Stock, CT-183-M, Transportation and Transmission Corporation MTA Surcharge Return; CT-184, Transportation and Transmission Corporation Franchise Tax Return on Gross Earnings; CT-184-M, Transportation and Transmission Corporation MTA Surcharge Return, CT 186-E, Telecommunications Tax Return and Utility Services Tax Return, CT-300, Mandatory First Installment (MFI) of Estimated Tax for Corporations; or CT-400, Estimated Tax for Corporations.

EROs/paid preparers must complete Part B prior to transmitting electronically filed corporation tax returns. Both the paid preparer and the ERO are required to sign Part B. However, if an individual performs as both the paid preparer and the ERO, he or she is only required to sign as the paid preparer. It is not necessary to include the ERO signature in this case. Note that an electronic signature can be used as described in TSB-M-20(1)C, (2)I, *E-File Authorizations (TR-579 forms) for Taxpayers Using a Paid Preparer for Electronically Filed Tax Returns.* Go to our website at *www.tax.ny.gov* to find this document.

**Do not mail this form to the Tax Department.** EROs/paid preparers must keep this form for three years and present it to the Tax Department upon request.

Do **not** use this form for electronically filed Form CT-5, Request for Six-Month Extension to File (for franchise/business taxes, MTA surcharge, or both); CT-5.3, Request for Six-Month Extension to File (for combined franchise tax return, or combined MTA surcharge return, or both); CT-5.4, Request for Six-Month Extension to File New York S Corporation Franchise Tax Return; CT-5.6, Request for Three-Month Extension to File Form CT-186 (for utility corporation franchise tax return, MTA surcharge return, or both); CT-5.9, Request for Three-Month Extension to File (for certain Article 9 tax returns, MTA surcharge, or both); or CT-5.9-E, Request for Three-Month Extension to File Form CT-186-E (for telecommunications tax return and utility services tax return) Instead use Form TR-579.1-CT, New York State Authorization for Electronic Funds Withdrawal For Tax Year 2021 Corporation Tax Extensions.

Financial institution information (required if electronic payment is authorized)

1 Amount of authorized debit	1	
2 Financial institution routing number	2	
3 Financial institution account number	3	

# Part A - Declaration of authorized corporate officer for Form CT-3, CT-3-A, CT-3-M, CT-3-S, CT-13, CT-33, CT-33-A, CT-33-C, CT-33-M, CT-33-NL, CT-183, CT-183-M, CT-184, CT-184-M, CT-186-E, CT-300, or CT-400

Under penalty of perjury, I declare that I have examined the information on this 2021 New York State electronic corporate tax return, including any accompanying schedules, attachments, and statements, and certify that this electronic return is true, correct, and complete. If this filing includes Form DTF-686, *Tax Shelter Reportable Transactions*, as an authorized officer of the corporation, I hereby consent to the waiver of the secrecy provisions of Tax Law sections 202, 211.8, 1467, and 1518 as such provisions relate to the disclosure requirements of Tax Law section 25. The ERO has my consent to send this 2021 New York State electronic corporate return to New York State through the Internal Revenue Service (IRS). I understand that by executing this Form TR-579-CT, I am authorizing the ERO to sign and file this return on behalf of the corporation and agree that the ERO's submission of the corporation's return to the IRS, together with this authorization, will serve as the electronic signature for the return and any authorized payment transaction. If I am paying New York State corporation taxes due by electronic funds withdrawal, I authorize the New York State Tax Department and its designated financial institution to withdraw the amount from the account. As New York does not support International ACH Transactions (IAT), I attest the source for these funds is within the United States. I understand and agree that I may revoke this authorization for payment only by contacting the Tax Department no later than two business days prior to the payment date.

Signature of authorized officer of the corpor	lion	Print vo JEA	or name and O'SHI	tite ∡,	EXECUTIVE	DIRECTOR	Date 05-05-23

#### Part B - Declaration of ERO and paid preparer

Under penalty of perjury, I declare that the information contained in this 2021 New York State electronic corporate tax return is the information furnished to me by the corporation. If the corporation furnished me a completed paper 2021 New York State corporate tax return signed by a paid preparer, I declare that the information contained in the corporation's 2021 New York State electronic corporate tax return is identical to that contained in the paper return. If I am the paid preparer, under penalty of perjury I declare that I have examined this 2021 New York State electronic corporate tax return, and, to the best of my knowledge and belief, the return is true, correct, and complete. I have based this declaration on all information available to me.

ERO's signature	Print name	Date
Paid preparer's signature	Print name	Date

NEW CT-13 YORK STATE 2021 Amended return	Department of Tax Unrelate Tax Ret Tax Law - A	ed Busir arn	All filers	ome enter tax per g 07-01-		ending	06-30-22
Employer identification number (EIN)	File number	Business telepho	ne number				If you claim an
11-2632404	MM8	718-99	9-0779				overpayment, mark an <b>X</b> in the box
Legal name of corporation		-	Trade n	ame/DBA			
FDNY FOUNDATION, INC.							
Mailing address			State or	r country of incorpo	ration		
Care of (c/o)							
Number and street or PO Box			Date of	incorporation	Fore	eign corporatio	ons: date began business in NYS
9 METROTECH CENTER			09	-11-81			
City U.S. state/Canadian	province ZIP/Postal cod	e Country (if	not United States)		For	office use only	у
BROOKLYN, NY 11201							
NAICS business code number (from federal return)	f you need to update	your address o	r phone inform	ation			
f	or corporation tax, or	other tax types	, you can do s	0			
Principal unrelated business activity (see instructions)		onlina Soo Rus	iness informati	ion in			

Form CT-247, Ap	plication for Exemption from Corporation Franchise Taxes by a Not-For-Profit			
Organization -	Have you filed this New York State application for exemption? (see instructions)	 Yes	No	Χ

Form CT-1.

online. See Business information in

Mark an X in this box if you are an employee trust as defined in Internal Revenue Code (IRC) section 401(a)					
Mark an X in this box if you ceased operating the unrelated business during the tax year covered by this return					
(see section Who must file Form CT-13 in the instructions)		•			
A. Pay amount shown on line 22. Make payable to: New York State Corporation Tax		Payment enclosed			
Attach your payment here. Detach all check stubs. (See instructions for details.)	Α	250.			

MERCHANDISE SALES

1	1 Federal unrelated business taxable income before net operating loss deduction and after \$1,000 specific deduction					-27,318.
	2 New York State Article 13 and Article 23 tax deducted on federal return				2	
	Additions required for shareholders of federal S corporations (see instructions)				3	
	Grossed-up taxes for shareholders of New York S corporations (see instructions)				4	
	Other additions (see instructions)				5	
	Add lines 1 through 5				6	-27,318.
7	Other income (see instructions)	7				
	Federal S corporation shareholder subtractions (see instructions)					
	Other subtractions (see instructions)					
	Total subtractions (add lines 7, 8, and 9)				10	
	11 Taxable income before net operating loss deduction (subtract line 10 from line 6)				11	-27,318.
12	New York net operating loss deduction (attach federal and NYS computations; see	instru	uctions)		12	
13	Taxable income (subtract line 12 from line 11)				13	-27,318.
	Allocated taxable income (multiply line 13 by% from line 42; or					
	from line 13 if allocation is not claimed)			•	14	-27,318.
15	Tax based on income (multiply line 14 by 9% (.09))				15	0.
	Minimum tax				16	250 • 00
17	Tax (line 15 or line 16, whichever is larger)				17	250.
	Total prepayments from line 46				18	
	Balance (if line 18 is less than line 17, subtract line 18 from line 17)				19	250.
20	Interest on late payment (see instructions)			•	20	
	Late filing and late payment penalties (see instructions)				21	
22	22 Balance due (add lines 19, 20, and 21 and enter here; enter the payment amount on line A above)			22	250.	
23	23 Overpayment (if line 17 is less than line 18, subtract line 17 from line 18)			23		
24	Amount of overpayment on line 23 to be credited to next year				24	
25	Amount of overpayment on line 23 to be refunded (subtract line 24 from line 23) $\dots$				25	

See page 3 for third-party designee, certification, and signature entry areas.



Have you been audited by the Internal Revenue Service in the past 5 years?	Yes	No X If Yes, list years:
Federal return was filed on: 990-T X Other:	_ □	Attach a complete copy of your federal return.
Cabadula A. Unvalated business allocation		

#### Schedule A - Unrelated business allocation

If you did not maintain a regular place of business outside New York State, leave this schedule blank. A regular place of business is any office, factory, warehouse, or other space regularly used by the taxpayer in its unrelated business. If you claim this allocation, attach a list of each place of business, the location, nature of activities, and number and duties of employees.

			A		В				
Ave	rage value of:		New York State		Everywh	ere			
26	Real estate owned (see instructions)	26							
27	Gross rents (attach list; see instructions)	27							
28	Inventories owned	28							
29	Other tangible personal property owned (see instructions)	29							
30	Total (add lines 26 through 29)	30							
31	Percentage in New York State (divide line 30, column A, by line	30, c	column B)				31		%
Rec	eipts in the regular course of business from:								
32	Sales of tangible personal property shipped to								
	points within New York State	32							
33	All sales of tangible personal property	33							
34	Services performed	34							
35		35							
36	Other business receipts	36							
37		37							
38	Percentage in New York State (divide line 37, column A, by line	37, c	column B)				38		%
39	Wages, salaries, and other compensation of employees								
	(except general executive officers; see instructions)	39							
40	Percentage in New York State (divide line 39, column A, by line	39, c	column B)				40		%
41	Total of New York State percentages (add lines 31, 38, and 40	)					41		%
42	Business allocation percentage (divide line 41 by three or by the	e nun	mber of percentages)				42		%
Con	nposition of prepayments claimed on line 18*				Date paid			Amount	
43	Payment with extension request, Form CT-5, line 5		43	3					
	Second installment from Form CT-400			3					
44b	Third installment from Form CT-400			<b>&gt;</b>					
44c	Fourth installment from Form CT-400			;					
	Amount of overpayment credited from prior years					45			
46	Total prepayments (add lines 43 through 45; enter here and on					46			
	* Taxpayers subject to the unrelated business income tax are If you did make these unrequired payments, report them on	not r lines	required to make estimate 44a, 44b, and 44c.	ed ta	x payments.				

#### Amended return information

If filing an amended return, mark an X in the box for any items that apply and attach documentation.

Final federal determination	If marked, enter date of determination:	•
Capital loss carryback	Federal return filed	Form 1139 •
Amended Form 990-T		



Third - part designee (see		(print)		Designee's phone number
instructions	b) Designee's email address			PIN
Certification	n: I certify that this return and any attachment	s are to the best of my knowledge ar	nd belief true, correct, and co	omplete.
Authorized	Printed name of authorized person JEAN O'SHEA	Signature of authorized person	Official title EXECUTIVE D	IRECTOR
person	Email address of authoriz d person JEAN.OSHEA@F.INY,NYC.G		$\begin{array}{c} \text{Telephone number} \\ 718-999-12 \end{array}$	Date 51 05-05-23
	Firm's name (or yours if self-employed) BUCHBINDER TUNICK & CO	. LLP	Firm's EIN 13-1578842	Preparer's PTIN or SSN P01366109
Paid preparer use only	Signature of individual preparing this return	Address ONE PENN PLAZA - NEW YORK, NY 1011	SUITE 3200	State ZIP code
(see instr.)	Email address of individual preparing this retu GAUTERI@BUCHBINDER.COM		arer's NYTPRIN or Excl. co	de Date

See instructions for where to file.

