CHAR500 Online

For new annual filings, and amendments

Annual Filing for Charitable Organizations

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

Filing Type:	New Filing Am	Amendment Filing Year: 2020		0	-	
General Informa	tion					
Current Organization Name: Open Sou		urce Matters, Inc	Updated Nam	e:	N/A	
NY Registration Numb	per: <u>40-39-53</u>		Registration Category: EIN: Updated Fiscal Year End:		DUAL	
Organization Type:	Corporation	1			760803008	
Current Fiscal Year En	nd: <u>12/31</u>				N/A	
Organization Email:	DANIELLE	PIPIACOHEN.COM Organization's		Phone:	347-425-9397	
Tax Exempt Status:	None		Website:		WWW.JOOMLA.ORG	
Organization Address	s					
Mailing A	Address	Principal Ac	cipal Address		NY State Address	
PO BOX 4668 # 88354 NEW YORK NY 10163-4668 UNITED STATES		PO BOX 4668 # 88354 NEW YORK NY 10163-4668 UNITED STATES		NA 		
Primary Contact Information						
First Name: danielle		Last Name: hlatk	у	Title: a	ccountant	
Phone: <u>347-425-9397</u>		Email: danielle@pipiacohen.com		<u></u>		
Third Party Preparer Information						
First Name: Danielle		Last Name: Hlatk	ху	Title: <u>a</u>	accountant	
Firm Name: pipia cohen hlatky llc		Phone: <u>3474259397</u> Er		Email: _	danielle@pipiacohen.com	
Third Party Address						
Street: 195 kosciuszko st						
City: Brooklyn State: NY						
Zip: 11216 Country: United States						

faculty, trustees and their families?

O Yes O No N/A

Re	egistration Category
1.	Does the organization conduct activity in New York State (other than soliciting)? This may include, but is not limited to, maintaining an office, having employees or running a program. O Yes No
2.	Does the organization have assets in New York State? O No
3.	Is the organization incorporated or formed in New York State? O Yes O No N/A
4.	Does the organization solicit or receive more than \$25,000 annually in total contributions from New York State residents, foundations, corporations, or government agencies? O Yes No
5.	Does the organization use a professional fundraiser or fundraising counsel?
	○Yes
Ва	sed on your responses to the above questions, this organization's registration category has been updated to EPTL
The	e updated registration category will go into effect when your filing has been processed.
	emption Qualifications
1.	Is the organization a government agency, controlled by a government agency, or the U.S. Congress or New York
	State Legislature? O Yes O No N/A
2.	Was the organization formed for religious purposes?
	O Yes O No N/A
3.	Is the organization a PTA affiliated with an educational institution subject to the jurisdiction of the New York State Education Department? $ \bigcirc \text{Yes} \bigcirc \text{No} \text{N/A} $
4.	Is the organization a library that files annual financial reports with the New York State Department of Education? O Yes O No N/A
5.	Does the organization receive substantially all of its contributions from a single government agency to which it submits annual financial reports? OYes ONo N/A
6.	Is the organization's gross contributions from all other New York sources \$25,000 or less and it will remain below that? OYes ONo N/A
7.	Does the organization receive funding from a federated fund, United Way, or incorporated community appeal? \bigcirc Yes \bigcirc No \bigcirc N/A
8.	Is the organization's gross contributions from all other sources \$25,000 or less and will remain below that?
	O Yes O No N/A
9.	Does the organization use or plan to use a professional fundraiser?
	OYes ONO N/A
10.	. Is the organization an educational institution or museum that files annual financial reports with the Board of Regents
	of the University of the State of New York or an agency with similar responsibilities in another state? OYes ONO N/A

11. If the organization is an educational institution, does it limit solicitation of contributions to the student body, alumni,

12. Is the organization incorporated/chartered under the New York State Education Law?
OYes ONo N/A
13. Is the organization a law enforcement support organization that only solicit contributions from its members?
OYes ONo N/A
14. Is organization a New York State volunteer firefighters or volunteer ambulance corps? OYes ONO N/A
15. Is the organization a hospital, skilled nursing facility, or diagnostic/treatment center?
Oyes Ono N/A
16. Is organization a veterans' organization, volunteer firefighters, volunteer ambulance corps, or an auxiliary of such
organization whose fundraising is performed only by its members without direct or indirect compensation? O_{Yes} O_{No} N/A
17. Is the organization a historical society chartered by the Board of Regents of the University of the State of New York that solicits contributions only from its memberships? O Yes O No N/A
18. Is the organization a historical society chartered by the Board of Regents of the University of the State of New York? OYes ONO N/A
19. Is the organization a membership organization? OYes ONO N/A
20. Is the organization a membership organization that solicits contributions only from its members? OYes ONo N/A
21. Is organization a cemetery corporation subject to Article 15 of the New York State Not-for-Profit Corporation Law? OYes ONo N/A
22. Is the organization incorporated under Article 43 of the New York State Insurance Law? OYes ONo N/A
23. Is the organization a police department, sheriff's department or other government law enforcement agency? OYes ONO N/A
Based on your responses to the exemption questions, this organization's registration category has been updated to
EPTL The updated registration category will go into effect when your filing has been processed.
Annual Exemptions
 Were the total contributions from New York State, including residents, foundations, government agencies, etc. under \$25,000 during the fiscal year? OYes ONO N/A
2. Did the organization use a professional fundraiser or fundraising counsel during the fiscal year? OYes ONO N/A
 Were the organization's gross receipts under \$25,000 and the market value of its assets under \$25,000 during the fiscal year? ○Yes ●No
Based on your responses to annual exemption questions, this organization is required to file under <u>EPTL</u> during this fiscal year.
Jissai year.

Type: N/A Registration ID: N/A

Contract Start: N/A Contract End: N/A

Phone : N/A

Amount Paid: N/A

Mailing Address: N/A

Financial Information			
Which IRS form does your organization use? IRS990		Organization's total reve	enue: <u>134,861</u>
Organization's total contributions:	0	Organization's total asse	ets: N/A
Organization's net assets: 387,734		Organization's total rev	enue <u>N/A</u>
Organization's total liabilities:	N/A	and contributions: Organization's total asso	ets/ N/A
Organization's total income:	N/A	worth:	<u></u>
Is the organization required to file fo	orm Schedule B - Sch	edule of contributors - with the	IRS?
For the current filing year, have your Closing Withdrawing Is this your final filing with New Yorl	□ Dissolving	☑ None	with its Charities Registration?
Filing Information			
Did the organization use a profession	nal fundraiser or fun	draising counsel to solicit contrib	outions in New York State?
○Yes			
General Informa	tion	Description of Services	Description of Compensation
Name of Firm: N/A		N/A	N/A
	Number: <u>N/A</u>		
	ract End: N/A		
Amount Paid: N/A	Phone : N/A	_	
Mailing Address: N/A			
			27 / 2
Name of Firm: N/A Type: N/A Registration ID: N/A		N/A	N/A
		_	
	act End: <u>N/A</u>		
	Phone : N/A	_	
Mailing Address: N/A			
Name of Firm: N/A		N/A	N/A

Did the organization receive government grants during this fiscal year?

Government Grant Agency	Grant Amount
N/A	N/A

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Attached	organization'	's required	documents:

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

Signatures

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

Role	First Name	Last Name	Email
President	ROBERT	DEUTZ	PRESIDENT@OPENSOURCEMATTERS.ORG
Treasurer	RADOSLAW	SUSKI	TREASURER@OPENSOURCEMATTERS.ORG

Signature of President



Date:

11/24/2021

Signature of Treasurer

— DocuSigned by:

Gubli
—B03DC76BB19B4F3.

Date:

11/29/2021