

CHAR500 Online For new annual filings, and amendments	Annual Filing for Charitable Organizations New York State Office of the Attorney General Charities Bureau - Registration Section 28 Liberty Street New York, NY 10005 charitiesnys.com	Open to Public Inspection
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Filing Type:	☒ New Filing	☐ Amendment	Filing Year: 2024
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General Information

Current Organization Name:	NEW YORK DISASTER INTERFAITH SERVICES, INC.	Updated Name:	N/A
NY Registration Number:	20-84-82	Registration Category:	DUAL
Organization Type:	Corporation	EIN:	010794539
Current Fiscal Year End:	12/31	Updated Fiscal Year End:	N/A
Organization Email:	office@nydis.org	Organization's Phone:	2126696100
Tax Exempt Status:	501(c)(3)	Website:	www.nydis.org

Organization Address

Mailing Address	Principal Address	NY State Address
4 WEST 43RD ST. STE 407 NEW YORK NY 10036 UNITED STATES	New York Disaster Interfaith Services, 4 West 43rd Street, Suite 407 New York NY 10036 United States	NA

Primary Contact Information

First Name:	Peter	Last Name:	Gudaitis	Title:	Executive Director and CEO
Phone:	2126696100	Email:	office@nydis.org		

Organization Type

Type of IRS document filed with IRS:	IRS990	Organization Type:	Public
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Third Party Preparer Information

First Name:	N/A	Last Name:	N/A	Title:	N/A
Firm Name:	N/A	Phone:	N/A	Email:	N/A

Third Party Address

Street:	N/A		
City:	N/A	State:	N/A
Zip:	N/A	Country:	N/A

Registration 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 staff, or running a program.
☒ Yes ☐ No
2. Does the organization have assets in New York State?
☒ Yes ☐ No
3. Is the organization incorporated or formed in New York State?
☒ Yes ☐ No
4. Has the organization received more than \$25,000 in total contributions from New York State residents, foundations, corporations or government agencies or other entities in the period covered by this filing?
☒ Yes ☐ No
5. Does the organization plan to receive more than \$25,000 annually in total contributions from New York State residents, foundations, corporations, government agencies or other entities?
☒ Yes ☐ No
6. Does the organization use a professional fundraiser or fundraising counsel?
☒ Yes ☐ No

Based on your responses to the above questions, this organization's registration category remains as DUAL

Contribution Information

1. Did the organization solicit or receive contributions during the fiscal year in New York State?
☒ Yes ☐ No
3. Choose the total contributions in New York State this fiscal year: \$10,000,000-\$50,000,00

Annual Exemptions

1. Were the total contributions from New York State, including residents, foundations, government agencies, etc. under \$25,000 during the fiscal year?
☐ Yes ☐ No N/A
2. Did the organization use a professional fundraiser or fundraising counsel during the fiscal year?
☐ Yes ☐ No N/A
3. Were the organization's gross receipts under \$25,000 and the market value of its assets under \$25,000 during the fiscal year?
☐ Yes ☒ No

Based on your responses to annual exemption questions, this organization is required to file under DUAL during this fiscal year.

Financial Information

Type of IRS document filed with IRS

IRS990

Organization's total revenue:

15,420,930

Organization's total contributions:

15,394,001

Organization's total assets:

N/A

Organization's net assets:

-232,203

Organization's total revenue and contributions:

N/A

Organization's total liabilities:

N/A

Organization's total assets/worth:

N/A

Organization's total income:

N/A

For this filing year, does your organization plan to complete any of the following with the New York State Charities Bureau?

☐Closing ☐Withdrawing ☐Dissolving ☒None

Is this your final filing with New York State? ☐Yes ☐No N/A

Filing Information

Did your organization use a professional fundraiser or fundraising counsel for fundraising activity in New York State?

☒Yes ☐No

General Information	Description of Services	Description of Compensation
Name of Firm: CLF Consulting Type: Fund Raiser Counsel Reg Number: Contract Start: 1/1/2024 Contract End: 12/31/2024 Amount Paid: \$35,259.00 Phone : 9175545599 Mailing Address: 86 Fleet Place Suite 12S Brooklyn NY-11201 United States	Grant Writing for a New York City Department of Health & Mental Hygiene Proposal to funded a Clubhouse International Adult Clubhouse House providing community and support services to adults with SMI (	\$35,259 for the proposal. Researching, developing, and preparing compelling grant proposals for this programs, its operations, and strategic goals. Aligning proposal with NYDIS’s mission, objectives,
Name of Firm: Bannon Consulting Type: Fund Raiser Counsel Registration ID: Contract Start: 03/01/2024 Contract End: 11/30/2024 Amount Paid: \$20,000.00 Phone : 9178418752 Mailing Address: 446 West 33 Street 6th Floord New York NY-10001 United States	Grant Writing for a Two EPA Proposals for Climate Justice Initiatives in New York City & Puerto Rico Researching, developing, and preparing compelling grant proposals for this programs, its operation	\$20,000 flat for the proposal. Researching, developing, and preparing compelling grant proposals for this programs, its operations, and strategic goals. Aligning proposal with NYDIS’s mission, objecti
Name of Firm: N/A Type: N/A Registration ID: N/A Contract Start: N/A Contract End: N/A Amount Paid: N/A Phone : N/A Mailing Address: N/A	N/A	N/A

Did the organization receive government grants during this fiscal year?

☒ Yes ☐ No

Government Grant Agency	Grant Amount
NYC Housing Preservation & Development	\$13,808,202.00
NYC Department of Health & Mental Hygiene	\$660,994.00
NYS Division of Homeland Security & Emergency Serv	\$20,262.00
FEMA ESFP via United Way WW	\$113,261.00
N/A	N/A

Documents

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
- ☐ Other documents

Signatures

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

Role	First Name	Last Name	Email
Executive Director	Peter	Gudaitis	pgudaitis@nydis.org
Other	Araif	Yusuff	ayusuff@irusa.org

Signature of Executive Director

Signed by:

Peter B. Gudaitis

26604D6ED606401...

Date:

10/21/2025

Signature of Other

DocuSigned by:

Araif Yusuff

820C3302E508422

Date:

10/20/2025