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 F	Filing OAme	ndment	Filing Year:	2022	_
General Information					
Current Organization Name			Updated Name:		N/A
NY Registration Number:	44-95-99		Registration Category: EIN:		DUAL
Organization Type:	Corporation				471841978
Current Fiscal Year End:	12/31		Updated F	iscal Year End:	06/30
Organization Email:	welovearts@	iosephavearts.org	Organizat	ion's Phone:	585-454-2787
Tax Exempt Status:	501(c)(3)		Website:		www.josephavearts.org
Organization Address					
Mailing Addre	ess ess	Principal A	ddress		NY State Address
P.O. Box 30147 Rochester NY 14603 UNITED STATES		P.O. Box 30147 Rochester NY 14603 UNITED STATES	}	NA 	
Primary Contact Informati	ion			·	
First Name: Neil	\ 7	— Last Name: Sch		Title: -	
Phone: <u>585-454-278</u>	37	— Email: <u>wel</u>	ovearts@jose	ephavearts.org)
Organization Type Type of IRS document filed	I with IRS: IR	. <u>\$990</u> Orga	ınization Type	e: Public	
Third Party Preparer	Information	1			
First Name: Stephanie		Last Name: Ann	ıunziata	Title:	Partner
Firm Name: Heveron & Co	mpany CPAs, PL	LC Phone: <u>585</u>	-232-2956	Email:	stephanie@heveroncpa.com
Third Party Address Street: 260 Plymouth Av	venue South				
City: Rochester		State	: NY		
Zip: 14608			: United Sta	ıtes	

R	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 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 • O 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?
6.	Does the organization use a professional fundraiser or fundraising counsel? • Yes O No
Ва	sed on your responses to the above questions, this organization's registration category remains as DUAL
C	ontribution Information
1.	Did the organization solicit or receive contributions during the fiscal year in New York State? • Yes • O No
3.	Choose the total contributions in New York State this fiscal year: \$250,000-\$749,000
A	nnual Exemptions
1.	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? \bigcirc Yes \bigcirc 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
	sed on your responses to annual exemption questions, this organization is required to file under <u>DUAL</u> during this

Financial Information			
Type of IRS document filed with IRS	IRS990	Organization's total revenue:	476,835
Organization's total contributions:	472,711	Organization's total assets:	N/A
Organization's net assets:	615,012	Organization's total revenue	N/A
Organization's total liabilities:	N/A	and contributions: Organization's total assets/	N/A
Organization's total income:	N/A	worth:	
For this filing year, does your organi	zation plan to complete an	y of the following with the New	York State Charities Bureau
□Closing □ Withdrawing	☐ Dissolving ☑ No	ne	
Is this your final filing with New Yor	k State? OYes OI	No N/A	

Filing Information

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

●Yes ONo

General Information	Description of Services	Description of Compensation
Name of Firm: Empreinte Consulting LLC Type: Professional Fund Raiser Reg Number: Contract Start: 5/1/2023 Contract End: 10/31/2023 Amount Paid: \$5,000.00 Phone: 585-551-1234 Mailing Address: 1 Grove Street null Pittsford NY-14534 United States	Conduct a thorough assessment of JAACA's current Development activity. Provide strategic guidance relating to the development of a sustainable fundraising plan. Implement process improvements relating	For the period May - October 2023 at a cost of \$5,000/month with an option to extend the relationship at the end of this contract. During the time of this contract, hours of service will be provided r
Name of Firm: N/A Type: N/A Contract Start: N/A Amount Paid: N/A Mailing Address: N/A N/A Registration ID: N/A Contract End: N/A Phone: N/A	N/A	N/A
Name of Firm: N/A Type: N/A Contract Start: N/A Amount Paid: N/A Mailing Address: N/A N/A Registration ID: N/A Contract End: N/A Phone: N/A	N/A	N/A

Did the organization receive government grants during this fiscal year?

Yes O No

Government Grant Agency	Grant Amount
New York State Council on the Arts	\$49,500.00
Monroe County Treasurer	\$18,300.00
N/A	N/A
N/A	N/A
N/A	N/A

Documents

Attached	organization'	c required	documents.
Allaciicu	Organization	s required	uocuments.

- ☑ 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	
President	Neil	Scheier	welovearts@josephavearts.org	
Treasurer	Alan	Feldstein	afeldstein@boylancode.com	
Signature of President	DocuSigned by: Nil Scheir E7867ERDOOE8488 DocuSigned by:		Date:	4/8/2024

Signature of Treasurer

Man Fuldstein

Date:

4/8/2024