

**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**

Filing Type:

 New Filing AmendmentFiling Year: 2022**General Information**

Current Organization Name:	<u>Long Island Alzheimer's and Dementia Center, Inc.</u>	Updated Name:	<u>N/A</u>
NY Registration Number:	<u>04-50-50</u>	Registration Category:	<u>DUAL</u>
Organization Type:	<u>Corporation</u>	EIN:	<u>112926958</u>
Current Fiscal Year End:	<u>07/31</u>	Updated Fiscal Year End:	<u>12/31</u>
Organization Email:	<u>tcohen@lidementia.org</u>	Organization's Phone:	<u>5167676856</u>
Tax Exempt Status:	<u>501(c)(3)</u>	Website:	<u>www.lidementia.org</u>

Organization Address

Mailing Address	Principal Address	NY State Address
1025 Old Country Road Westbury NY 11590 UNITED STATES	1025 Old Country Road Westbury NY 11590 UNITED STATES	NA

Primary Contact Information

First Name: Ellen Last Name: Contarino Title: Director of Finance and Operations
 Phone: 5167676856 Email: econtarino@lidementia.org

Organization Type

Type of IRS document filed with IRS: IRS990 Organization Type: Public

Third Party Preparer Information

First Name: Ernie Last Name: Smith Title: Managing Partner
 Firm Name: Nawrocki Smith LLP Phone: 6317569500 Email: jcastles@ns.cpa

Third Party Address

Street: 100 Motor Parkway, Suite 580
 City: Hauppauge State: NY
 Zip: 11788 Country: United States

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. Does the organization solicit, or plan to solicit, or receive \$25,000 or more annually in total contributions from New York State residents, foundations, corporations, or government agencies, etc.?
 Yes No
5. 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

Public Charity

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: \$1,000,000-\$4,999,999

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: 1,780,117

Organization's total contributions: 1,388,965 Organization's total assets: N/A

Organization's net assets: 1,593,991 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: <u>N/A</u> Type: <u>N/A</u> Reg Number: <u>N/A</u> Contract Start: <u>N/A</u> Contract End: <u>N/A</u> Amount Paid: <u>N/A</u> Phone : <u>N/A</u> Mailing Address: <u>N/A</u>	<u>N/A</u>	<u>N/A</u>
Name of Firm: <u>N/A</u> Type: <u>N/A</u> Registration ID: <u>N/A</u> Contract Start: <u>N/A</u> Contract End: <u>N/A</u> Amount Paid: <u>N/A</u> Phone : <u>N/A</u> Mailing Address: <u>N/A</u>	<u>N/A</u>	<u>N/A</u>
Name of Firm: <u>N/A</u> Type: <u>N/A</u> Registration ID: <u>N/A</u> Contract Start: <u>N/A</u> Contract End: <u>N/A</u> Amount Paid: <u>N/A</u> Phone : <u>N/A</u> Mailing Address: <u>N/A</u>	<u>N/A</u>	<u>N/A</u>

Did the organization receive government grants during this fiscal year?

Yes No

Government Grant Agency	Grant Amount
New York State Office for the Aging	\$260,245.00
N/A	N/A
N/A	N/A
N/A	N/A
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	Victoria	Cohen	tcohen@lidementia.org
Director of Finance	Ellen	Contarino	EContarino@lidementia.org

Signature of
Executive Director

DocuSigned by:

Victoria Cohen

0F9DE404FA8D429...

Date:

10/25/2023

Signature of
Director of Finance

DocuSigned by:

Ellen Contarino

BE140A5EBE164DE...

Date:

10/25/2023