

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:	<input checked="" type="radio"/> New Filing <input type="radio"/> Amendment	Filing Year: <u>2022</u>
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General Information								
Current Organization Name:	<u>Historical Society of the Town of Middletown, Delaware County</u>	Updated Name: <u>N/A</u>						
NY Registration Number:	<u>47-07-76</u>	Registration Category: <u>DUAL</u>						
Organization Type:	<u>Other</u>	EIN: <u>010834413</u>						
Current Fiscal Year End:	<u>09/30</u>	Updated Fiscal Year End: <u>N/A</u>						
Organization Email:	<u>history@catskill.net</u>	Organization's Phone: <u>8455143262</u>						
Tax Exempt Status:	<u>501(c)(3)</u>	Website: <u>www.mtownhistory.org</u>						
Organization Address								
<table border="1"> <thead> <tr> <th>Mailing Address</th> <th>Principal Address</th> <th>NY State Address</th> </tr> </thead> <tbody> <tr> <td> PO Box 734 Margaretville NY 12455 United States </td> <td> 778 Cemetery Rd Margaretville NY 12455 United States </td> <td> NA </td> </tr> </tbody> </table>	Mailing Address	Principal Address	NY State Address	PO Box 734 Margaretville NY 12455 United States	778 Cemetery Rd Margaretville NY 12455 United States	NA		
Mailing Address	Principal Address	NY State Address						
PO Box 734 Margaretville NY 12455 United States	778 Cemetery Rd Margaretville NY 12455 United States	NA						
Primary Contact Information								
First Name: <u>Diane</u>	Last Name: <u>Galusha</u>	Title: <u>President</u>						
Phone: <u>8455864973</u>	Email: <u>history@catskill.net</u>							
Organization Type								
Type of IRS document filed with IRS: <u>IRS990EZ</u>	Organization Type: <u>Public</u>							
Third Party Preparer Information								
First Name: <u>N/A</u>	Last Name: <u>N/A</u>	Title: <u>N/A</u>						
Firm Name: <u>N/A</u>	Phone: <u>N/A</u>	Email: <u>N/A</u>						
Third Party Address								
Street: <u>N/A</u>								
City: <u>N/A</u>	State: <u>N/A</u>							
Zip: <u>N/A</u>	Country: <u>N/A</u>							

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: \$100,000-\$249,000

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

IRS990EZ

Organization's total revenue:

173,304

Organization's total contributions:

164,828

Organization's total assets:

N/A

Organization's net assets:

420,620

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> </u>		

Did the organization receive government grants during this fiscal year?

☐ Yes ☒ No

Government Grant Agency	Grant Amount
N/A	N/A
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
President	Diane	Galusha	history@catskill.net
Treasurer	Patricia	Moore	moorepatricias@gmail.com

Signature of President

DocuSigned by:

Diane Galusha

EABEDB660B586420...

Date: 2/8/2024

Signature of Treasurer

DocuSigned by:

Patricia Moore

DA2612833EE7432

Date: 2/7/2024