LM-2123-0586

Balance Due Now	9,859.86 5,073.52 0.00	54.05	0.00	770.63 399.45	00.00	117.34 63.29	0.00	10,801.88 5,536.26 0.00
Page :1 Tax Due Int Due		0.00	000	371.18 22.27	6.00	54.05 3.24	6.00	5,211.57 312.69 12.00
TOT Inst TOT Adj	9,572.68	108.10	54.05	742.36 0.00 6615544-N	0.00	108.10 0.00 1924543-N	00.0	10,531.24 0.00 54.05
CITY OF NEW HAVEN Interest Date : 10/23/2023  Name Address Address City/State/Zip Flags	COMMUNITY ACTION AGENCY OF NEW HAVEN 419 WHALLEY AVE 419 WHALLEY AVE NEW HAVEN CT 06111 COMMUNITY ACTION AGENCY OF NEW	COMMUNITY ACTION AGENCY OF NEW HAVEN INCBE17091/3GNCA23B79S539537/2009/CHEVR/HHR LT 419 WHALLEY AVE LINK # 2022-MV-0008021 NEW HAVEN CT 06511 BACK TAXAS/DMV CTUTS: 3564601,102460 M	GENCY OF NEW HAVEN INC	742 NEW HAVEN CT 06511  WARRANT   /Back Taxes/MV-O/DMV CIVLS: 1825141-6615544-N		COMMUNITY ACTION AGENCY OF NEW HAVEN INCBH06598/3GNCA23B09S546572/2009/CHEVR/HHR LT 108.1 419 WHALLEY AVE LINK # 2022-MV-0008020 NEW HAVEN CT 06511 WAITANT /BACK TAXES/MV-0/DMV CIVLS: 2015772-1924543-N		
Inquiry Report Bill# Unique_id Dist	2022-02-0052411-00 015356	2022-03-0060916-00 60916	2022-03-0060917-00	60917	7000	2022-03-0060918-00 60918	77.65	# Of Acct (s) : 4

Jene11 Lawson 203-387-7700 Jawson C Caar H. net

			material Control	4 Cor	> 1-	00	10.		
C,	AAO M3 rev. 2015			1		1 1	XX '		
		Municipality: <u>N</u>	lax Exem	pt Applicat	ion		<u>20</u>	22	Year
A ed so tha the pro	neck Application Type: tax exempt application lucational, literary, histo ciety*, or corporation* o at is not a required filing a assessor in each town operty for which exempt durday or Sunday, on the	Initial Appli n of charitable and corical, or charitable in or sanatorium* must fill year when seeking e in which exempt prop	cation Qui of certain other organ stitution, an agricultur le a return every four exemption for property	years. An add acquired or pre	quired by C.G.S. ral society, a cer litional report mus eviously not exem	netery organiz it be filed in ar pt. Application	§12-87, ation, or y asses s must b	Science Scienc	entific, ospital t year d with
Na	me of Organization Co	mmunity Action Agency	of New Haven						
Co		nos Smith					***************************************	Marie	-
Ma	iling Address 419	9 Whalley ave		Cit	y/State/Zip New H	laven CT 06511			
Tel	lephone 203-387-7700	E-mail	asmith@caanh.net		// Ctate/21p		21-3040		····
1.	What are the purpos	ses of this organizati	on - Submit conv of the	on charter and h	***************************************	rax			AMMediane Constitution (Constitution Constitution Constit
	Offering pathways to pro-	sperity to those in povert	y in the Greater New Ha	ven area through	service colleboration	o odvocov 8 l			
2. 3. 4. 5.	Exemption is claime	d in accordance with umber & titles listed by horticultural or centicientific, educational arposes?  date: Gross Incomplete Strates	h which section of the elow signature block a netery society, is the netery society, is the netery society, historical me for fiscal year:  Fees Rentals  % % nses for fiscal year;  nance Rent  % 1.60%  If such corporation icultural or horticultis	e CONNECTIC and those statut gross income , charitable, or  Amount of inc \$ 0  Grants 98%  Expenses de \$0  Mortgage % is receiving freural exhibition	es on last two pages of such corporations in the page of such corporations one used for other subsidies by logournments evoted to other to the country of the state rein held by it in the	ratutes? ges. stion es or to Yes ner than Item 1 cal, State or Fo han Item 1 pur 0% (	7 purpos of total of total of	No [ Ses. O	ome ome other 2% nses
8.	Is any officer, membe (even in event of its d reasonable compensa- beneficiary of its stric if answer is yes, show it	er, or employee of the lissolution) receive a ation paid for service ofly charitable purpo	ls organization receinny pecuniary profit to single one or single one or sees?	ving, or may h from its operat r more of its pu	e at any future tl ilons, except urposes, or as a	me		No l	
9.	What would be the dis The profit shall be authorize Does organization's c	ed and empowered to pa harter contain any p	y compensation for servi rovisions relative to	ces rendered and	navments in furthe	rance of the com		sion. No [	
10	If yes, highlight pertinen	nt sections of the chart	ter. If no explain.						
10.	What would become o	of the property of suc	ch organization in the	e event of ite d	lice alutia - 2				
		. adamon to be retuitled	n a governmental adeuc	v will be distribute	ed to a constalit of t	imilar purpose a	nd activity	y.	CAMPAGNA AND AND AND AND AND AND AND AND AND A
	Does organization's cl If yes, highlight pertinen	it sections of charter/b	viaws.			Yes		No [	J
11.	Has the organization fi attach copy.	iled a Federal and/or	State income tax for	r the current fi	scai year? If yes	' Vec		No F	7

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11.

RECEIVED

Yes 🗹

No 🗆

SEP 7 6 2023

ASSESSORS