New York/New Jersey Area
Common Application Form
Cover Sheet

Date of application: 8/05/2026

Name of organization to which grant would be paid. Please list exact legal name:
Search and Care, Inc

Purpose of grant (one sentence): To support our Care Management and specialized Supportive Services

Address of organization: 207 E. 94th St., Mezzanine | New York, NY 10128

Telephone number: (212) 289-5300Fax: Click here to enter text.E-mail: Click here to enter text.

Executive director: Aaron Rooney

Contact person and title (if not executive director): Leland Pitts

Is your organization an IRS 501(c) (3) not-for-profit?: Yes ☒ or No ☐

If no, please explain: Click here to enter text.

Grant request: $ $12,000 or any amount feasible

Check one (based on the organization's priorities and the funder's guidelines):

General support ☒

Project support ☐

Total organizational budget (for current year): $2,846,551.64

Dates covered by this budget (mo/day/year): 7/01/26 – 6/30/27

Total project budget (if requesting project support):$Click here to enter text.

Dates covered by project budget (mo/day/year): Click here to enter text.

Project name (if applicable): Click here to enter text.