Tennessee Secretary of State Tre Hargett



Division of Business and Charitable Organizations 312 Rosa L. Parks Avenue, 6th Floor Nashville, Tennessee 37243-1102

June 07, 2023

Ms. MADELENE METCALF PO BOX 1546 BRENTWOOD, TN 37024

RE: Registration to Solicit Funds for Charitable Purposes Organization Name: SWEET SLEEP, INC. CO Number: CO8718 Renewal Date: 06/30/2024

Dear Ms. MADELENE METCALF :

Pursuant to the Tennessee Charitable Solicitations Act, T.C.A. § 48-101-501,*et seq*. the Tennessee Secretary of State has reviewed your application and is pleased to announce your organization's registration to solicit contributions has been **approved**.

The organization must maintain statutory compliance by submitting a renewal application and required fees on an annual basis. At that time you may be required to submit tax filings, financial statements, proof of IRS status, and other documents related to your organization and its fundraising activities. You can find additional information and submit additional filings online at <u>https://sos.tn.gov/charities</u>. The "CO" Number listed above will serve as your organization number and should be used when submitting any charitable filings or correspondence.

Please also be advised that if the organization's application or other provided information includes false, misleading or deceptive statements, appropriate action will be taken. Pursuant to the Tennessee Charitable Solicitations Act, a civil penalty of up to five thousand dollars (\$5,000.00) may be assessed for any violation.

Thank you for registering your organization and please do not hesitate to contact us with any questions.

Sincerely,

Tre Hargett Secretary of State

Tracking Number 2023114387

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Tre Hargett Secretary of State

Organization Information

Legal Name of the Charitable Organization: SWEET SLEEP, INC. Legal entity type of the Organization: Corporation Business Services Control Number: 000532389 FEIN: 20-5757551 Initial Registration Date: 01/29/2007 Renewal Date: 06/30/2023 Has your fiscal year ending month changed since your last renewal? 🗆 Yes 🛛 No Fiscal Year Ending Month: December When and where was the organization legally established Date: 10/20/2006 Country: USA City/State: NASHVILLE, TN County: Davidson Has your Principal Office address changed since your last renewal? 🗆 Yes 🗹 No **Principal Office Address** 5620 SOUTH HILLVIEW DRIVE USA, BRENTWOOD, TN 37027 Has your Mailing address changed since your last renewal? 🗆 Yes 🗹 No Mailing Office Address PO BOX 1546 USA, BRENTWOOD, TN 37024 **Contact Information for the Charitable Organization** Contact Name: Ms. MADELENE METCALF Telephone Number: (615) 730-7671 Email: admin@sweetsleep.org Website: www.sweetsleep.org Current names used by the charity organization Do you need to modify other names that the charity solicits under? 🗆 Yes 🛛 No Has the organization registered in any other state(s)? 🗆 Yes 🗹 No Does the charity have other offices, chapters, branches, affiliates or a parent?

□ Yes ☑ No

Application to Renew Registration of a Charitable Organization Division of Business and Charitable Organizations

Department of State State of Tennessee 312 Rosa L. Parks Avenue, 6th Floor Nashville, Tennessee 37243 Phone: 615-741-2555 Fax: 615-253-5173 sos.tn.gov/charities

CO Number: CO8718 Filed: 06/06/2023 03:38 PM Tre Hargett Secretary of State

The category that best describes your organization

W - Public Affairs, Society Benefit

The charitable purpose of the organization

Demonstrate God's love and hope in Christ to the world's orphaned and vulnerable children, improving their quality of life.

Has your tax exempt status changed since your last renewal? □ Yes ☑ No			
Last Fiscal Year Start: January 2022	Last Fiscal Year End: December 2022		
Type of 990 Tax Form Filed: 990 (Long Form)			
Gross Revenue			
Direct and Indirect Public Contributions	\$ 346,914.00		
Government Grants	\$ 0.00		
Program Service Revenue	\$ 0.00		
Special Events and Activities	\$ 0.00		
Gross Sales of Inventory	\$ 0.00		
Other Revenue	\$ 192.00		
Total Revenue	\$ 347,106.00		
Expenses			
Total Program Expenses	\$ 371,136.00		
Direct Expenses from Special Events	\$ 0.00		
Cost of Goods Sold	\$ 0.00		
Management and General Expenses	\$ 49,083.00		
Fundraising Expenses	\$ 21,446.00		
Other Expenses	\$ 0.00		
Total Expenses	\$ 441,665.00		
Excess/Deficit For the Year (Total Revenue - Total Expenses)	(\$ 94,559.00)		
Changes in Net Assets/Fund Balances			
Net Assets/Fund Balances at Beginning of Year	\$ 230,439.00		
Other Changes in Net Assets or Fund Balances	\$ 0.00		
Net Assets/Fund Balances	\$ 230,439.00		
Total Liabilities at End of Year	\$ 5,573.00		
Net Assets/Fund Balances at End of Year	\$ 135,880.00		

Solicitation Information

Have you been enjoined by any court from soliciting contributions? □ Yes ☑ No

Does your organization contract with or otherwise engage the services of any outside fundraising professional (such as a "professional fund-raiser," "paid solicitor," "fund raising counsel," or "commercial co-venturer")? □ Yes ☑ No

Officer Information

Do you need to modify the current officers? ☑ Yes □ No

List each officer, director, and trustee (at least 2 officers are required, and you must list officers who have or share the following titles: "Chief Financial Officer", "Custodian of Contributions", "Custodian of Final Distributions")

Dana Maynor PO Box 1546 Brentwood, TN 37204, USA Title(s): Treasurer

321 East Market St. Lebanon, TN 37087, USA Title(s): Chairman

Greg Gore PO Box 1546 Brentwood, TN 37024, USA Title(s): Board Member

Madelene Metcalf PO Box 1546 Brentwood, TN 37024, USA Title(s): Custodian of Contributions, Custodian of Final Distributions, President

Paul Stringfellow PO Box 1546 Brentwood, TN 37204, USA Title(s): Board Member

Savannah Koehn PO Box 1546 Brentwood, TN 37204, USA Title(s): Secretary

Mr. JOHN MATTHEWS 5620 SOUTH HILLVIEW DRIVE USA, BRENTWOOD, TN 37027 Title(s): Director

Has any officer, director, manager, operator, or principal of the organization been the subject of an injunction, judgement, or administrative order or been convicted of a felony?

🗆 Yes 🛛 🗹 No

Signature

I certify that the statements in this registration statement and all supplemental forms, documents, and continuation sheets are true and correct to the best of my knowledge and belief.

I (Chief Fiscal Officer, Treasurer, or Officer) certify, under penalty of perjury, that the above information is true and correct.

Signed Electronically: Madelene Metcalf Title: Chief Executive Officer

I certify that the statements in this registration statement and all supplemental forms, documents, and continuation sheets are true and correct to the best of my knowledge and belief.

I (Chief Fiscal Officer, Treasurer, or Officer) certify, under penalty of perjury, that the above information is true and correct.

Signed Electronically: Savannah Elizabeth Koehn Title: Secretary Date: 06/06/2023

Date: 06/06/2023



Tre Hargett Secretary of State

Date: 06/05/2023

Customer Information

Ms. MADELENE METCALF SWEET SLEEP, INC. PO BOX 1546 BRENTWOOD, 37024

Division of Business and Charitable Organizations

Department of State State of Tennessee 312 Rosa L. Parks Avenue, 6th Floor Nashville, Tennessee 37243 Phone: 615-741-2555 Fax: 615-253-5173 sos.tn.gov/charities

Invoice: 2023-04333

Tracking Number	Description		Amount Paid
2023114387	CH Charitable Renewal		\$ 10.00
Payment Details			
		Fee Total:	\$ 20.00
		Payment Total:	\$ 10.00
		Amount Due:	\$ 0.00
Payment Method			
Payment Type:	Credit Card		
Check/Confirma	ation Number: 3852405162		