

Tennessee Secretary of State  
Tre Hargett



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

February 27, 2024

CAROL WESTLAKE  
955 WOODLAND STREET  
NASHVILLE, TN 37206

**RE:** Registration to Solicit Funds for Charitable Purposes  
Organization Name: TENNESSEE DISABILITY COALITION  
CO Number: CO2383  
Renewal Date: 12/31/2024

Dear CAROL WESTLAKE :

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 <https://sos.tn.gov/charities>. The "CO" Number listed above will serve as your organization's charitable registration 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**  
**2024104119**

## **Application to Renew Registration of a Charitable Organization**



Tre Hargett  
Secretary of State

### **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: CO2383  
Filed: 02/26/2024 01:05 PM  
Tre Hargett  
Secretary of State

---

## **Organization Information**

---

**Legal Name of the Charitable Organization:** TENNESSEE DISABILITY COALITION

**Legal entity type of the Organization:** Corporation

**FEIN:** 62-1447320

**CO Number:** CO2383

**Initial Registration Date:** 10/18/1994

**Renewal Date:** 03/30/2024

**Has your fiscal year ending month changed since your last renewal?**

☐ Yes ☒ No

**Fiscal Year Ending Month:** June

**When and where was the organization legally established**

**Date:** 01/03/1991

**Country:** USA

**City/State:** NASHVILLE, TN

**Has your Principal Office address changed since your last renewal?**

☐ Yes ☒ No

**Principal Office Address**

955 WOODLAND STREET  
USA, NASHVILLE, TN 37206

**Has your Mailing address changed since your last renewal?**

☐ Yes ☒ No

**Mailing Office Address**

955 WOODLAND STREET  
USA, NASHVILLE, TN 37206

### **Contact Information for the Charitable Organization**

**Contact Name:** CAROL WESTLAKE

**Telephone Number:** (615) 383-9442

**Fax Number:** (615) 383-1176

**Email:** carol\_w@tndisability.org

**Website:** www.tndisability.org

**Current names used by the charity organization**

FAMILY VOICES OF TENNESSEE

**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

**The category that best describes your organization**

P - Human Services

**The charitable purpose of the organization**

Working together to advocate for public policy that ensures self-determination independence, empowerment, integration and inclusion for people with disabilities.

---

**Tax & Financial Information**

---

**Has your tax exempt status changed since your last renewal?**☐ Yes ☒ No**Last Fiscal Year Start:** July 2022**Last Fiscal Year End:** June 2023**Type of 990 Tax Form Filed:** 990 (Long Form)**Gross Revenue**

Direct and Indirect Public Contributions	\$ 1,378,788.00
Government Grants	\$ 1,144,411.00
Program Service Revenue	\$ 0.00
Special Events and Activities	\$ 0.00
Gross Sales of Inventory	\$ 0.00
Other Revenue	\$ 9,250.00
<b>Total Revenue</b>	<b>\$ 2,532,449.00</b>

**Expenses**

Total Program Expenses	\$ 1,990,328.00
Direct Expenses from Special Events	\$ 0.00
Cost of Goods Sold	\$ 0.00
Management and General Expenses	\$ 468,539.00
Fundraising Expenses	\$ 45,162.00
Other Expenses	\$ 0.00
<b>Total Expenses</b>	<b>\$ 2,504,029.00</b>

<b>Excess/Deficit For the Year</b> <b>(Total Revenue - Total Expenses)</b>	<b>\$ 28,420.00</b>
---	---------------------

**Changes in Net Assets/Fund Balances**

Net Assets/Fund Balances at Beginning of Year	\$ 3,307,692.00
Other Changes in Net Assets or Fund Balances	\$ 0.00
Net Assets/Fund Balances	\$ 3,336,112.00
Total Liabilities at End of Year	\$ 89,201.00
Net Assets/Fund Balances at End of Year	\$ 3,336,112.00

---

## 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")

TERRI FOUGHT  
955 WOODLAND ST  
NASHVILLE, TN 37206, USA  
Title(s): Secretary, Director

Carol Westlake  
955 Woodland St.  
Nashville, TN 37206, USA  
Title(s): Custodian of Contributions, Chief Executive Officer

Clarissa Williams  
955 Woodland Street  
Nashville, TN 37206, USA  
Title(s): President, Director

KAREN HARRISON  
955 WOODLAND STREET  
NASHVILLE, TN 37206, USA  
Title(s): Director, Vice President

SANDI KLINK  
955 Woodland St  
Nashville, TN 37206, USA  
Title(s): Custodian of Final Distributions, Treasurer, Director

Michael Atnip  
955 Woodland St  
Nashville, TN 37206, USA  
Title(s): Custodian of Contributions

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:** Carol Westlake

**Date:** 02/26/2024

**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:** Clarissa Ann Williams

**Date:** 02/26/2024

**Title:** President



Tre Hargett  
Secretary of State

**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

**Date:** 02/26/2024

**Invoice:** 2024-01533

**Customer Information**

CAROL WESTLAKE  
TENNESSEE DISABILITY COALITION  
955 WOODLAND STREET  
NASHVILLE, 37206

Tracking Number	Description	Amount Paid
2024104119	CH Charitable Renewal	\$ 10.00
<b>Payment Details</b>		
Fee Total:		\$ 10.00
Payment Total:		\$ 10.00
Amount Due:		\$ 0.00
Refunded Amount:		\$ 0.00
<b>Payment Method</b>		
Payment Type: Credit Card		
Check/Confirmation Number: 3868367024		