Tennessee Secretary of State Tre Hargett



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

July 03, 2023

Mrs. KAREN BLAKE 6515 HOLT ROAD NASHVILLE, TN 37211

RE: Registration to Solicit Funds for Charitable Purposes

Organization Name: AUTISM FOUNDATION OF TENNESSEE, INC.

CO Number: CO10806 Renewal Date: 06/30/2024

Dear Mrs. KAREN BLAKE:

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 2023120104

Application to Renew Registration of a Charitable Organization



Secretary of State

☐ Yes ☑ No

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: CO10806 Filed: 06/30/2023 01:37 PM Tre Hargett Secretary of State

Organization Inf	formation		
Legal Name of the Chari	-	JTISM FOUNDATION OF TENNESSEE, INC.	
Business Services Conf	trol Number: 00055922	26	FEIN: 42-1741568
Initial Registration Date:	09/04/2008		Renewal Date: 06/30/2023
Has your fiscal year end ☐ Yes ☑ No	ling month changed si	nce your last renewal?	
Fiscal Year Ending Mon	th: December		
When and where was th	e organization legally	established	
	Country: USA	City/State: BRENTWOOD, TN	County: Williamsor
Has your Principal Office ☐ Yes ☑ No Principal Office Address 6515 HOLT ROAD USA, NASHVILLE, TN	<u>-</u> <u>-</u> 255	ce your last renewal?	
Has your Mailing addres ☐ Yes ☑ No	s changed since your	last renewal?	
Mailing Office Addres 6515 HOLT ROAD USA, NASHVILLE, TN			
Contact Information for Contact Name: Mrs. KA	_	ation	
Telephone Number: (61	5) 866-4477	Fax Number: (615) 866-5335	
Email: kblake@autismca	reertraining.org	Website: www.autismcareertraining.or	g
Current names used by AUTISM CAREER TRA		on	
Do you need to modify o	ther names that the ch	narity solicits under?	
Has the organization reg ☐ Yes ☑ No	istered in any other st	ate(s)?	

Does the charity have other offices, chapters, branches, affiliates or a parent?

The category that best describes your organization

E - Health General & Rehabilitative

The charitable purpose of the organization

To provide career training and life skills training to adolescents and adults on the autism spectrum.

Tax & Financial Information

Has v	our tax exem	ot 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	\$ 136,076.00
Government Grants	\$ 0.00
Program Service Revenue	\$ 280,192.00
Special Events and Activities	\$ 8,967.00
Gross Sales of Inventory	\$ 0.00
Other Revenue	\$ 8,726.00
Total Revenue	\$ 433,961.00

Expenses

Excess/Deficit For the Year (Total Revenue - Total Expenses)	(\$ 21,326.00)
Fuence/Deficit For the Year	
Total Expenses	\$ 455,287.00
Other Expenses	\$ 0.00
Fundraising Expenses	\$ 0.00
Management and General Expenses	\$ 72,709.00
Cost of Goods Sold	\$ 0.00
Direct Expenses from Special Events	\$ 12,487.00
Total Program Expenses	\$ 370,091.00

Changes in Net Assets/Fund Balances

Net Assets/Fund Balances at Beginning of Year	\$ 808,459.00
Other Changes in Net Assets or Fund Balances	(\$ 109,698.00)
Net Assets/Fund Balances	\$ 677,435.00
Total Liabilities at End of Year	\$ 7,746.00
Net Assets/Fund Balances at End of Year	\$ 677,435.00

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")
Todd Marggart 1119 Havervill Drive Brentwood, TN 37027, USA Title(s): Treasurer
Dr. TANDY TAYLOR 6515 HOLT ROAD USA, NASHVILLE, TN 37211 Title(s): Secretary
Mrs. KAREN BLAKE 6515 HOLT ROAD USA, NASHVILLE, TN 37211 Title(s): Chairman
Mr. HENRY TERRELL 6515 HOLT ROAD USA, NASHVILLE, TN 37211 Title(s): Board Member
Mr. CAMERON GRIER 6515 HOLT ROAD USA, NASHVILLE, TN 37211 Title(s): Board Member
Mr. ASAD HAMEED 6515 HOLT ROAD USA, NASHVILLE, TN 37211 Title(s): Board Member
Mr. TODD MAGGART 6515 HOLT ROAD USA, NASHVILLE, TN 37211 Title(s): Accountant, Custodian of Contributions
Mrs. KAREN BLAKE 6515 HOLT ROAD USA, NASHVILLE, TN 37211 Title(s): Custodian of Final Distributions
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: Karen Blake Date: 06/29/2023

Title: Chairman

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: Michael Todd Maggart

Date: 06/30/2023

Title: Board Member

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: 06/27/2023 Invoice: 2023-05204

Customer Information

Mrs. KAREN BLAKE

AUTISM FOUNDATION OF TENNESSEE, INC.

6515 HOLT ROAD NASHVILLE, 37211

Tracking Number	Description		Amount Paid
2023120104	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: 3853630617		