

Tennessee Secretary of State  
Tre Hargett



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

January 12, 2024

CROSSROADS CAMPUS (THE)  
707 MONROE STREET  
NASHVILLE, TN 37208

**RE:** Registration to Solicit Funds for Charitable Purposes  
Organization Name: CROSSROADS CAMPUS (THE)  
CO Number: CO16005  
Renewal Date: 06/30/2024

Dear CROSSROADS CAMPUS (THE):

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**  
**2024100293**

## **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



Tre Hargett  
Secretary of State

CO Number: CO16005  
Filed: 01/12/2024 08:38 AM  
Tre Hargett  
Secretary of State

### **Organization Information**

**Legal Name of the Charitable Organization:** CROSSROADS CAMPUS (THE)

**CO Number:** CO16005

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

**FEIN:** 27-2397528

**Initial Registration Date:** 12/23/2010

**Renewal Date:** 09/28/2023

**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:** 03/23/2010

**Country:** USA

**City/State:** NASHVILLE, TN

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

☐ Yes ☒ No

**Principal Office Address**

707 MONROE STREET  
USA, NASHVILLE, TN 37208

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

☐ Yes ☒ No

**Mailing Office Address**

707 MONROE STREET  
USA, NASHVILLE, TN 37208

**Contact Information for the Charitable Organization**

**Contact Name:** Ms. LISA STETAR

**Telephone Number:** (615) 482-7747

**Email:** lisa@crossroadscampus.org

**Website:** https://crossroadscampus.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

**The category that best describes your organization**

P - Human Services

**The charitable purpose of the organization**

Humane education, job training, employment and supportive housing for young adults impacted by inequity, social and economic inequality, and other traumas and adoptions for homeless dogs and cats.

---

**Tax & Financial Information**

---

**Has your tax exempt status changed since your last renewal?**☐ Yes ☒ No**Fiscal Year** January 2022 - December 2022**Type of 990 Tax Form Filed:** 990 (Long Form)**Gross Revenue**

Direct and Indirect Public Contributions	\$ 2,264,111.00
Government Grants	\$ 2,517,291.00
Program Service Revenue	\$ 500,873.00
Special Events and Activities	\$ 7,750.00
Gross Sales of Inventory	\$ 0.00
Other Revenue	\$ 4,804.00
<b>Total Revenue</b>	<b>\$ 5,294,829.00</b>

**Expenses**

Total Program Expenses	\$ 1,096,066.00
Direct Expenses from Special Events	\$ 0.00
Cost of Goods Sold	\$ 0.00
Management and General Expenses	\$ 202,441.00
Fundraising Expenses	\$ 180,829.00
Other Expenses	\$ 0.00
<b>Total Expenses</b>	<b>\$ 1,479,336.00</b>

<b>Excess/Deficit For the Year (Total Revenue - Total Expenses)</b>	<b>\$ 3,815,493.00</b>
---	------------------------

**Changes in Net Assets/Fund Balances**

Net Assets/Fund Balances at Beginning of Year	\$ 5,305,841.00
Other Changes in Net Assets or Fund Balances	(\$ 1,494.00)
Net Assets/Fund Balances	\$ 9,119,840.00
Total Assets at End of Year	\$ 13,656,383.00
Total Liabilities at End of Year	\$ 4,536,543.00
Net Assets/Fund Balances at End of Year	\$ 9,119,840.00

---

## 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")

Ann Curtis  
4417 Howell Place  
Nashville, TN 37205, USA  
Title(s): Board Member

Danny Brown  
5235 Buena Vista Pike  
Nashville, TN 37218, USA  
Title(s): Board Member

David Conrad  
2303 Hampton Ave.  
Nashville, TN 37215, USA  
Title(s): Vice President

Ms. Elisabeth Stetar  
707 Monroe Street  
Nashville, TN 37208, USA  
Title(s): Chief Executive Officer, Custodian of Contributions, Custodian of Final Distributions

Mr. Emmylou Harris  
PO Box 158568  
Nashville, TN 37215, USA  
Title(s): Director

Karen Christian  
203 Carden Ave.  
Nashville, TN 37205, USA  
Title(s): President

Margie Arnold  
One Vantage Way Suite C-165  
Nashville, TN 37228, USA  
Title(s): Board Member

Robin Cohn  
6704 Greeley Dr.  
Nashville, TN 37205, USA  
Title(s): Board Member

Trey Calfee  
826 Bresslyn Rd.  
nashville, TN 37205, USA  
Title(s): Board Member

Ms. JIHAN STRANGE

707 MONROE STREET  
USA, NASHVILLE, TN 37208  
Title(s): Director

Ms. ALLY CONNOR  
707 MONROE STREET  
USA, NASHVILLE, TN 37208  
Title(s): Director

Mr. JAMES WILLIAMS  
707 MONROE STREET  
USA, NASHVILLE, TN 37208  
Title(s): Director

Ms. JANINA LAWRENCE  
707 MONROE STREET  
USA, NASHVILLE, TN 37208  
Title(s): Secretary

Ms. BEV FULKERSON  
707 MONROE STREET  
USA, NASHVILLE, TN 37208  
Title(s): Director

Mr. BRENT MATHER  
707 MONROE STREET  
USA, NASHVILLE, TN 37208  
Title(s): Director

Ms. DARLENE LAWSON  
707 MONROE STREET  
USA, NASHVILLE, TN 37208  
Title(s): Director

Mr. KEITH MERRILL  
707 MONROE STREET  
USA, NASHVILLE, TN 37208  
Title(s): Director

Ms. CASEY MULLIGAN  
707 MONROE STREET  
USA, NASHVILLE, TN 37208  
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 this is my signature and I have the authority to submit this registration form on behalf of the organization and that I have examined this registration form, including accompanying documents, and to the best of my knowledge and belief, the form and each document are true, correct, and complete.

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

**Signed Electronically:** Karen A Christian

**Date:** 01/11/2024

**Title:** Treasurer

I certify that this is my signature and I have the authority to submit this registration form on behalf of the organization and that I have examined this registration form, including accompanying documents, and to the best of my knowledge and belief, the form and each document are true, correct, and complete.

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

**Signed Electronically:** Lisa Stetar

**Date:** 01/12/2024

**Title:** Chief Executive Officer



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:** 01/11/2024

**Invoice:** 2024-00347

**Customer Information**

Ms. LISA STETAR  
CROSSROADS CAMPUS (THE)  
707 MONROE STREET  
NASHVILLE, 37208

Tracking Number	Description	Amount Paid
2024100293	CH Filing Late Fee	\$ 40.00
2024100293	CH Charitable Renewal	\$ 10.00
<b>Payment Details</b>		
Fee Total:		\$ 50.00
Payment Total:		\$ 50.00
Amount Due:		\$ 0.00
Refunded Amount:		\$ 0.00
<b>Payment Method</b>		
Payment Type: Credit Card		
Check/Confirmation Number: 3865611637		