NOTE: DO NOT STAPLE – USE PAPERCLIP OR LEAVE LOOSE DO NOT RETURN THIS PAGE

CTS - 02 AUTHORITY 1975 PA 169 PENALTY: civil, criminal

State of Michigan Department of Attorney General

RENEWAL SOLICITATION FORM Charitable Organizations and Solicitations Act (COSA)

Who should file this form?

Charitable organizations:

- Renewing their solicitation registration –
 this form should be submitted at least 30
 days before the expiration date of your
 last registration (see top right-hand corner
 for expiration date) to ensure we have
 enough time to process before your
 registration expires.
- Organizations whose prior registration has expired. If your registration has expired, provide copies of any changes to your organizing documents, bylaws, IRS status, or charitable purposes since your previous submission, if any.

Who should not file this form?

- Charitable organizations filing for the first time to solicit in Michigan. Instead, use Form CTS-01, Initial Solicitation Form.
- Organizations exempt from registration.
 See Form CTS-03, Request for Exemption.

Expiration/Extensions – Your solicitation registration will expire 1 year and 7 months after the close of the fiscal year submitted (financial accounting period). Your renewal form is due **30 days** before the expiration of your registration.

Extensions must be requested via email or letter before your registration expires. You may also check the box under the signature line on this renewal. Your registration expiration date will be extended for 5 additional months - this will not be reflected on your registration, but you can verify on our website (michigan.gov/charitysearch).

File number – The organization has been assigned a file number that must be included on correspondence and forms sent to this office. Your file number will be printed on the upper left corner of the registration.

Fees – There is currently no fee to register to solicit in Michigan.

Filing the renewal form – You may renew your registration by email, efile, fax, or mail.

Email is preferred – Put the AG file number and legal name in the email subject line (Example: AG# 12345 yourcharityname 2022 renewal). The Form and required documents should be attached in PDF form and emailed (ct email@michigan.gov).

Efile – On the Attorney General's website (michigan.gov/charity) scroll down the page to the contact information - How to Submit Forms and click on the link for Efiling.

Mail - See Page 3 of the renewal for our mailing address:

To check registration status: Search for the organization on our website (michigan.gov/charitysearch). If search results state, "Registration pending" then we have received the renewal and has not yet been processed. Your registration is valid while pending and you may continue to solicit in Michigan unless notified otherwise.

Note: to avoid delays and unnecessary correspondence, answer **all** questions.

NOTE: DO NOT STAPLE - USE PAPERCLIP OR LEAVE LOOSE

CTS - 02 AUTHORITY 1975 PA 169 PENALTY: civil, criminal State of Michigan Department of Attorney General

RENEWAL SOLICITATION FORM

This renewal repo	rts on the tax	year beginning	and ending	

•	, , , , , , , , , , , , , , , , , , , ,	<u> </u>	
Full legal name of organization (as on fi	ile with your State's Corporati	ons Agency)	
All other names (must be on file as an a	assumed name with your Stat	e's Corporations Agency)	
Attorney General File Number	Telephone number	Fax number	
Employer Identification Number (EIN)	Organization email address	Organization website	
All questions must be answered. Pr	ovide additional sheets if n	ecessary.	
Organization addresses – Any addre A. Street address of principal office. I name and address of the person har	f you do not have a principal o	office, provide the	No.
B. Organization mailing address, if diff	ferent.		
C. Provide the address of all other offi	ces in Michigan (include sepa	rate sheet if more than or	ne).
Has there been a change in the organ If yes, summarize current purposes in	nization's purposes? If no, m on an attachment, 50 words or	ovo to quoditori o.	No
 You must designate a resident agent official mail sent to your organization Cannot be the name of the organizati Name or Registered Agent Comp Address (Michigan street address) 	. Registration will not be app ion itself. pany:		
4. Methods of solicitation. Check all tha Mail Telephone Website	it apply. None Other (specify)		
5. Has there been a change in the organ	•	-	No
 Has the organization engaged a profe fundraising activity for either the finar current period? If no, move to quest 	ncial accounting period réport	ed above or the	No

7. Since your last registration , fundraisers:	has the organization or any of its office	ers, directors, employees, or Yes	N
	wise prohibited by a government agend stration or license denied or revoked by		
C. Been the subject of a p	roceeding regarding any license, regis	tration, or solicitation?	
D. Entered into a voluntary case before a court or a	y agreement of compliance with a gove administrative agency?	ernment agency or in a	
If any "yes" box is checked, pro	ovide a complete explanation in an atta	chment.	
your contributions are over \$30 unsure, or if required and an a Check the box to indicate the ty	on their most recently completed finar 00,000 you may need audited or review udit or review has not yet been comple ype of return filed with the IRS and including of your IRS return. If not yet complete complete registration.	ved financial statements; if ted, see Attachment B. ude a copy – registration will	
Form 990 or 990-EZ - Pro	vide a copy of the return. Do not includ	e Schedule B.	
Form 990-PF - Provide a directly on its charitable pro	copy of the Form 990-PF. Enter the an ogram here: \$	nount the organization spent	
Files Form 990-N. Total R	evenue: \$ (if more than \$50),000 – see IRS guidance)	
	90-N, you must provide directors on a s an organizations require at least 3 direc	•	
Included in IRS group ref Attachment C.	turn. Provide a copy of the group retur	n and the chart in	
Other reason. Explain an	d provide the chart in Attachment C : _		_
If no, go to question 10. If ye	igan that are to be included in the solices, complete Attachment C. Note: If your orting or filing requirements with the IF	ou have offices in	۷o
knowledge and belief the infor correct, and complete. False s	d representative of the organization an mation provided, including all accompa statements are prohibited by MCL 400. able by civil and criminal penalties.	anying documents, is true,	
Print name:	Title:	Date:	

No

Check here if you would like to request an automatic 5-month extension for this renewal (this will not be reflected in your registration document but can be verified online on our website at mi.gov/charity). If you routinely ask the IRS for a filing extension, please check this box. Do not use this form to request an extension of your previously issued registration. Instead, email your request to ct_email@michigan.gov.

THIS IS A PUBLIC RECORD, COPIES OF WHICH ARE SENT, UPON REQUEST, TO ANY INTERESTED PERSON.

CHECKLIST:

Have all parts of the form been fully completed unless instructed otherwise?

Have you provided the name and Michigan street address of a resident agent in item 3?

Is a list of the officers and directors provided or included with the IRS return?

Have you provided a complete IRS 990, 990-EZ, OR 990-PF?

If you file Form 990-PF, did you include program expenses?

If you file Form 990-N, did you include at least 3 officers/directors?

If you have Professional Fundraisers, did you include Attachment A?

Have you submitted contracts and addenda to contracts with professional fundraisers that have not been previously submitted?

If audited or reviewed financial statements are required, are they provided? If not, have you requested a conditional registration or one-time waiver? (See Attachment B.)

If you have Michigan Chapters, did you include Attachment C?

Have you typed or printed your name, date, and title in Item 10 to certify the form?

If you are requesting a 5-month extension, have checked the box below item 10?

Return the completed registration form by:		
Email (preferred method)	ct_email@michigan.gov	
Example for email responses:	To: ct_email@michigan.gov From: Yourcharityname@something.com Subject: (AG No.) 12345 yourcharityname 2022 renewal	
Mail	Attorney General Charitable Trust Section PO Box 30214 Lansing, MI 48909	
Overnight mail	Attorney General-CT Section 525 West Ottawa Williams Building - 1st Floor Lansing, MI 48933	
Fax	517-241-7074	

ATTACHMENT A

NOTE: DO NOT RETURN THIS ATTACHMENT UNLESS YOU ANSWERED 'YES' TO QUESTION 7 AND HAVE PROFESSIONAL FUNDRAISERS.

Definitions: A professional fundraiser (PFR) is anyone who "plans, conducts, manages, or carries on a drive or campaign of soliciting contributions for or on behalf of a charitable organization". You do not have to report consulting contracts. Employees of a charitable organization are PFRs if they are paid wholly or in part by commissions – including bonuses – based on funds raised.

Consultants - To qualify as a consultant, all the following conditions must be met:

- the PFR is usually retained by a charitable or religious organization for a fixed fee or rate that is not computed based on funds raised or to be raised.
- the PFR does not solicit funds, assets, or property, but only plans, advises, consults, or prepares materials for a solicitation or fundraising event in Michigan.
- the PFR does not receive, or control funds, assets, or property solicited in Michigan; and the PFR does not employ, procure, or engage any compensated person to solicit, receive, or control funds, assets, or property.

PFR Contract - You are required to provide copies of contracts with PFRs within 10 days of signing a new contract or extending an existing contract. If you are unsure if the services provided by a person or firm you contracted with are such that a PFR license is required, provide a copy of the contract with your renewal form and request to have the contract reviewed. You will be notified if you must complete this attachment, and if the contractor should be licensed as a PFR. **NOTE:** Michigan law requires that you verify that any PFR with which you contract for fundraising in Michigan is currently licensed with this office.

Campaign Financial Statements, Form CTS-10, are required for all campaigns conducted by a PFR with which you have contracted. The Campaign Financial Statement will be filed by the PFR, but you will be required to provide additional campaign expense information and sign the form.

PFR Chart - Sum of all payments to/retained by PFR during the year reported. Include all fees, reimbursements, or other payments to the PFR that were related to the campaign conducted by the PFR for the organization. Any monies that were retained by the professional fundraiser before remitting the proceeds of a campaign or activity to the charity must also be included here. If the PFR listed was engaged after the close of the fiscal year reported in Item 10, enter "N/A" in this column.

Name	Mailing Address	Sum of payments to/retained by PFR during year reported	Contract in effect?	If no, dated ended
				End Date:
				End Date:
				End Date:

ATTACHMENT B

NOTE: DO NOT RETURN THIS ATTACHMENT UNLESS YOU ARE REQUESTING AN AUDIT WAIVER OR CONDITIONAL REGISTRATION.

Audited or reviewed financial statements requirement

Complete the following schedule to determine if audited or reviewed financial statements are required. If audited or reviewed financial statements are required, but they have not been prepared, see the instructions.

	Item	Where to Find it:	Amount
A.	Contributions from IRS return	Form 990: Part VIII, line 1h Form 990-PF: line 1	
В.	Net income: special fundraising events	Form 990: Part VIII, line 8c	
C.	Net income: gaming activities	Form 990: Part VIII, line 9c	
D.	Total contributions and fundraising	Add lines A, B, and C	
E.	Governmental grants	Form 990: Part VIII, line 1e	
F.	TOTAL:	Subtract line E from D	

After completing the schedule:

- If line F is \$550,000 or more, audited financial statements are required. They must be audited by an independent certified public accountant and prepared in accordance with generally accepted accounting principles (GAAP).
- If line F is greater than \$300,000, but not greater than \$550,000, financial statements either reviewed or audited by a certified public accountant are required.

If you met the threshold, but did not have an audit/review completed check one of the following:

Our organization would like to request a **one-time** audit waiver for the financial period reported in the first page of this renewal.

Our organization would like to request a conditional registration on the condition that the audit/review will be submitted upon completion (attach a copy of the audit engagement letter – you can obtain this from the CPA firm).

ATTACHMENT C

NOTE: DO NOT RETURN THIS ATTACHMENT UNLESS YOU RESPONDED YES TO QUESTION 9 (RE: MICHIGAN BASED CHAPTERS) OR OTHERWISE NEED TO PROVIDE A FINANCIAL REPORT.

CHAPTER INFORMATION

Provide chapter information if you are a parent organization that directly supervises and controls a local, county, or area division or chapter that is also a separate legal entity. Unless previously submitted, you MUST provide:

- appropriate documentation to show that you directly supervise and control the chapter; and
- names and addresses of each chapter to be included in your registration.

For each chapter you must provide the information below (this chart can be used for organizations that are included in a group return and organizations that do not file an IRS return. Include additional sheets if you have more than one chapter.

e of	chapter (or organization):
Re	venue
Α	Contributions (include all donations, cash or noncash):
В	All other revenue:
С	Total revenue (Add A and B):
Ex	penses
D	Program Services (do not include administrative or fundraising expenses):
Е	All other expenses (supporting services):
F	Total expenses (Add D and E):
G	Revenue less expenses (Subtract F from C):
Ass	sets
Н	Total assets (on the last day of your financial period):
<u> </u>	Liabilities:
J	Net Assets (subtract I from H):

ATTACHMENT D

NOTE: DO NOT RETURN THIS ATTACHMENT UNLESS YOU HAVE ADDITIONAL INFORMATION TO DISCLOSE.

Additional information related to question number
Additional information related to question number
Additional information related to question number