



The Office of Secretary of State Securities & Charities Division

Date of Notice:

Mailed To:

Registrant #

Effective Date:

Expiration Date:

CHARITABLE ORGANIZATION RENEWAL NOTICE

This charity's registration expires on the date indicated above. Pursuant to **The Georgia Charitable Solicitations Act of 1988, charitable registrations in Georgia are effective for two (2) years.**

Please submit the following documentation and information in order to complete the renewal:

1. Sign and return this notice **along with a \$20.00** filing fee before the expiration date indicated above. **Make checks payable to the Georgia Secretary of State.**
2. Has the charitable organization received or collected any charitable contributions during its preceding two (2) fiscal years?
Yes No
3. If the charitable organization received or collected any charitable contributions during its **preceding two (2) fiscal years, attach financial statements covering the periods since the most recent financial statement previously filed. The criteria for such required financial statements are:**
 - A. If the organization received or collected more than **\$1,000,000.00** during either of its two (2) preceding fiscal years, submit a **certified financial statement prepared by an independent certified public accountant for the years with such revenue level.**
 - B. If the organization received more than **\$500,000.00** but not more than **\$1,000,000.00** during either of its two (2) preceding fiscal years, the **financial statements for such years must be reviewed by an independent certified public accountant.**
 - C. If the organization has received or collected less than **\$500,000.00** in either of its two (2) preceding fiscal years, submit **financial statements for such years. The financial statements for such years need not be certified or reviewed.**
4. **Attach the IRS Form 990 or 990EZ for its preceding two (2) fiscal years unless previously filed. If the charity filed a Form 990N (postcard), it must fill out and submit the Georgia Form C200 for the preceding two (2) fiscal years. Georgia DOES NOT accept the Form 990N.**
5. Names of all paid solicitors used in Georgia during the preceding two (2) fiscal years.
6. Statement of material changes, if any, since the last filing with the Secretary Of State. The charitable organization is under a continuing duty to update records on file with the Secretary Of State.
7. If applicable, submit the attached ***Affidavit Regarding Citizenship*** and a secure and verifiable identification document for each Control Person of the organization. This is required for Control Persons who have not previously submitted an Affidavit Regarding Citizenship and a secure and verifiable identification document.

Under penalty of perjury, I swear or affirm that the information I have provided in this application is correct to the best of my knowledge.

Signature of Licensee Control Person: _____ Date: _____

Title: _____



The Office of Secretary of State Securities & Charities Division

Affidavit Regarding Citizenship

Georgia law requires that the Charities Division verify lawful presence in the U.S. of any natural person 18 years or older who has applied for a state benefit, such as a license, certificate, or registration. Amendments to O.C.G.A. § 50-36-1 became effective January 1, 2012 that require all applicants for licensure, and all those applying for renewal of an existing license, to submit secure and verifiable documentation with their application. A list of the approved Secure and Verifiable Documents may be found on the Secretary of State's website at <http://sos.ga.gov/admin/files/svd2013.pdf>. If you received your license while residing outside the U.S. and are still living outside the U.S., federal law dictates that your license will be renewed. See O.C. G.A. §50-36-1.

***If you are a qualified alien, please submit a copy of your qualified alien documentation to the Division office.**

Please submit this document along with a copy of your secure & verifiable document to the Board office as indicated on the application.

Print Name: _____

Registrant Number #

APPLICANT AFFIDAVIT:

I hereby swear and affirm that all information provided in this application is true and correct to the best of my knowledge and belief. I further swear and affirm that I have read and understand the current state laws and rules and regulations of the Board for which I am applying for licensure and I agree to abide by these laws and rules, as amended from time to time.

By signing this application, I hereby swear and affirm one of the following to be true and accurate pursuant to O.C.G.A. § 50-36-1 (check one):

- I am a United States citizen 18 years of age or older. **Please submit a copy of your current Secure and Verifiable Document(s) such as driver's license, passport, or document as indicated on the Board's website.**
- I am not a United States citizen, but I am a legal permanent resident of the United States 18 years of age or older, or I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older with an alien number issued by the Department of Homeland Security or other federal immigration agency. **Please submit a copy of your current immigration document(s) which includes either your Alien number or your I-94 number and, if needed, SEVIS number.**

In making the above attestation, I understand that any failure to make full and accurate disclosures may result in disciplinary action by the Board for which I am applying for licensure and/or criminal prosecution.

Signature of Applicant

Date

Personally appeared before me, the undersigned official authorized to administer oaths, comes _____ who deposes and swears that he/she is the person who executed this affidavit
(Applicant's Printed Name)
for a professional license application in the State of Georgia; and that all of the statements herein contained are true to the best of his/her knowledge and belief.

Sworn to and subscribed before me this ____ day of _____, 20____.

NOTARY PUBLIC

My commission expires:

(Notary Seal)