

Tennessee Secretary of State  
Tre Hargett



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

August 15, 2023

CARLA BEALS  
PO BOX 41055  
NASHVILLE, TN 37204 USA

**RE:** Registration to Solicit Funds for Charitable Purposes

Organization Name: DAVIDSON COUNTY MASTER GARDENERS ASSOCIATION  
CO Number: CO42634  
Renewal Date: 06/30/2024

Dear CARLA BEALS :

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  
2023124297

## 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: CO42634  
Filed: 08/14/2023 09:20 AM  
Tre Hargett  
Secretary of State

### Organization Information

**Legal Name of the Charitable Organization:** DAVIDSON COUNTY MASTER GARDENERS ASSOCIATION

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

**FEIN:** 05-0607959

**Initial Registration Date:** 02/23/2022

**Renewal Date:** 06/30/2023

**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:** 01/01/1986

**Country:** USA

**City/State:** NASHVILLE, TN

**County:** Davidson

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

☒ Yes ☐ No

**Amended Principal Office Address**

5200 EATONS CREEK RD  
NASHVILLE, TN 37218, USA

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

☒ Yes ☐ No

**Amended Mailing Office Address**

PO BOX 41055  
NASHVILLE, TN 37204, USA

**Contact Information for the Charitable Organization**

**Contact Name:** CARLA BEALS

**Telephone Number:** (615) 289-5887

**Email:** treasurer@mgofdc.org

**Website:** <http://www.mgofdc.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**

Z - Unknown, Unclassifiable

**The charitable purpose of the organization**

Provide research-based education and information in residential/consumer horticulture environmental stewardship practices in support of Tennessee Extension Master Gardener (TEMG) programs.

---

**Tax & Financial Information**

---

**Has your tax exempt 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-N (ePostcard)

**Gross Revenue**

Direct and Indirect Public Contributions	\$ 5,500.00
Government Grants	\$ 0.00
Special Events and Activities	\$ 250.00
Membership Dues	\$ 4,000.00
Other Revenue	\$ 250.00
<b>Total Revenue</b>	<b>\$ 10,000.00</b>

**Expenses**

Total Program Expenses	\$ 3,750.00
Management and General Expenses	\$ 5,100.00
Fundraising Expenses	\$ 0.00
Other Expenses	\$ 1,150.00
<b>Total Expenses</b>	<b>\$ 10,000.00</b>

<b>Excess/Deficit For the Year (Total Revenue - Total Expenses)</b>	<b>\$ 0.00</b>
---	----------------

---

**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")**

CARLA BEALS  
5200 EATONS CREEK RD  
NASHVILLE, TN 37218, USA  
Title(s): Treasurer, Custodian of Contributions

JOCAROL COHEN  
5200 EATONS CREEK RD  
NASHVILLE, TN 37218, USA  
Title(s): President, 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:** Carla Beals

**Date:** 08/11/2023

**Title:** Treasurer

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:** JoCarol Cohen

**Date:** 08/14/2023

**Title:** President