



California Garden Clubs Inc.  
CGCI Group Tax Exemption Program  
Renewal form -Fiscal Year July 1, 2017-June 30, 2018

This renewal form, required documentation and payment are **due by February 1, 2017**

**Club or District Name:** \_\_\_\_\_

If club list district \_\_\_\_\_

\_\_\_\_\_ We elect **TO BE INCLUDED** in the California Garden Clubs Inc. Group Tax Exemption Program for the Fiscal Year July 1, **2017**-June 30, **2018**.  
(If selecting this option, please complete questions 1 through 8.)

**OR**

\_\_\_\_\_ We elect **TO NO LONGER BE INCLUDED** in the California Garden Clubs Inc. Group Tax Exemption Program.  
(If selecting this option, please complete item 1, and then jump to item 7, sign this form, and return it to the address listed in item 8.)

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1. Our IRS Employer Identification Number (EIN) is: \_\_\_\_\_ - \_\_\_\_\_

Our California Franchise Tax Board Entity/Organization Number is: \_\_\_\_\_

**2. Point of Contact Information.**

If the **organization** does not have a permanent address, the address of the current **president or director** should be used.

President or Director's Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

The above address is \_\_\_\_\_ Organization address \_\_\_\_\_ President/Director address

Telephone number \_\_\_\_\_

Email \_\_\_\_\_

**3. Organization Activity.**

Please affirm the following statements by checking the boxes:

\_\_\_\_\_ The major portion of our **organization's** activities in the past year has been to pursue nonprofit, educational purposes as stated in the Articles of Affiliation.

\_\_\_\_\_ Attached is a list and description of the **actual activities** for the most recently completed fiscal year (July 1, 2015-June 30, 2016) which ended **June 30, 2016** of our club or district

NOTE: Please do not copy the provisions of your bylaws. Instead, follow the format of the "Sample Activities Report" included in the renewal packet mailing.

**4. As the authorized representative for this member of the CGCI Group Tax Exemption Program, I affirm that our CGCI CLUB or DISTRICT understands that:**

a. It is relieved from having to file IRS Form 1023, *Application for Recognition of Exemption Under Section 501(c)(3) of the IRC*, and Form 1024 *Application for Recognition of Exemption Under Section 501(a)*.

b. It is subject to the general supervision of California Garden Clubs Inc. as outlined in our Articles of Affiliation.

c. It is required to submit a financial report for its most recently ended fiscal year to CGCI with this renewal form.

d. It is responsible for its own tax return filings with the IRS and CA Franchise Tax Board (FTB) and any other that may be required. California Garden Clubs Inc. does not file group tax returns.

\_\_\_\_\_ Yes, I affirm this.

**5. Financial Information.**

\_\_\_\_\_ Attached is the financial report showing actual income and expense for our latest fiscal year (July 1, 2015-June 30, 2016) that ended June 30, 2016. (Please DO NOT send budget or projections.)

Please check the box that applies, and fill in the dates the forms were filed:

\_\_\_\_\_ Our gross receipts were equal to or less than \$50,000.

IRS Form 990-N was filed \_\_\_\_\_ (date required)

CA FTB Form 199-N was filed \_\_\_\_\_ (date required)

\_\_\_\_\_ Our gross receipts were more than \$50,000.

IRS Form 990 or 990-EZ was filed \_\_\_\_\_ (date required)

CA FTB Form 199 was filed \_\_\_\_\_ (date required)

**6. Our CLUB or DISTRICT is NOT a private foundation.**

(Note: A determination by the IRS that your club or district is a private foundation will jeopardize your ability to be included in the CGCI Group Tax Exemption Program.)

\_\_\_\_\_ Yes, I affirm that our organization is NOT a private foundation

\_\_\_\_\_ No, our organization is a private foundation

**7. Signature: I attest that to the best of my knowledge, the above information is correct.**

This form must be signed by the president, director or treasurer of the CGCI Group Tax Exemption Program member organization.

Signature: \_\_\_\_\_

Print name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

**8. Submit this completed renewal form with related documentation and payment:**

Attach the \_\_\_\_\_ **ACTIVITIES REPORT** as stated in item 3 above

\_\_\_\_\_ **FINANCIAL REPORT** as stated in item 5 above

\_\_\_\_\_ **NONREFUNDABLE RENEWAL FEE**--a check for \$15.00, payable to CGCI

**Mail to:** Krystal Migliore, GTEP Chairman  
CGCI Group Tax Exemption Program  
P.O. Box 1414, Gridley 95948-1414