

Form **990**Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022Open to Public
Inspection**A For the 2022 calendar year, or tax year beginning , and ending****B Check if applicable:**

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization

COV INC

Doing business as

CODE OF VETS

Number and street (or P.O. box if mail is not delivered to street address)

4183 FRANKLIN RD STE B-1 #220

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

MURFREESBORO

TN 37128

D Employer identification number

32-0582177

E Telephone number

615-592-5105

G Gross receipts \$

1,142,415

F Name and address of principal officer:

GRETCHEN SMITH

4183 FRANKLIN RD STE B-1 #220

MURFREESBORO

TN 37128

H(a) Is this a group return for subordinates? ☐ Yes ☒ No**H(b) Are all subordinates included?** ☐ Yes ☐ No

If "No," attach a list. See instructions

I Tax-exempt status:☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J Website:**

WWW.CODEOFVETS.COM

H(c) Group exemption number**K Form of organization:**☒ Corporation ☐ Trust ☐ Association ☐ Other**L Year of formation:**

2018

M State of legal domicile:

TN

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities:		
	COV INC DISBURSES FUNDS TO VETERANS IN NEED WHO HAVE BEEN HONORABLY DISCHARGED FROM MILITARY SERVICE AND THEIR FAMILIES WHO ARE IN NEED, CRISIS, OR DISTRESS.		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	8	
	4	6	
	5	0	
	6	5	
Revenue	7a	18,485	
	7b	13,349	
	8	Contributions and grants (Part VIII, line 1h)	
	9	Program service revenue (Part VIII, line 2g)	
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	
Expenses	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
	14	Benefits paid to or for members (Part IX, column (A), line 4)	
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	
	b	Total fundraising expenses (Part IX, column (D), line 25)	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	
	19	Revenue less expenses. Subtract line 18 from line 12	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	
	21	Total liabilities (Part X, line 26)	
	22	Net assets or fund balances. Subtract line 21 from line 20	
	Beginning of Current Year		End of Year

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign
Here

Signature of officer

Date

GRETCHEN SMITH

FOUNDER/DIRECTOR

Type or print name and title

Paid

Preparer
Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if PTIN

TYSON JONES, CPA

TYSON JONES, CPA

10/05/23

self-employed

P01809536

Firm's name

GRANNIS & ASSOCIATES, P.C.

Firm's EIN

20-0188015

Firm's address

515 W BURTON ST
MURFREESBORO, TN 37130-3549

Phone no.

615-895-1040

May the IRS discuss this return with the preparer shown above? See instructions

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2022)

DAA