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Department of the Treasury

FOSITIVATION BY AL

SCANNED SEP 1 5 2016

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2013

OMB No 1545-1150

▶ Do not enter Social Security numbers on this form as it may be made public.

Open to Public Inspection

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990. Internal Revenue Service , 20 13 A For the 2013 calendar year, or tax year beginning January 1 2013, and ending December 31 C Name of organization D Employer identification number B Check if applicable Address change The Mississippi Blues Foundation 20-5453462 Room/suite Name change Number and street (or P O box, if mail is not delivered to street address) E Telephone number Initial return c/o Robert Arentson, One Eastover Center, 100 Vision Drive 601-351-8916 Terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Number ▶ Application pending Jackson, Mississippi 39211 ✓ Cash Accrual Other (specify) H Check ► ☐ if the organization is not G Accounting Method Website: ▶ required to attach Schedule B J Tax-exempt status (check only one) — 🗸 501(c)(3) 🔲 501(c) (◄ (insert no.) ☐ 4947(a)(1) or ☐ 527 (Form 990, 990-EZ, or 990-PF) K Form of organization

✓ Corporation Other ☐ Trust ☐ Association L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ 128,875 Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule Q to respond to any question in this Part I Contributions, gifts, grants, and similar amounts received 1 113,971 2 Program service revenue including government fees and contracts 2 3 3 Membership dues and assessments 4 4 5a Gross amount from sale of assets other than inventory 5a Less: cost or other basis and sales expenses 5b b Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5с C Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than 6a Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . 6b 6c Less: direct expenses from gaming and fundraising events Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 7a Gross sales of inventory, less returns and allowances . 7a 7с Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) C Other revenue (describe in Schedule Q) 8 8 14,904 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 128,875 10 Grants and similar amounts paid (list in Schedule O) 10 24,665 11 Benefits paid to or for members . 11 12 12 Salaries, other compensation, and employee benefits . . . Professional fees and other payments to independent contractor 13 13 14 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 15 534 16 16 Other expenses (describe in Schedule O) . 17 17 Total expenses. Add lines 10 through 16 . 25,199 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 103,676 Assets 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 32,080 Other changes in net assets or fund balances (explain in Schedule O) . . . 20 20 Ř Net assets or fund balances at end of year. Combine lines 18 through 20 21 135,756 Form 990-EZ (2013) For Paperwork Reduction Act Notice, see the separate instructions. Cat No 10642I

Pa	t.II Balance Sheets (see the instruction	ons for Part II)				
	Check if the organization used Sche	edule O to respond to a	any question in this	Part II		<u> </u>
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments			32,080		135,756
23	Land and buildings				23	0
24	Other assets (describe in Schedule O) .				24	
25	Total assets				25	
26	Total liabilities (describe in Schedule Q)	<u>.</u>			26	
27	Net assets or fund balances (line 27 of co			32,080	27	135,756
Par		•		•		Expenses
1A/L = 4	Check if the organization used Sche		iny question in this	Part III 🔽		quired for section
	t is the organization's primary exempt purpose					(c)(3) and 501(c)(4) anizations and section
Desc	ribe the organization's program service acco	mplishments for each of	of its three largest i	program services,	494	7(a)(1) trusts, optional
	neasured by expenses. In a clear and conci- ons benefited, and other relevant information f		ie services provide	d, the number of	for o	others)
28	· · · · · · · · · · · · · · · · · · ·					
20					ļ	
						1
	(Grants \$) If this am	ount includes foreign gr	ante chack here	N	28a	0.665
29	(Crains w	ount includes foreign gr	artis, cricck fiere .		200	9,665
20					1	
	(Grants \$) If this amo	ount includes foreign gr	ants check here	▶ 🖺	29a	5,000
30		<u> </u>				0,000
	(Grants \$) If this amo	ount includes foreign gr	ants, check here .	▶ 🗌	30a	4,000
31	Other program services (describe in Schedule					
	(Grants \$) If this amo	ount includes foreign gr	ants, check here .	▶ 🗆 .	31a	6,000
32	Total program service expenses (add lines	28a through 31a)		🕨	32	24,665
Part	List of Officers, Directors, Trustees, and	Key Employees (list eac	h one even if not com	pensated-see the ir	nstru	ctions for Part IV)
	Check if the organization used Sche	dule O to respond to a			<u>., .</u>	🗸
		(b) Average	(c) Reportable compensation	(d) Health benefits, contributions to employ	ee (e)	Estimated amount of
	(a) Name and title	hours per week devoted to position	(Forms W-2/1099-MISC	benefit plans, and	6	other compensation
			(if not paid, enter -0-)	deferred compensation	<u> </u>	
Luthe	r Brown				-	
Direc		1)	0	0
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	man and Director	5		,	اه	0
	Horhn		<u> </u>		1	
	hairman and Director	·l ₀		ا	0	0
	nued on Schedule O	<u></u>	 	<u> </u>	†	
.201111					1	

Part				
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part	Yes	✓ No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	100	1
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		✓
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		1
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
ь 38а	Did the organization file Form 1120-POL for this year?	37b 38a		√
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b	30a	 -	
39	Section 501(c)(7) organizations. Enter	1		
а	Initiation fees and capital contributions included on line 9	_	ļ,	الأعطية
b	Gross receipts, included on line 9, for public use of club facilities	-		- ;
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶ 2. **Indiana** Section 4912 **Indiana** Section 4915 Section			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	.~	√
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	manufacture a section	<u>/</u>
41	List the states with which a copy of this return is filed ► Mississippi			
42a	The organization of books are in said of	601-35 392		6
b	Located at ▶ One Eastover Center, 100 Vision Drive, Suite 400, Jackson, Mississippi ZIP + 4 ▶ At any time during the calendar year, did the organization have an interest in or a signature or other authority over	352	Yes	No
~	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	155	√
	If "Yes," enter the name of the foreign country: ▶		,	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside the U S.?	42c	<u></u>	✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year . 43		.	▶ ∐
440	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be		Yes	No
44a	completed instead of Form 990-EZ	44a		1
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		√
C	Did the organization receive any payments for indoor tanning services during the year?	44c		✓
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		1
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	440 45a		1
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		/

D	/
Page	•

Form **990-EZ** (2013)

46	Did the organization engage, directly or it to candidates for public office? If "Yes,"	ndirectly, in political c complete Schedule C	campaign activities on	behalf of or in	n opposition	46	
Part		s only				ables for li	nes
	Check if the organization used Sc	hedule Q to respond	d to any question in t	his Part VI	· · · · · · ·	<u> </u>	. 🗆
47	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Par	activities or have a	section 501(h) electio	n in effect du	ring the tax	Yes	s No
48 49a b 50	Is the organization a school as described in Did the organization make any transfers the state of the organization as second the state of the organization is semployees) who each received more than	o an exempt non-cha ection 527 organizations five highest compenses	aritable related organizon?	zation? ner than office	rs, directors		
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health be contributions to benefit plans, an compensa	employee (e) d deferred	Estimated amount of their compensions	
None							
	 				— 		
··							
	Total number of other employees paid ov	er \$100 000	▶ None	L			
51	Complete this table for the organization	's five highest compe	ensated independent		vho each re	ceived mor	e than
	\$100,000 of compensation from the orga	nization If there is no	one, enter "None "				
	(a) Name and business address of each independ	dent contractor	(b) Type of serv	ice	(c) Cor	mpensation	
None							
			-				
			<u> </u>				
	Total number of other independent contra Did the organization complete Schedule A	-		and 4047(a)(1	None		
52	nonexempt charitable trusts must attach					✓ Yes	No
Under p	enalties of perjury, I declare that I have examined this	return, including accompan	ying sahedules and stateme	ents, and to the be	st of my knowl	edge and belie	f, it is
true, cor	rect, and complete Declaration of preparer (other than	Porficer) is based on all into	ormanon of which preparer h	as any knowledge	, B2	4 15	2011
Sign Here	Signargre of officer O G T Type or print name and title	Arentson	Mr.	Se Co	etar.	~~~~ 7	
 Paid Prepa	Print/Type preparer's name	Preparer's signature	Da	[Check if self-employed	PTIN	
Use (l = .			Firm's	EIN ▶		
	Firm's address ▶	r shown about See	instructions.	Phone	no		No
iviay li	ie IRS discuss this return with the prepare	i allowii above (aee i				∐ Yes ∐	No

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

2013

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name o	f the organization			<u> </u>				Employer i	dentificatio	n number
	ssissippi Blues Fo							20-5453462		
Part			rity Status (All orga						nstruction	ons.
	<u></u>		ition because it is: (Fo		_		-		_	
			hes, or association of			ed in sec	tion 170	(b)(1)(A)(i	i).	
	•	•	spital service organiza						- 4	
4	_	-	on operated in conjun	ction with	n a hospit	al descri	bed in se	ction 17	U(b)(1)(A)	(iii). Enter the
_		ne, city, and state								;;
	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)									
	An organizatio	on that normally	nment or government receives a substantia	al part of					nit or fror	n the general public
8	_		(A)(vi). (Complete Par n section 170(b)(1)(A	•	nplete Pa	art II)				
9	_ _		receives: (1) more that				m contr	butions.	members	ship fees, and gross
	-	•	to its exempt funct							
	•		nt income and unrel		-					
	acquired by th	e organization a	fter June 30, 1975. Se	ee sectio	n 509(a)(2). (Comp	olete Par	t III.)		•
10	An organizatio	n organized and	operated exclusively	to test fo	or public s	safety. Se	e sectio	n 509(a)(4).	
11 [-	_	d operated exclusive							or to carry out the
			licly supported organ							
	509(a)(3). Che	ck the box that of	describes the type of	supportin	ig organiz	zation and	d comple	te lines 1	1e through	gh 11h.
	a 🗌 Typel	b 🗌 Type	II c ☐ Type II	I-Functio	nally inte	grated	d 🗌 🖰	Type III-N	Non-funct	tionally integrated
e [🗌 By checking th	his box, I certify	that the organization	is not co	ntrolled d	lirectly or	indirectl	y by one	or more	disqualified persons
		_	rs and other than one	e or more	publicly	supporte	ed organi	izations d	described	i in section 509(a)(1)
	or section 509									
f	-		ı written determinatio			that it is	а Туре	I, Type	II, or Typ	pe III supporting
	•					• •		•		
g	-		ne organization accep	pted any	gift or co	ontributio	n from a	ny of the)	
	following person									
	• •	-	ndirectly controls, eith		-	ner with	persons	describe	d in (ii) ai	
		-	ody of the supported	_			• •			11g(i)
		· · · · · · · · · · · · · · · · · · ·	on described in (i) abo				•		•	11g(ii)
.		•	a person described in			•	•			11g(m)
<u>h</u>			on about the support		rganization	63 D.d.				() A
(1) 14	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9		sted in your		ization in	organizat	s the tion in col	(vii) Amount of monetary support
			above or IRC section	governing	document?	col (i)	of your oort?		zed in the S?	
			(see instructions))	Yes	No	Yes	No	Yes	No	1
(A)							-			-
<u></u>										
(B)										
(C)	-									
(D)										
(E)										

Part II
Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Tax revenues levied for the organization's benefit and either paid to or expended on its behalf or expended or expende		on A. Public Support	(=) 2000	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
membership fees received. (Do not include any "unusual grants.")			(a) 2009	(6) 2010	(0) 2011	(u) 2012	(e) 2013	(i) Total
Include any "unusual grants.") Tax revenues levided for the organization's benefit and either paid to or expended on its behalf or or expended on its behalf or expended on the behalf of the organization without charge. 4 Total. Add lines 1 through 3. 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). 6 Public support. Subtract line 5 from line 4. 8 Gross income from interest, dividends, payments received on securities loans, rents, royates and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 10 Gross receipts from related activities, etc. (see instructions) 11 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(5) organization, check this box and stop here. 8 Section B. Total support Percentage 14 Public support percentage from 2012 Schedule A, Part II, line 14 15 Public support percentage from 2012 Schedule A, Part II, line 14 16 331/% support test—2012. If the organization did not check a box on line 13, and line 15 is 333/96 or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 10%-facts-and-circumstances test—2013. If the organization meets the "facts-and-circumstances" test. The this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The torganization qualifies as a	1							
2 Tax revenues levied for the organization's benefit and other paid to or expended on its behalf					40.00	40.070	80.075	67.404
organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge	_		0	11,616	13,731	13,272	28,875	67,494
to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 0 11,616 13,731 13,272 28,875 67,494 4 Total. Add lines 1 through 3 0 11,616 13,731 13,272 28,875 67,494 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support Subtract line 5 from line 4. 5 Ection B. Total Support 7 Amounts from line 4 0 11,816 13,731 13,272 28,875 67,494 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	2							
3 The value of services or facilities furnished by a governmental unit to the organization without charge. 4 Total. Add lines 1 through 3. 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, choicum (f). 6 Public support. Subtract line 5 from line 4. 7 Amounts from line 4. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and nome from similar sources 9 Net income from unrelated business activities, whether or not the business activities, whether or not		•	_	_	1			•
furnished by a governmental unit to the organization without charge . 4 Total. Add lines 1 through 3			0	0	0	0	0	
Total. Add lines 1 through 3	3							
4 Total. Add lines 1 through 3. 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). 6 Public support Subtract line 5 from line 4. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. 9 Net income from unrelated business activities, whether or not the business is regularly carried on 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV). 12 Gross receipts from related activities, etc. (see instructions). 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. The organization did not check the box on line 13, and line 14 is 331/3% support test—2013. (line 6, column (f) divided by line 11, column (f)). 17 10% or more, and if the organization qualifies as a publicly supported organization. 18 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization did not check a box on line 13, 16a, 16b, 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Expl			_	_				
The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). 6 Public support. Subtract line 5 from line 4. 8 Caross income from interest, dividends, payments received on securities loans, rents, royaltes and income from similar sources 9 Not income from unrelated business is regularly carried on 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		•	0	0	0	0	00 075	67.404
each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). 6 Public support. Subtract line 5 from line 4. Section B. Total Support 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on . 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV). 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 15 33'n/% support test—2013. If the organization did not check a box on line 13, and line 14 is 33'n/% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 16 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, and line 14 is 10% organization. 17 In the column (f) the organization meets the "facts-and-circumstances" test, check this box and stop here. Everypoint organization in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Everyported organization in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Everyported organization in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Everyported organization in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Everyported organization organization meets the "facts-and-circumstances" test, check this box and stop here.	4	Total. Add lines 1 through 3	0	11,616	13,731	13,272	28,875	67,494
governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). 6 Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total 7. Amounts from line 4. 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	5	•				3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
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Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	174	10% or more and if the organization me	ets the "facts-	and-circumsta	ances" test. ch	eck this box ar	nd stop here. E	xplain in
b 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		Part IV how the organization meets the "	facts-and-circ	umstances" te	st. The organiz	ation qualifies	as a publicly su	upported
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Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see	D	15 is 10% or more and if the organize	ition meets the	a "facts-and-c	ircumstances"	test, check th	nis box and ste	op here.
supported organization		Explain in Part IV how the organization r	neets the "fact	s-and-circums	stances" test 7	The organization	n qualifies as a	publicly
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see								
National Control of the Control of t	18					a, or 17b, chec	k this box and	
	.5						<u>.</u> .	. ▶ 🗆

Part III	Support Sche	dule for O	rganizations	Described in	Section	509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the				1		
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513				l.,		
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities	}					
	furnished by a governmental unit to the				İ		:
	organization without charge						
6	Total. Add lines 1 through 5				ļ		
7a	Amounts included on lines 1, 2, and 3]				
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified					·	
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	·						
С 8	Add lines 7a and 7b	TO THE THE	-: YW/190	r.			
0	line 6.)	*		•			
Section	on B. Total Support	l	1			L	
	dar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	(4) 2000	(47 = 4 = 4			\-/	
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business]				
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or	ļ			ł		
	loss from the sale of capital assets	1					
4.5	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,		[
	and 12.)		la finat	ما المانية المانية	or fifth to	0.0000000000000000000000000000000000000	n 501(a)(2)
14	First five years. If the Form 990 is for the organization, check this box and stop he						
Saati	on C. Computation of Public Suppor			· · · · · ·	• • • • •		<u>· · · · </u> ⊔
	Public support percentage for 2013 (line			3 column (f)		15	%
15 16	Public support percentage for 2013 (inference) Public support percentage from 2012 Sci		-			16	
	on D. Computation of Investment In			· · · · ·			
17	Investment income percentage for 2013 (y line 13. colui	mn (f))	17	%
18	Investment income percentage from 2012					18	%
19a	331/3% support tests—2013. If the organ						
	17 is not more than 331/3%, check this box						
b	331/3% support tests - 2012. If the organiz	zation did not c	heck a box on	line 14 or line	19a, and line 16	s is more than 3	331/3%, and
	line 18 is not more than 331/23%, check this	box and stop h	nere. The organi	ization qualifies	as a publicly s	upported organ	ization 🕨 🔲
	Drivete foundation If the erganization de	d not chack a	hay on line 14	10a or 10h	shock this how	and see instru	ctions > □

chedule A (Form 990 or 990-EZ) 2013						
Part IV Suppl Part II	emental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and I, line 12. Also complete this part for any additional information. (See instructions).					
Part II: List of unusu	al grants					
Year 2013						
Name: Anonymous	Donor					
Date of Grant: April	1, 2013					
Amount of Grant \$1	00,000					
Description: Cash						

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection Employer identification number

The Mississippi Blues Foundation	20-5453462
Box B of the headingAmended Return, reason for and description of the amendments.	
While preparing the 2015 990 EZ form, it was discovered that there were several errors on the 2013 990	EZ form which carried over to the
2014 form These errors appear to be the result of a misreading of a financial report The 2013 and 20	14 990 EZ forms are being amended.
The amendments for the 2013 form are as follows:	
Part 1. In Part 1, lines 1, 9, 10, 15, 17, 18, 19 and 21 are being amended. Line 1 is amended to provide to	the correct amount of contributions
received Because of this amendment, Line 9 is being amended to show the correct amount of total re-	venue Line 10 is being amended to
show the correct amount of grants provided Line 15 is amended to include an expenses which had be	een overlooked. Because of these two
amendments, Line 17 is amended to show the correct total expenses. Line 18 is amended to show the	correct excess based on the above
amendments. Line 19 is amended to show the correct fund balance at the beginning of the year. Because	ause of the above amendments, Line 21
is amended to show the correct fund balance at the end of the year.	
Part II. In Part II, Line 22, columns A and B, and Line 27, columns A and B, are amended to show the co	prrect fund balances at the beginning
and at the end of 2013.	
Part III: In Part III Line 28 is amended to correct the amount of grants provided by the Foundation. Be	cause of this amendment, Line 32 IS
amended to show the correct total program expenses.	
Schedule A: In Schedule A, Part II contains some amendments. In Sections A and B, columns e and f	are amended Column e is amended to
show the correct amount of contributions received. Because of the amendment to column e, column f	is amended to show the correct totals.
End of amendments. The following are the responses of the Foundation to various parts of form 990	·
Part I, Line 8: This is revenue received from the Mississippi State Tax Commission for the sale of vanid	y "Blues Trail" car tags
Part I, Line 10: The following grants for medical services were made to these individuals unrelated to t	he Grantor:
Otis Cooper \$1,000 Eddie Willis \$3,665 James Ford \$1,000 Jerry Fair \$1,000	
James Grey \$1,000 Jewel Thomas \$1,000 Charlotte Shenault-Coleman \$1,000	
Total: \$9,665	
The following grant was made to the Mississippi Development Authority, 501 North West Street, Jackson	on, MS 39201, unrelated to the Grantor,
for sponsorship of a Mississippi information and education booth at the Chicago Blues Festival: \$5,000	D. The following grant was made to the
Mississippi Arts Commission, 501 North West Street, Suite 1101A, Jackson, MS 39201, unrelated to the	Grantor, for educational purposes for
use of the Mississippi Blues Trail curriculum in public schools: \$4,000. The following grant was made	to the Mississippi Blues Commission

Cat No 51056K

Schedule O (Form 990 or 990-EZ) (2013)

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.