

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



| | | | 41 | W A | | |
|---|---|--|---|-----------------------|--------------------|--------------------|
| Part | | | | | <u> </u> | |
| 1a | If the foundation has received a ruling | | | | | |
| | foundation, and the ruling is effective for 2013, enter the date of the ruling | | | | | |
| b | Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j) | | | | | |
| 2a | Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | | Prior 3 years | | (e) Total |
| | investment return from Part X for | (a) 2013 | (ь) 2012 | (c) 2011 | (d) 2010 | |
| | each year listed | | | | | 0.00 |
| b | 85% of line 2a | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| C | Qualifying distributions from Part XII, | | | | | |
| | line 4 for each year listed | 1,105,908 | 681,961 | 392,804 | 197,808 | 2,378,481.00 |
| d | Amounts included in line 2c not used directly | | | | <u></u> | |
| | for active conduct of exempt activities | | 1 | 1 | | 0.00 |
| е | Qualifying distributions made directly | | | | | |
| | for active conduct of exempt activities. | | | | | |
| | Subtract line 2d from line 2c | 1,105,908.00 | 681,961.00 | 392,804.00 | 197,808.00 | 2,378,481.00 |
| 3 | Complete 3a, b, or c for the | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 77777 | | | |
| • | alternative test relied upon: | | | | | |
| а | "Assets" alternative test - enter: | | | | | |
| | (1) Value of all assets | | | | | 0.00 |
| | (2) Value of assets qualifying under | | | | | |
| | section 4942(j)(3)(B)(i) | | | | | 0.00 |
| b | "Endowment" alternative test-enter 2/3 | | | | | |
| | of minimum investment return shown in Part X, line 6 for each year listed | | | | - | 0.00 |
| С | "Support" alternative test—enter: | | | | | |
| • | · · | | | ļ | | |
| | (1) Total support other than gross investment income (interest. | | | | | |
| | dividends, rents, payments on | | | i | | |
| | securities loans (section | | 1 | i | | 0.00 |
| | 512(a)(5)), or royalties) (2) Support from general public | | | | | 0.00 |
| | and 5 or more exempt | | | | | |
| | organizations as provided in | 1 | ĺ | - | | 0.00 |
| | section 4942(j)(3)(B)(iii) | | | | | 0.00 |
| | an exempt organization | , | | | | 0.00 |
| | ` - | | | | | 0.00 |
| Dort | (4) Gross investment income | n (Complete thi | e part only if th | e foundation ha | d \$5,000 or me | |
| Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.) | | | | | | |
| 1 | Information Regarding Foundation I | | <u>>.) </u> | | | |
| - | List any managers of the foundation v | | ad mara than 20% | of the total centril | butions received | ou the foundation |
| а | before the close of any tax year (but o | | | | | by the louridation |
| | before the close of any tax year (but o | ing it they have out | inibated more tha | 40,000, (000 30 | 011011001(0)(2).) | |
| h | List any managers of the foundation | who own 10% or | more of the stock | of a corporation | for an equally lar | ge portion of the |
| U | ownership of a partrarship or other en | | | | | |
| | ownership of a part stormp of other of | and the state of t | Januarion nas a n | or grouter inter | | ECEIVED |
| 2 | Information Regarding Contribution | Grant Gift Loan | Scholarship et | Programe | ω | |
| 2 | Check here ► 🖾 if the foundation of | , Grant, Girt, Luar | , octional strip, etc | otod obaritable o | هر قامین | N.O. 2-2015-10 |
| | unsolicited requests for funds. If the fo | | | | | |
| | other conditions, complete items 2a, b | | into, granto, etc. (o | ee mandendriaj to | | |
| | The name, address, and telephone nu | | lross of the person | to whom applicat | | DEN, UT |
| d | The hame, address, and telephone hul | mber or e-mail add | iress or the herson | i to whom applical | นงแร อแบนเน มษาสต | lui coocu. |
| | | | | | | |
| | The form in which applications should be submitted and information and materials they should include: | | | | | |
| ט | The form in which applications should | DE SUDMINITEU BING | monnation and M | ateriais triey Siloui | a moidue. | |
| | | | | | | |
| | Any submission deadlines: | | | · | | |
| C | Any submission deadlines: | | | | | |
| | And restrictions as the test as | anda anala tri | goographical area | an aboritable field | to kindo of inciti | utions or other |
| | Any restrictions or limitations on awa | ards, such as by | geographical area | as, chantable field | as, kinus of insti | utions, or other |
| | factors: | | | | | |

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DELTA REGIONAL FOUNDATION 804 OAKWOOD DR CLINTON MS 39056



DECLARATION

18834

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Signature of Officer or Trustee

PRESIDENT

Title