## Short Form $\mathcal{Q} \bigcirc \mathcal{Q}$ Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2020

Department of the Treasury

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/Form990EZ for instructions and the latest information.

**Open to Public** Inspection

<u> </u>	For the	2020 calend	ar year, or tax year beginning January 1 , 2020, and ending Dec	embe	r 31 <b>, 20</b> 20
	Check if ap				
$\Box$	Address c	•	Mississippi Peanut Growers Association	-	
Ħ	Name cha	-		ohone r	number
	Initial retui	-	Box 284	60	01-606-3547
	Final return	n/terminated	<u> </u>		<del></del>
닏	Amended		/\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	•	•
ᆜ	Application				
		ing Method			
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_		<del> </del>	561 611 611 61 61 61 61 61 61 61 61 61 61	90, 99	0-EZ, 01 930-PF).
K	Form of	organization	Corporation Trust Association Other		
			7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets \$500,000 or more, file Form 990 instead of Form 990-EZ		
				otion.	o for Dort I\ [5]
L	art I		e, Expenses, and Changes in Net Assets or Fund Balances (see the instru		
_			the organization used Schedule O to respond to any question in this Part I		
			ons, gifts, grants, and similar amounts received	_	68,533
2	- 1	_	ervice revenue including government fees and contracts		65,000
9			up dues and assessments	—	1,885
3	] 4	Investmen	· · · · · · · · · · · · · · · · · · ·	4	
	5a		ount from sale of assets other than inventory 5a	4	
	b		or other basis and sales expenses	<b>↓</b>	
	C		ss) from sale of assets other than inventory (subtract line 5b from line 5a)	5c	
	6-		nd fundraising events:	}	
_	a		ome from gaming (attach Schedule G if greater than		•
ž	, `	•			,
Revenue	b		<u> </u>		` <b>,</b>
æ	1		raising events reported on line 1) (attach Schedule G if the		
	1		ch gross income and contributions exceeds \$15,000) 6b	1	
	C		ct expenses from gaming and fundraising events 6c	↓.	
	d		e or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract	ļ	
		line 6c)		6d	<del></del>
	7a	Gross sale	s of inventory, less returns and allowances	4	
	b		of goods sold	<b>∤</b> ——	
	С		fit or (loss) from sales of inventory (subtract line 7b from line 7a)	-	
	8		nue (describe in Schedule 0)		
	9		enue. Add lines 1, 2, 3, 4, 50, 60, 70, and 6	<del></del>	135,418
	10		d similar amounts paid (list in Schedule O) တ္က ု		33,933
	11	•	aid to or for members $\cdots \cdots \cdots \cdots \bowtie \cdots \bowtie \bowtie MAY 17 2021 \cdots \bowtie \cdots$	$\overline{}$	19,829
es	12		ther compensation, and employee benefits 🛛	Room/surte   E Telephone number 601-606-3547   F Group Exemption Number   ©	41,776
Expenses	13	Profession	al tage and other nayments to independent contractors this		14,802
Š	. 14		y, rent, utilities, and maintenance		2,580
ú	15		ublications, postage, and shipping		3,112
	16		enses (describe in Schedule O) 🔞		5,250
_	17	Total expe	enses. Add lines 10 through 16	-	121,282
Ś	18		(deficit) for the year (subtract line 17 from line 9)	18	14,136
se	19	Net assets	s or fund balances at beginning of year (from line 27, column (A)) (must agree with		
   Net Assets			ar figure reported on prior year's return)	19	52,194
<u>e</u>	20		nges in net assets or fund balances (explain in Schedule O)		
Z	21	Net assets	or fund balances at end of year. Combine lines 18 through 20	21	66,330

Page	2

A Land and buildings.  4 Other assets (describe in Schedule O)  5 Total assets.  5 Total assets.  5 Total assets.  5 Total liabilities (describe in Schedule O)  7 Net assets or fund balances (line 27 of column (B) must agree with line 21)  5 Check if the organization used Schedule O to respond to any question in this Part III  Check if the organization used Schedule O to respond to any question in this Part III  Check if the organization is primary exempt purpose?  Enhancing Production, Promotion & Utilitization of Peanuts scribe the organization's primary exempt purpose?  Enhancing Production, Promotion & Utilitization of Peanuts scribe the organization's primary exempt purpose?  Enhancing Production, Promotion & Utilitization of Peanuts scribe the organization's program service accomplishments for each of its three largest program services and the variety of the services provided, the number of resons benefited, and other relevant information for each program title.  8 15th Annual Meeting and Trade Show(2 days) for Growers to obtain the latest research, agronomic, and market information from presentations by industry, university researchers, and the National Peanut Board. The two day event was attended by some 175 growers, university educators, crop consultants, and peanut industry staff.  9 A multi-media promotion was carried out during a 30 day time period using both radio and social media to promote peanut introduction to infants and health benefit of eating peanuts. The promotion was done in the State(North half) on all types of radio stations in addition to a focus on social media to health concerned moms (Grants \$ ) If this amount includes foreign grants, check here	Part II	Balance Sheets (s		hadula C	) to respond to a	ny question in this	Dart II		
2 Cash, savings, and investments		Check if the organize	zation used Sch	Heddie C	r to respond to a	in quodirant int inte	raitii	• •	<u>_ • • • •   </u>
Land and buildings   24   32   4   4   4   4   4   4   4   4   4							(A) Beginning of year		(B) End of year
30 Land and buildings	22 Ca	ash, savings, and invest	ments				52,394	22	66,330
4 Other assets (describe in Schedule O) 5 Total assets 5 Total flabilities (describe in Schedule O) 5 Total flabilities (describe in Schedule O) 5 Total flabilities (describe in Schedule O) 5 Net assets or fund balances (line 27 of column (B) must agree with line 21) 5 Statement of Program Service Accomplishments (see the instructions for Part III) 5 Check if the organization used Schedule O to respond to any question in this Part III Check if the organization yearn yearn proposes Tenhancing Production. Promotion & Utilization of Penauls Scribe the organization's prignary exempt purposes? Enhancing Production. Promotion & Utilization of Penauls Scribe the organization's prignary exempt purposes? Enhancing Production. Promotion & Utilization of Penauls Scribe the organization's program service accomplishments for each program tribe.  1 sit is the organization's prignary exempt purposes? Enhancing Production. Promotion & Utilization of Penauls Scribe the organization's program service accomplishments for each program tribe.  3 than a state of the program service accomplishments for each organization services provided, the number of scribe states and concise manner. describe the services provided, the number of scribe scribe the services provided, the number of scribe scribe information from presentations by industry, university researchers and the National Penaul Board. The two day event was attended by some 175 growers, university educators, crop consultants, and penaul tributes that the scribe of penauls and the state of the scribe scribe and the scribe scribe scribe scribes and the state of the scribes organization and scribes and the scribes of radio stations in addition to a focus on social media to health concerned moms (Grants \$ ) if this amount includes foreign grants, check here.		•						23	* ******
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Did the organization (Note the Schedule A and personal benefit contract statement requirements in the instructions for Parl V.) Check if the organization used Schedule O. to respond to any question in this Parl V.    33		,	3			
instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V.    Yes   No.			<u> </u>		Page 3	<u> </u>
So 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.  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. Socie instructions  15a 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, 63 and 73, among others)?  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  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  b Ut the organization in dergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete Schedule C. Part III.  35b Did the organization berow from, or make any loans to, any officer, director, frustee, or key employee, or were any such loans made in a prory year and still outstanding at the end of the tax year covered by this return?  b If "Yes," complete Schedule L, Part II, and enter the total amount involved  b If "Yes," complete Schedule L, Part II, and enter the total amount involved  38b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization during the year unders. Section 4911 P. section 4912 P. section 4913 P. section 4912 P. section 4913 P. section 4913 P. section 4914 P. section 4914 P. section 4915 P. section 4916 P. se	Part	· · · · · · · · · · · · · · · · · · ·			_	
33	<del></del> ,	instructions for Part V.) Check if the organization used Schedule O to respond to any question in the	is Part	·		-
44 Were any significant changes made to the organizang or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organizations's name. Otherwise, explain the change on Schedule O. See instructions  35a Did the organization has 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)?  5 bil "Yes" to line Sa, has the organization filed a Form 990-T for the yea? If "Yes," provide an explanation in Schedule O or Was the organization of the control of 10(4), 601(6)(6), 601(6)(6), organization subject to section 603(6)(4), 601(6)(6), 601(6)(6), organization subject to section 603(6)(6), 601(6)(6), organization of section 603(6)(6), organization of section 603(6)(6), organization files application part of section 601(6)(6), 601(6)(6), 601(6)(6), organization section 601(6), organization files application files applications. Files aromation files application files files application files files application files application files ap	33			Yes	No	-
1936 Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on line 2, 6a, and 7a, among others)?  1936 Did the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 603(c) notice, reporting, and proxy tax requirements during the year? If "No." provide an explanation in Schedule O was the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete splicable parts of Schedule N and the instructions ► 37a	34	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the				- 😰
b if "Yes" to line 35a, has the organization fied a Form 990-T for the year? If "No." provide an explanation in Schedule O  Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) not.  36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete splicable parts of Schedule N  37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a    37b Did the organization beform 1120-PCD for this year?  37c Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a    37a Did the organization beform 1120-PCD for this year?  37b Did the organization beform of the term of the tax year covered by this return?  37c Did the organization beform of the third of the tax year covered by this return?  37b If "Yes," complete Schedule L, Part II, and enter the total amount involved 38a    38c Section 501(c)(3) organizations. Enter:  38a Interest of the tax year covered by this return?  38b Interest of the tax year covered by this return?  38c Interest of the tax year covered by this return?  38c Interest of the tax year covered by this return?  38b Interest of the tax year covered by this return?  38c Interest of the tax year covered by this return?  38c Interest of the tax year covered by this return?  38c Interest of the tax year covered by this return?  38c Interest of the tax year covered by this return is the tax year that has not been reported on any of its prior forms 990 or 990-E2    40c Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization during the year and year that has not been reported on any of its prior forms 990 or 990-E2    40c Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Enter amount of tax on line 40c reimbursed by the organization sense of the foreign country ▶  38cetion 501(c)(3), 501(c)(4), and 501(c)(2) organization have an interest in or a signature	35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			,,	-
Proporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		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			-
during the year? If "Yes," complete applicable parts of Schedule N  27a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a		reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		~	
b Did the organization file Form 1120-POL for this year?  38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  38b   1		during the year? If "Yes," complete applicable parts of Schedule N			~	<u> </u>
any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  ## Yes," complete Schedule L, Part II, and enter the total amount involved  ## Section 501(c)(7) organizations. Enter:  ## Initiation fees and capital contributions included on line 9  ## Gross receipts, included on line 9 for public use of club facilities  ## Bab    ## Gross receipts, michided on line 9 for public use of club facilities  ## Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:  ## section 4911	b	Did the organization file Form 1120-POL for this year?			~	i Ī
39 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 39a	_	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .			~	0
Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶  b Section 501(c)(3), 501(c)(4), and 501(c)(29) 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  c Section 501(c)(3), 501(c)(4), and 501(c)(29) 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), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization 40c reimbursed by the organization  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  Located at ▶ 141 Timber Lakes Dr., Petal. MS	39	Section 501(c)(7) organizations. Enter:	1			
Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4912 ▶   Section 501(c)(3), 501(c)(4), and 501(c)(29) 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 1  c Section 501(c)(3), 501(c)(4), and 501(c)(29) 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), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization  e 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  List the states with which a copy of this return is filed ▶  Located at ▶ 141 Timber Lakes Dr. Petal, MS  b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country by  See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country ▶  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 year? If "Yes," Form 990 must be completed instead of Form 990-EZ  b Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  c Did the organization receive any payments for indoor tanning services during the year? If "No," provide an explanation in Schedule O  d Hi "Yes" to line	_				1	
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  C Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.  Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization  4 RI 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  Located at ▶ 111 Timber Lakes Dr. Petal, MS  Locate		Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:				
on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.  d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization	b	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year				
40c reimbursed by the organization . ▶ 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    41 List the states with which a copy of this return is filed ▶  42a The organization's books are in care of ▶ Malcolm Broome	С	on organization managers or disqualified persons during the year under sections 4912,				
transaction? If "Yes," complete Form 8886-T  List the states with which a copy of this return is filed ▶  The organization's books are in care of ▶ Malcolm Broome Located at ▶ 141 Timber Lakes Dr., Petal, MS  Located at Pale At Any time during the calendar varidinary or or therefinancial account, or other maniculation or therefinancial accou	d					
The organization's books are in care of ▶ Malcolm Broome  Located at ▶ 141 Timber Lakes Dr., Petal, MS  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country ▶  See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  At any time during the calendar year, did the organization maintain an office outside the United States?  If "Yes," enter the name of the foreign country ▶  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  44a  Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	e	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			~	<u> </u>
Located at ▶ 141 Timber Lakes Dr., Petal, MS  ZiP + 4 ▶ 39465-0284  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account?)  If "Yes," enter the name of the foreign country ▶  See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  C At any time during the calendar year, did the organization maintain an office outside the United States?  If "Yes," enter the name of the foreign country ▶  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  44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ						
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If "Yes," enter the name of the foreign country ►  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		See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and				
and enter the amount of tax-exempt interest received or accrued during the tax year	C		42c			-
Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	43		· · ·	. 1	<b>▶</b> □	-
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	44a			Yes	No	İ
c Did the organization receive any payments for indoor tanning services during the year?	b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be			~	
explanation in Schedule O	C	Did the organization receive any payments for indoor tanning services during the year?	= 44c		-/=	
b 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	d	explanation in Schedule O	44d			
meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			-		~	í
CONTRACTOR	b					

rm 990-E	Z (20	20)						F	Page 4
···								Yes	No
		e organization engage, directly or inc					ı——		
to		ididates for public office? If "Yes," co		, Parti		• • •	. 46		<b>'</b>
art VI	•	Section 501(c)(3) Organizations All section 501(c)(3) organizations 50 and 51. Check if the organization used Sch	must answer que			mplete the	e tables f	or lin	es
	<u>`</u>	Offeck if the organization used Sch	edule O to respond	Tto any question in	rans rait vi		· · · ·	Yes	No
		e organization engage in lobbying a		section 501(h) elect		during the	tax . 47		
8 Is	the	organization a school as described in	section 170(b)(1)(A)(i	ii)? If "Yes," complet	e Schedule E		. 48		
		e organization make any transfers to					. 49a		
<b>b</b> If	"Ye	s," was the related organization a sec	ction 527 organization	on?			. 49b		Ļ
<b>0</b> C	omp	lete this table for the organization's t	five highest compen	sated employees (o	ther than office	ers, directo	ors, truste	es, an	d key
eı	mplo	yees) who each received more than	\$100,000 of comper	nsation from the org			e, enter "i\	ione.	
	(a) l	Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MIS	(d) Health contributions benefit plans, compe	to employee and deferred	(e) Estimate other com		
						<del></del>			
						{			
					<u> </u>				
1 C	omp	number of other employees paid ove plete this table for the organization's 000 of compensation from the organ	five highest compe	ensated independer	nt contractors	who each	received	more	than
	(a) l	Name and business address of each independe	ent contractor	(b) Type of s	ervice	(c)	Compensati	on	
				1					
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				1					
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				4	ı				
			-t and reciving						
<b>2</b> D	id t	number of other independent contraction the organization complete Schedul leted Schedule A	•	ection 501(c)(3) org			a ▶ □ Yes		 No
der pena	alties	of penury. I declare that I have examined this re	tum, including accompan	iving schedules and state	ments, and to the	best of my kn		-	
, correc	ot, and	i complete. Declaration of preparer (other than		ormation of which prepare	nus any Knowle	- / //	2 0 20 1		
gn _		Signature of officer	on m		Dat		1021		
ere 🖺		Malcolm Broome, Executive Director Type or print name and title	or		<del>.</del>				
		Print/Type preparer's name	Preparer's signature		Date	Check	if PTIN	=	
aid ropar		>e- ee				self-employ	yed		
repar se Oı		Firm's name ▶			Firm	n's ElN ▶			
UI	<b>,,,,</b>	Firm's address ▶			Pho	ne no.			
av the	IRS	discuss this return with the preparer	shown above? See	instructions		1	► ☐ Yes		No

## 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.

► Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization

Mississippi Peanut Growers Association(MPGA)

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Open to Public

Inspection

Employer identification number

30-0381243

Part I-10 Grant Funds paid to Mississippi State University Researchers for research done on peanut varieties, insects, diseases, crop rotation studies, weed control, and peanut growth regulators. Part I - 13 Funding to the Southern Peanut Growers, American Pcanut Council(APC, and The Peanut Institute to support marketing events, and nutrritional promotions on behalf of the Association across the southern region of the U.S. and limited national marketing by the APC. The Association is identified during these events like a Food Blogger by a known Chef, indentification in nutritional publications, or trade shows featuring peanuts in cooking demonstrations. These promotions have as their ultimate goal to reach consumers with the healthy benefits of eating peanuts or peanut products and getting them to include them in their regular eating habits Part I - 16 This explains the funding for the media promotion listed in Part III-29. This was a new activity for the promotion of peanuts to a targeted audience on both radio and social media. The focus was on the health benefits of peanuts to new mothers introducing early introduction of peanuts to infants based on the latest research showing this helps reduce peanut altergy likely hood. The other part was promoted to healthy eating shoppers looking for plant proteins, which peanuts fit perfectly. Part III 31 The Association due to Covid - 19 went to a print Ad promotion in the MS Nurses Association Annual Convention yearbook due to the Convention not being held in person. In 2019 MPGA exhibited at that convention with great participation and wanted to keep a presence with this very influential group as they work in hospitals, local medical clinics and schools across the State.