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Form 990-PF
Department of the Treasury
Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
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Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0052
2020
Open to Public Inspection

For calendar year 2020, or tax year beginning 06-01-2020, and ending 05-31-2021

Name of foundation DELTA REGIONAL FOUNDATION		A Employer identification number 64-0917739	
Number and street (or P.O. box number if mail is not delivered to street address) 130 FAIRMONT ST		B Telephone number (see instructions) (601) 488-4550	
City or town, state or province, country, and ZIP or foreign postal code CLINTON, MS 39056		C If exemption application is pending, check here	
G Check all that apply: <div><input type="checkbox"/> Initial return<input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return<input type="checkbox"/> Amended return <input type="checkbox"/> Address change<input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here..... 2. Foreign organizations meeting the 85% test, check here and attach computation ...	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 987,697		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	
J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) (Part I, column (d) must be on cash basis.)			

Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	9,382,692		9,382,692		
12 Total. Add lines 1 through 11	9,382,692	0	9,382,692		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	121,000		121,000	
	14 Other employee salaries and wages	254,960		254,960	103,017
	15 Pension plans, employee benefits	4,099		4,099	
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	7,500		7,500	
	c Other professional fees (attach schedule)	30,229		30,229	
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	74,089		74,089	
	19 Depreciation (attach schedule) and depletion	5,326			
	20 Occupancy	157,816		157,816	
	21 Travel, conferences, and meetings	24,475		24,475	
	22 Printing and publications				
	23 Other expenses (attach schedule)	7,105,275		7,105,275	
	24 Total operating and administrative expenses. Add lines 13 through 23	7,784,769	0	7,779,443	103,017
	25 Contributions, gifts, grants paid	1,138,150			1,138,150
	26 Total expenses and disbursements. Add lines 24 and 25	8,922,919	0	7,779,443	1,241,167
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	459,773			
	b Net investment income (if negative, enter -0-)		0		
c Adjusted net income (if negative, enter -0-)			1,603,249		

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	476,862	918,763	918,763
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use	13,973	60,414	60,414
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment: basis ▶ _____ 49,688 Less: accumulated depreciation (attach schedule) ▶ 39,077	11,960	10,611	
15 Other assets (describe ▶ _____)		8,520	8,520	
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	502,795	998,308	987,697	
Liabilities	17 Accounts payable and accrued expenses	13,915	13,306	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)	75,800	112,149	
	23 Total liabilities (add lines 17 through 22)	89,715	125,455	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions	413,080	872,853	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 Total net assets or fund balances (see instructions)	413,080	872,853	
	30 Total liabilities and net assets/fund balances (see instructions) .	502,795	998,308	

Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	413,080
2 Enter amount from Part I, line 27a	2	459,773
3 Other increases not included in line 2 (itemize) ▶ _____	3	
4 Add lines 1, 2, and 3	4	872,853
5 Decreases not included in line 2 (itemize) ▶ _____	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	872,853

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) $\left\{ \begin{array}{l} \text{If gain, also enter in Part I, line 7} \\ \text{If (loss), enter -0- in Part I, line 7} \end{array} \right\}$	2	
	3	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8		

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE**

1 Reserved			
(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved
2 Reserved			2
3 Reserved.			3
4 Reserved			4
5 Reserved			5
6 Reserved			6
7 Reserved			7
8 Reserved ,			8

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)	1	0
b Reserved.		
c All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3 Add lines 1 and 2.	3	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	
6 Credits/Payments:		
a 2020 estimated tax payments and 2019 overpayment credited to 2020	6a	
b Exempt foreign organizations—tax withheld at source	6b	
c Tax paid with application for extension of time to file (Form 8868)	6c	
d Backup withholding erroneously withheld	6d	
7 Total credits and payments. Add lines 6a through 6d.	7	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.	8	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11 Enter the amount of line 10 to be: Credited to 2021 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

		Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>	1b		No
c Did the foundation file Form 1120-POL for this year?	1c		No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ► \$ _____ (2) On foundation managers. ► \$ _____			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ _____			
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	2		No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3		No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Yes	
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Yes	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	5		No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	7	Yes	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ►MS			
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i>	8b		
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2020 or the taxable year beginning in 2020? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>	9		No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	10		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	13	Yes	
14	The books are in care of ▶ <u>CHARLES MCGUFFEE</u> Telephone no. ▶ <u>(601) 259-4007</u>			

Located at ▶ 301 E COLLEGE ST CLINTON MSZIP+4 ▶ 39056

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶			


Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

		Yes	No
1a	During the year did the foundation (either directly or indirectly):		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions <input type="checkbox"/>	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2020? <input type="checkbox"/>	1c	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2020, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2020? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.) <input type="checkbox"/>	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2020.) <input type="checkbox"/>	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?	4b	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to:		Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions		5b	
	Organizations relying on a current notice regarding disaster assistance check here. 	<input type="checkbox"/>		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d).	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		6b	No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000. 				

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ▶		

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ▶	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	707,435
c	Fair market value of all other assets (see instructions).	1c	79,545
d	Total (add lines 1a, b, and c).	1d	786,980
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	786,980
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	11,805
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	775,175
6	Minimum investment return. Enter 5% of line 5.	6	38,759

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	38,759
2a	Tax on investment income for 2020 from Part VI, line 5.	2a	
b	Income tax for 2020. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	38,759
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	38,759
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	38,759

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	1,241,167
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,241,167
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,241,167

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				38,759
2 Undistributed income, if any, as of the end of the 2020:				
a Enter amount for 2019 only.				
b Total for prior years: 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2020:				
a From 2015.				
b From 2016.				
c From 2017.				
d From 2018.				
e From 2019.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2020 from Part XII, line 4: ► \$ 1,241,167				
a Applied to 2019, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2020 distributable amount.				38,759
e Remaining amount distributed out of corpus	1,202,408			
5 Excess distributions carryover applied to 2020. (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,202,408			
b Prior years' undistributed income. Subtract line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b. Taxable amount—see instructions.				
e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions.				
f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a.	1,202,408			
10 Analysis of line 9:				
a Excess from 2016.				
b Excess from 2017.				
c Excess from 2018.				
d Excess from 2019.				
e Excess from 2020.	1,202,408			

Part XIV

- 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.)

Inform

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total ▶ 3a				1,138,150
b <i>Approved for future payment</i>				
Total ▶ 3b				

Enter gross amounts unless otherwise indicated.

1 Program service revenue:

a NON-COMMERCIAL BINGO

b PULL TAB, ELECTRONIC DEVICE

c _____

d _____

e _____

f _____

g Fees and contracts from government agencies

2 Membership dues and assessments.

3 Interest on savings and temporary cash investments

4 Dividends and interest from securities.

5 Net rental income or (loss) from real estate:

a Debt-financed property.

b Not debt-financed property.

6 Net rental income or (loss) from personal property

7 Other investment income.

8 Gain or (loss) from sales of assets other than inventory

9 Net income or (loss) from special events:

10 Gross profit or (loss) from sales of inventory

11 Other revenue:

a OTHER REVENUE

b PAYCHECK PROTECTION PROGRAM

c _____

d _____

e _____

12 Subtotal. Add columns (b), (d), and (e).

13 **Total.** Add line 12, columns (b), (d), and (e).
(See worksheet in line 13 instructions to verify calculation.)

[illegible][illegible]

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- [illegible]

- | | | | |
|------------------|--|---------------|----------------|
| Sign Here | 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 taxpayer) is based on all information of which preparer has any knowledge. | | |
| | ***** | 2021-10-15 | ***** |
| | _____
Signature of officer or trustee | _____
Date | _____
Title |

May the IRS discuss this return with the preparer shown below
 (see instr.) ☒ **Yes** ☐ **No**

Form **990-PF** (2020)

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
CHARLES W MCGUFFEE 301 E COLLEGE ST CLINTON, MS 39056	EXECUTIVE DI 40.00	121,000	0	0
WOODIE H BOUNDS 301 E COLLEGE ST CLINTON, MS 39056	PRESIDENT 000.00	0	0	0
JERRY STIGLER 301 E COLLEGE ST CLINTON, MS 39056	VICE-PRESIDE 000.00	0	0	0
LLOYD B CLARK JR 301 E COLLEGE ST CLINTON, MS 39056	TREASURER 000.00	0	0	0
FAYE MCGUFFEE 301 E COLLEGE ST CLINTON, MS 39056	SECRETARY 000.00	0	0	0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DELTA STATE UNIVERSITY FDN INC PO BOX 3141 CLEVELAND, MS 38733	NONE		EDUCATION FUNDING	449,500
HOUSE OF GRACE8625 HWY 51 N STE C SOUTHAVEN, MS 38671			PROGRAM SUPPORT	32,000
MISSISSIPPI FOOD NETWORK 440 W BEATTY ST JACKSON, MS 39201			PROGRAM SUPPORT	32,000
Total ▶ 3a				1,138,150

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FRIENDS OF CHILDREN'S HOSPITAL 3900 LAKELAND DRIVE SUITE FLOWOOD, MS 39232			PROGRAM SUPPORT	50,000
THE BADDOUR CENTER 440 BADDOUR BLVD SENATOBIA, MS 38668			PROGRAM SUPPORT	52,500
CITY OF OLIVE BRANCH MS 9200 PIDGEON ROOST OLIVE BRANCH, MS 38654			PROGRAM SUPPORT	10,000
Total ▶ 3a				1,138,150

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DELTA ARTS ALLIANCE104 S COURT ST CLEVELAND, MS 38732			PROGRAM SUPPORT	25,000
PALMER HOME FOR CHILDREN 2608 MAIN ST COLUMBUS, MS 39701			PROGRAM SUPPORT	52,500
CATCH A DREAM FOUNDATION 2485 ENNIS ROAD STARKVILLE, MS 39759			PROGRAM SUPPORT	12,000
Total ▶ 3a				1,138,150

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE STEVE AZCR ST CELIA FOUNDATION PO BOX 4613 GREENVILLE, MS 38704			PROGRAM SUPPORT	20,000
COMMUNITY FDN OF NORTH WEST MS 133 SHARKEY AVE CLARKSDALE, MS 38614			PROGRAM SUPPORT	75,000
MAKE A WISH FOUNDATION MS 607 HIGHLAND COLONY PKWY STE 100 RIDGELAND, MS 39157			PROGRAM SUPPORT	15,000
Total ▶ 3a				1,138,150

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
EXTRA TABLE - DSU PANTRY 3904 HARDY ST HATTIESBURG, MS 39402			PROGRAM SUPPORT	45,000
GIRL SCOUTS HEART OF THE SOUTH 717 S WHITE STATION RD STE 2 MEMPHIS, TN 38117			PROGRAM SUPPORT	2,000
DESOTO CO SCHOOLS MS5 E SOUTH ST HERNANDO, MS 38632			PROGRAM SUPPORT	8,000
Total ▶ 3a				1,138,150

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CLEVELAND MUSIC FOUNDATION 600 3D ST CLEVELAND, MS 387322323			PROGRAM SUPPORT	30,000
NORTHWEST COMM COLLEGE FOUNDATION 4975 HWY 51 NORTH SENATOBIA, MS 38668			PROGRAM SUPPORT	50,000
MS DELTA COMM COLLEGE FOUNDATION PO BOX 710 MOORHEAD, MS 38761			PROGRAM SUPPORT	50,000
Total ▶ 3a				1,138,150

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MS SPORTS HALL OF FAME 1152 LAKELAND DRIVE JACKSON, MS 39216			PROGRAM SUPPORT	4,800
MSU FOUNDATIONPO BOX 6149 MISSISSIPPI STATE, MS 39762			PROGRAM SUPPORT	25,000
CRISIS PREGNANCY CENTER OF VICKSBUR 1905 MISSION 66SUITE E VICKSBURG, MS 39180			PROGRAM SUPPORT	10,000
Total ▶ 3a				1,138,150

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ST JUDE CHILDREN'S RESEARCH HOSPI 262 DANNY THOMAS PLACE MEMPHIS, TN 38105			PROGRAM SUPPORT	50,000
HEALING HEARTS CHILD ADVOCACY CENTE 5627 GETWELL ROAD STE B3 SOUTHHAVEN, MS 38672			PROGRAM SUPPORT	37,850
Total ▶ 3a				1,138,150

TY 2020 Accounting Fees Schedule**Name:** DELTA REGIONAL FOUNDATION**EIN:** 64-0917739

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
AUDIT FEES	7,500		7,500	

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2020 Depreciation Schedule

Name: DELTA REGIONAL FOUNDATION

EIN: 64-0917739

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
FOUR (4) - 32" TELEVISIONS	2012-10-23	1,658	1,658	S/L	5.0000				
CALLER MACHINE AND FLASH BOARD	2012-12-27	2,625	2,625	S/L	5.0000				
TABLES & CABINET	2013-01-30	566	566	S/L	5.0000				
TABLES & CHAIRS	2013-03-27	3,000	3,000	S/L	5.0000				
PM SOUND SYSTEM	2013-06-05	1,075	1,075	S/L	5.0000				
CALLER MACHINE AND FLASH BOARDS	2013-11-30	2,000	2,000	S/L	5.0000				
CALLER MACHINE AND FLASH BOARDS	2013-12-26	2,000	2,000	S/L	5.0000				
CALLER MACHINE AND FLASH BOARDS	2014-01-31	2,020	2,020	S/L	5.0000				
BEST BUY LAPTOP COMPUTER	2014-05-20	999	999	S/L	3.0000				
EQUIPMENT	2016-03-31	8,000	6,667	S/L	5.0000	1,333			
OVEN FOR CONCESSION STAND	2017-05-25	3,451	2,070	S/L	5.0000	690			
SIGNS AT BINGO HALL	2016-10-31	400	287	S/L	5.0000	80			
CAMERAS IN BINGO HALL	2017-03-07	950	618	S/L	5.0000	190			
OFFICE FURNITURE (DISCOUNT OFFICE)	2017-01-17	918	612	S/L	5.0000	184			
AIR CONDITIONING UNIT - CHARITY OFFICE	2017-02-27	7,115	3,304	S/L	7.0000	1,016			
TELEVISIONS - BEST BUY	2017-02-16	1,020	663	S/L	5.0000	204			
TELEVISION (WALMART)	2016-10-31	626	449	S/L	5.0000	125			
PA SYSTEM (MAN CAVE SOUND & VIDEO)	2016-07-09	2,220	1,739	S/L	5.0000	444			
PATTERN FLASHBOARD	2018-11-14	1,070	339	S/L	5.0000	214			
VIDEO DESIGNER DESK	2018-11-14	1,930	611	S/L	5.0000	386			

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
2 LAPTOP COMPUTERS (BEST BUY)	2019-05-08	2,067	448	S/L	5.0000	413			
MAHOGANY CONF TABLE & 8 CHAIRS	2021-05-14	2,939		S/L	7.0000	35			
RUGS FOR NEW OFFICE SPACE	2021-05-08	1,038		S/L	7.0000	12			

TY 2020 Land, Etc. Schedule

Name: DELTA REGIONAL FOUNDATION

EIN: 64-0917739

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
	49,688	39,077	10,611	

TY 2020 Other Assets Schedule

Name: DELTA REGIONAL FOUNDATION

EIN: 64-0917739

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
PREPAID EXPENSES		8,520	8,520

TY 2020 Other Expenses Schedule

Name: DELTA REGIONAL FOUNDATION

EIN: 64-0917739

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
NON-COMMERCIAL BINGO				
CASH PRIZES	2,509,811		2,509,811	
BANK FEES	85		85	
BINGO SUPPLIES	101,956		101,956	
EQUIPMENT RENTAL	176,884		176,884	
JANITORIAL	8,876		8,876	
OFFICE SUPPLIES	8,489		8,489	
OVER & SHORT	697		697	
REVENUE FEES	38,821		38,821	
SECURITY	14,891		14,891	

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
UTILITIES	13,523		13,523	
ADVERTISING	272		272	
PULL TAB, ELECTRONIC DEVICE				
CASH PRIZES	3,808,316		3,808,316	
BANK FEES	117		117	
PULL TAB COST	240,558		240,558	
ELECTRONIC DEVICE RENTAL	58,282		58,282	
JANITORIAL	20,710		20,710	
OFFICE SUPPLIES	11,768		11,768	
OVER & SHORT	967		967	

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
REVENUE FEES	7,115		7,115	
SECURITY	34,746		34,746	
UTILITIES	31,555		31,555	
ADVERTISING	378		378	
EXPENSES				
BANK FEES	63		63	
INSURANCE - GENERAL LIABILITY	5,295		5,295	
MISCELLANEOUS	64		64	
OFFICE SUPPLIES	6,704		6,704	
PENALTIES & INTEREST	1,017		1,017	

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
REPAIRS & MAINTENANCE	750		750	
TELEPHONE	1,639		1,639	
UTILITIES	926		926	

TY 2020 Other Income Schedule**Name:** DELTA REGIONAL FOUNDATION**EIN:** 64-0917739**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
NON-COMMERCIAL BINGO	3,892,968		3,892,968
PULL TAB, ELECTRONIC DEVICE	5,396,387		5,396,387
OTHER REVENUE	17,537		17,537
PAYCHECK PROTECTION PROGRAM	75,800		75,800

TY 2020 Other Liabilities Schedule**Name:** DELTA REGIONAL FOUNDATION**EIN:** 64-0917739

Description	Beginning of Year - Book Value	End of Year - Book Value
INCOME TAX PAYABLE		35,499
PAYCHECK PROTECTION PROGRAM LOAN	75,800	76,650

TY 2020 Other Professional Fees Schedule**Name:** DELTA REGIONAL FOUNDATION**EIN:** 64-0917739

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	7,437		7,437	
NON-COMMERCIAL BINGO	9,552		9,552	
PULL TAB, ELECTRONIC DEVICE	13,240		13,240	

TY 2020 Taxes Schedule**Name:** DELTA REGIONAL FOUNDATION**EIN:** 64-0917739**Taxes Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
NON-COMMERCIAL BINGO	9,069		9,069	
PULL TAB, ELECTRONIC DEVICE	21,162		21,162	
INDIRECT TAXES/LICENSES	43,858		43,858	