	٠."	Exempt Organization Business Income Tax Return							OMB No 1545-0687						
	(and proxy tax and socion socion)								_	2018					
		For calendar year 2018 or other tax year beginning, 2018, and ending, 20 Partment of the Treasury ernal Revenue Service Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).													
	•											Open to Public Inspection for 501(c)(3) Organizations Only			
		- Check hov if													
		remaitunder section Delta Foundation, Inc.											Employer identification number (Employees' trust, see instructions)		
		S01(C M3) Print Number, street and room or suite no. If a P.O. box, see instructions											64-0477962		
		1 and 10										E Unrelated business activity code			
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									(See instructions)				
		408A 530(a) City or town, state or province, country, and ZIP or foreign postal code 529(a) Greenville, MS 38701-4110									900002				
	C Book	c yalue of all assets	F Gr			er (See instructions	1				9000	702			
	at er	3,351,147.				► 🗵 501(c) corp		n	(c) trust	<u> </u>	01(a) tru	st 🗍 Othe	r trust		
	H Er					d trades or busines			<u>:</u>		_	or first) unrela			
				_											
	fir	st in the blank s	pace a	at the end of the	he previ	ous sentence, con	plete	Parts I and II.	complete a	Sche	edule M	for each add	ditional		
	tra	ade or business,	then c	omplete Parts	III–V.										
	I Du	iring the tax year,	was the	e corporation a	subsidia	ry in an affiliated gro	up or a	parent-subsidi	arv controlled	arou	p?	▶ ☐ Yes [No.		
						r of the parent corp			,	9.55	г				
		ne books are in c							ephone num	ber ▶	(662)335-5291			
	-Par	Unrelated	Trad	e or Busines	s Inco	me		(A) Income		Expen		(C) Net			
	1a	Gross receipts	or sale	es					• •	-,			Ti		
	b	Less returns and a	illowance	es		c Balance ▶	1c		• • •						
	2	Cost of goods	sold (S	Schedule A, line	e 7) .		2		•		e , ;	10	1.1		
ဘ	3	Gross profit. Si	ubtract	line 2 from lin	e 1c .		3		,	,1 3	ħ				
S107)	4a		4	("	la .				
7	b					ttach Form 4797)	4b		**	.• -					
_ =	, с	Capital loss deduction for trusts					4c		P	•1	٠ - ٥				
	5		ncome (loss) from a partnership or an S corporation (attach statement)				5		, ,	r.	r				
AUG	6						6	82,744				82,744			
	7	Unrelated debt	:-financ	ed income (Sc	hedule	E)	7				_				
	8					rganization (Schedule F)	8						<u> </u>		
SCANNED	9				-	janization (Schedule G)	9								
Z	10		npt activity income (Schedule I)												
\ddot{c}	11						11				\perp	<u>. </u>	<u> </u>		
S	12					le)	12		£	, <u>,</u> , ,;	ं ह		<u> </u>		
	13					· · · · · · · · · · · · · · · · · · ·	13	82,744			لسلب	82,744	<u> </u>		
	Part					ee instructions for				cept	for con	itributions,			
	14					d with the unrelate stees (Schedule K)					144				
	15	Salaries and wa	2026	cers, directors,	and tru	stees (Scriedule N)		• • •			14 15		—		
	16	Repairs and ma	ages aintena	nce	• •			à · · · ·			16	25,788	 		
	17	Bad debts	unitoria			052	りし	7		•	17	23,700	\vdash		
	18	Interest (attach	sched	ule) (see instru	ctions)		٠.			•	18		 		
	19	Taxes and licer	ises .			· · · · · · ·		• • • •		•	19	24,473	 		
•	20					r limitation rules).					20	21,173	 		
•	21								22,14		20		 		
	22					nd elsewhere on re			22,11	+	22b	22,142			
	23										23		 		
	24	Contributions to	o defer	red compensa	tion pla	ns					24		 		
_	25					<i></i> .					25	,	 		
-	26										26				
7	27										27				
Ŋ	28					See Oth Dec					28	34,669			
4	29										29	107,072			
	30					et operating loss de					30	-24,328			
	31					ears beginning on or					31	· 's : ;			
	32					t line 31 from line 3					32	-24,328			
	For Pa					·RAA						Form 990-1			

7	· · (20.0)						r age z
Part		otal Unrelated Business Taxable Income					_
33		f unrelated business taxable income computed from all unrelated trade	•		İ		
	instruct	rions)			33	-24,328	3
34	Amoun	ts paid for disallowed fringes			34		T
35	Deduct	ion for net operating loss arising in tax years beginning before Ja	e [
	instruct		35				
36		ions)			-		†
		33 and 34			36	-24 226	
27		ŀ	37	-24,328	' 		
37		c deduction (Generally \$1,000, but see line 37 instructions for exceptions ted business taxable income. Subtract line 37 from line 36. If line 37 is		<u>.</u>	3/		+
38						•	
	enterti	e smaller of zero or line 36			38	0	<u>′</u>
Part	_	ax Computation					
39		zations Taxable as Corporations. Multiply line 38 by 21% (0.21)			39	0	<u> </u>
40		Taxable at Trust Rates. See instructions for tax computation		n [•		
	the am	ount on line 38 from. Tax rate schedule or Schedule D (Form 104)	1) 🕨	▶	40		
41	Proxy t	ax. See instructions		• [41		T
42		tive minimum tax (trusts only)		ı	42		†
43		Noncompliant Facility Income. See instructions		上	43		+-
44		Add lines 41, 42, and 43 to line 39 or 40, whichever applies		H	44	0	.†
		ax and Payments	<u> </u>		-4-7		Т—
			45-1		ir t	· · · · · ·	
45a		, ,	45a	_	* '		
b			45b	ᆀ՝	* c.=		1
С		` ,	45c		· ,,r.		
d		, , , , , , , , , , , , , , , , , , , ,	45d		10		
е	Total c	redits. Add lines 45a through 45d		- }.	45e		}
46	Subtrac	et line 45e from line 44		Γ	46	0	T
47		kes Check if from 🔲 Form 4255 🔲 Form 8611 🔲 Form 8697 🔲 Form 8866 🔲 O			47		
48		ax. Add lines 46 and 47 (see instructions)		_ r	48	0	
49		et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (ı	49		†
50a			50a	F			╁
b	-	· ·	50b	\dashv	.·		Į
		· · · · •	50c	\dashv	,		
C				\dashv	, -		ļ
d		·	50d	⊢.	. ,		
е	•	,	50e	ऻॱ	·		
f			50f				
g		redits, adjustments, and payments. 🗌 Form 2439					
	☐ Form	0.4136 Total ▶ [50g	`			
51					51		l
52	Estimat	ed tax penalty (see instructions). Check if Form 2220 is attached	▶[⊐ [52		
53		e. If line 51 is less than the total of lines 48, 49, and 52, enter amount ow		▶ [53	<u>.</u> ,	
54		yment. If line 51 is larger than the total of lines 48, 49, and 52, enter amo		▶	54	0	
55		amount of line 54 you want	Refunded I	▶ ॉ	55		
Part		atements Regarding Certain Activities and Other Information				-	
56		ime during the 2018 calendar year, did the organization have an interest		oth.	er autho	rity Yes	No
55		inancial account (bank, securities, or other) in a foreign country? If "Yes				,,,r,,	1.
		Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," en					1
	here ►	Test, Test, Report of Foreign Dank and Financial Accounts. If Test, en	to the hame of the	1016	aga coul	y 	\ -_
		4.44					×
57		ne tax year, did the organization receive a distribution from, or was it the grantor	οτ, or transferor to, a f	rorei	gn trust?	·	X.
		' see instructions for other forms the organization may have to file.				, ~ .	J: ` .]
_58		e amount of tax-exempt interest received or accrued during the tax year					
٥.		penalties of perjury, I declare that I have examined this return, including accompanying schedules a irrect, and complete Declaration of preparer (other than taxpayer) is based on all information of which			of my knov	vledge and be	lief, it is
Sign	100,00	A	i preparer nas any knowled	_		S discuss this	
Here		Deuce John 05/15/2019 President	& CEO			eparer shown	
		re of officer Date Title			lagg mattuc	tions)? XYes	□140
Poid	1	Print/Type preparer's name Preparer's signature	Date	<u></u>	ck 🗵 if	PTIN	
Paid		Eric Love Eric Love			employed	P01443	3078
Prepa		TRIC LOW CRA				1-26050	
Use (Only	Firm's name ►ERIC LOVE CPA Firm's address ► 1101 ANONA ST, TUSKEGEE INSTITUTE, AL 3					
		Finit's dudress First AnomA 31, 103AEGEE INSTITUTE, AL 3	0000-2333	rnon	<u>eno (3.</u>	34)727-(030T

Form	990-T	(2018)	
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	•
'age	: 3

1 01111 330-										rage 3
Sched	ule A—Cost of Goods S	old. En	ter method of ir	nventory	/ va	luation >				
1 1	nventory at beginning of year	ar 📋	1		6	Inventory a	at end of year	6		
2 F	Purchases	. []	2		7	Cost of	goods sold. Subtract			
3 (Cost of labor	. [3	3			line 6 from	line 5. Enter here and			
4a /	Additional section 263A c	osts				ın Part I, İır	ne 2	7		
(attach schedule)	. 4	a	1 :	8	Do the ru	les of section 263A (wit	h respect to	Yes	No
b (Other costs (attach schedule	e) 4	b				roduced or acquired for		/	
	Total. Add lines 1 through 4		5			to the orga	anization?			
Schedi	ule C-Rent Income (Fr	om Rea	I Property and	Perso	nal	Property	Leased With Real Pro	perty)		
(see ır	nstructions)									
1. Descrip	tion of property		<u></u>							
(1) Rea]	Property									
(2)										
(3)										
(4)										
	2. R	lent receive	d or accrued		-					
	personal property (if the percentag rsonal property is more than 10% b more than 50%)		(b) From real ar percentage of rent 50% or if the rent	for persona	al pro	perty exceeds	3(a) Deductions directly in columns 2(a) and			ne
(1)										
(2)							<u> </u>	 		
(3)								 		
(4)										
Total			Total				<u> </u>			
	income. Add totals of column on page 1, Part I, line 6, column					<u>-</u> <u>-</u>	(b) Total deductions. Enter here and on page Part I, line 6, column (B)			
	ule E—Unrelated Debt-I			Instruction	One)		Fart I, line 0, column (b)	<u> </u>	-	
0004	Description of debt-final			2. Gros	s inc	ome from or ebt-financed		ed property		_
					prop		(a) Straight line depreciation (attach schedule)	(b) Other (attach	deduction schedule)	
(1)				ļ <u> </u>						
(2)				<u> </u>						
(3)				<u> </u>						
(4)				ļ			<u>.</u>			
ad alloc	. Amount of average cquisition debt on or cable to debt-financed perty (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property n schedule)	ĺ	6. Co 4 div y colu		7. Gross income reportable (column 2 × column 6)	8. Allocable (column 6 × to 3(a) a		
(1)						- %				
(2)						%				
(3)						%				
(4)						%				
-							Enter here and on page 1, Part I, line 7, column (A)	Enter here at Part I, line 7		•
Totals						>				
Total div	idends-received deductions	ıncluded ı	n column 8 .				<u>.</u> . <u>.</u> . ▶			

Schedule F-Interest, Annu	uities, Roy	/alties, a			Controlled Org	ganizations (se	e instruc	tions)	
		oyer number	3. Net unrel	ated income	<u> </u>	5. Part of columnicuded in the organization's gr	controlling	conn	eductions directly ected with income in column 5
(1)									
(2)								†	
(3)				_					
(4)				,					
Nonexempt Controlled Organiz	ations					- 			
7. Taxable Income		nrelated inc ee instruction			tal of specified ments made	10. Part of column 9 that is included in the controlling organization's gross income		11. Deductions directly connected with income in column 10	
(1)									
(2)									
(3)						·			
(4)		-							
Tabele						Add columns 5 Enter here and c Part I, line 8, co	on page 1,	Enter I	columns 6 and 11 here and on page 1, , line 8, column (B)
Schedule G-Investment I	ocomo of	a Sacti	on 501/c	· · · · · · · · · · · · · · · · · · ·		zation (see une	tructions	1	
Schedule G-Investment I	ilcome or	a Secu	011 30 1(0		Deductions	4. Set-aside			otal deductions
Description of income	2	Amount of	income	direc	ctly connected ach schedule)	(attach sched		and set-asides (col. 3 plus col. 4)	
(1)				· · · ·	··-···	-			·
(2)					-				
(3)					·				
(4)									
Totals	Part	l, line 9, co		· ·	*	and the second		Part I, II	re and on page 1, ne 9, column (B)
Schedule I—Exploited Exe	mpt Activ	ity Inco	me, Oth	er Than	Advertising In	icome (see inst	tructions)		
Description of exploited activity		2. Gross unrelated iness incom om trade or business	ne conne prod un	xpenses irectly ected with fuction of related ess income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expe attributa colun	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)									
(2)									
(3)							İ		
(4)									
Totals	pa	r here and o ge 1, Part I, e 10, col (A)	, page	ere and on 1, Part I, 0, col (B)	0	and the second s			Enter here and on page 1, Part II, line 26
Schedule J-Advertising Ir									•
Part I Income From Pe	eriodicals	Report	ed on a	Consolid	dated Basis				
1. Name of periodical		2. Gross dvertising income		Direct Ising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Read cos		7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)					;				3 (4) 3 (4)
(2)		· · ·			4				
(3)									3, 4,
(4)				_					
Totals (carry to Part II, line (5)) .	. ▶					<u></u>			

Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns Part II 2 through 7 on a line-by-line basis.) 4. Advertising gain or (loss) (col 2 minus col 3) If 7. Excess readership costs (column 6 2. Gross 3. Direct 5. Circulation 6. Readership 1. Name of periodical advertising minus column 5, but advertising costs ıncome costs ıncome a gain, compute not more than cols 5 through 7 column 4) (1) (2) (3) (4) Totals from Part I Þ Enter here and on Enter here and on Enter here and page 1, Part I, line 11, col. (A) page 1, Part I, line 11, col (B) on page 1, Part II, line 27 ₹ ₹ Totals, Part II (lines 1-5) Schedule K—Compensation of Officers, Directors, and Trustees (see instructions) 3. Percent of time devoted to business 4. Compensation attributable to 1. Name 2. Title unrelated business (1) % (2) % (3) % (4) % Total. Enter here and on page 1, Part II, line 14

Form **990-T** (2018)

Additional information from your Form 990-T: Exempt Organization Business Income Tax Return

Form 990-T: Exempt Organization Business Income Tax Return Other Deductions

Continuation Statement

Description	Amount
Insurance	14,769.
Utilities and telephone	15,995.
Other	
Material and supplies	1,069.
Other	2,836.
Total	34,669.

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

Attachment

Department of the Treasury Sequence No 179 Internal Revenue Service (99) Name(s) shown on return Business or activity to which this form relates Identifying number Form 990-T page 1 Delta Foundation, Inc. 64-0477962 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 1,000,000. 2 Total cost of section 179 property placed in service (see instructions) . . . 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . 3 2,500,000. 4 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 6 (a) Description of property (b) Cost (business use only) 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 10 Carryover of disallowed deduction from line 13 of your 2017 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions. 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 . 13 Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 22,142 Part III MACRS Depreciation (Don't include listed property. See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2018 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2018 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period only - see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property 25 yrs S/L g 25-year property 275 yrs ММ S/L h Residential rental 275 yrs MM 5/1 property ММ 39 yrs S/L Nonresidential real MM S/L Section C-Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System 20a Class life 12 yrs b 12-year 30 yrs MM S/L c 30-year d 40-year 40 yrs Part IV Summary (See instructions.) 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions 22 22,142 23 For assets shown above and placed in service during the current year, enter the