

Subject: Request for Personal Property Tax Exemption

Dear "Madison County Tax Assessor's Office",

On behalf of the Mississippi Public Health Institute (MSPHI), I respectfully submit this request to be recognized as **Personal Property Tax Exempt** pursuant to our designation as a nonprofit, tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code.

The Mississippi Public Health Institute, established in 2011, is a nonprofit organization dedicated to protecting and improving the health and well-being of Mississippians. As a 501(c)(3), MSPHI operates solely on grant funding to support public health programs, education, research, and community partnerships.

We wish to clarify the following in support of our exemption request:

- **Property Ownership**: MSPHI does not own any real property. We are tenants at our current office location and do not hold ownership of the facility in which we operate.
- Assets: MSPHI does not own business assets or office equipment in the traditional sense.
 All items utilized in our operations are purchased through specific grant awards and are therefore considered the property of the granting entity.
- **Funding**: Our activities are supported exclusively through federal, state, and private grant funding to advance the health of Mississippi communities. No part of our revenue or assets is used for personal or commercial gain.

We respectfully request that our organization be formally recognized as **exempt from personal property tax assessment**.

Enclosed for your reference is a copy of our IRS 501(c)(3) determination letter. Should you require any additional documentation or clarification, please do not hesitate to contact me at (601) 398-4406 or via email at dbates@msphi.org.

Thank you for your time and consideration of this request. We look forward to your confirmation of our exemption status.

Respectfully,

Debbie BatesProgram Manager

Mississippi Public Health Institute

APPLICATION FOR TAX EXEMPTION MADISON COUNTY TAX ASSESSOR MADISON COUNTY BOARD OF SUPERVISORS

Instructions:

Before you apply for a Tax Exemption please read the attached Qualifications for Tax Exemption in Mississippi (§27-31-1, et seq., MS Code of 1972 Annotated), and then answer the following questions to be considered for Tax Exemption. Applicant must be the owner of record as of January 1 of the initial tax year for request. Applications must be submitted by June 1 of the initial tax year for request.

	APPLICANT FOR TAX EXEMPTION: Mississipp Public Health Tost &
2.	ADDRESS OF PROPERTY: 5 Olympic Way Madison MS 39/10
3.	PARCEL#: NA Request Exemption for Personal Property
4.	DATE PROPERTY ACQUIRED: NA - Revier
5.	INITIAL TAX YEAR FOR REQUEST: NA
6.	ARE ANY PROPERTY TAXES CURRENTLY DUE FOR THIS PROPERTY? (CINCAE ONE): YES / NO
	a. If Yes, list the tax years with taxes currently due and owing:
	NA
7.	REASON FOR TAX EXEMPTION: Non prof. 501c3
8.	IF THE EXEMPTION CLAIM IS FOR A CHURCH PLEASE CONSIDER THE FOLLOWING CODE SECTION 79-11-33 MS CODE OF 1972 ANNOTATED: A religious society, ecclesiastical body and/or any congregation thereof may hold and own the following real property, but no other. a. A building used as a place of worship with a reasonable quantity of ground annexed thereto;

b. A quantity of ground annexed to the building used as a place of worship and used as a parish house; a community facility; a Sunday school facility; an educational facility; or for the care of children on a non-

profit basis;

	c. As a hospital or infirmary together with a reasonable amount of ground annexed thereto;
	d. All buildings used as a school or college or seminary of learning;
	e. All buildings used for an orphan asylum or institution;
	f. All buildings used for a campground or assembly for religious purposes; g. lands for a cemetery of sufficient dimensions;
	h. All buildings and grounds used for denominational headquarters and/or administrative purposes;
	i. Any land which is maintained and used as a parking lot for the
	convenience of the members of the congregation, church, cathedral,
	mission, or other unit or administrative unit from which the society
	receives NO REVENUE, fee, charge or assessment
0	IF THE EXEMPTION CLAIM IS FOR A CHURCH WHICH OF THE
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	EXEMPTION:
	AIA
10	. IF THE EXEMPTION CLAIM IS FOR A CHURCH ARE ALL
	PROPERTIES CLAIMED ANNEXED TO THE CHURCH: YES/NO;
	The British of the State of the
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11	. IF THE EXEMPTION CLAIM IS FOR A CHURCH AND THE
11	. IF THE EXEMPTION CLAIM IS FOR A CHURCH AND THE PROPERTY CLAIMED FOR EXEMPTION IS NON-CONTIGUOUS
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12. IF THE EXEMPTION CLAIM IS FOR A NON-PROFIT PLEASE PROVIDE THE IRS EXEMPTION LETTER OR PROVIDE THE IRS EXEMPTION #:

13. IS THE NON-PROFIT INCORPORATED: YES/NO:

14. IF YES ATTACH COPY OF CHARTER FROM MS SEC OF STATE:

15. If your organization is receiving rent or some equivalent thereof for use of some of all of the real property for which you are requesting an exemption, please provide the amount of rent collected and what percentage of the property is being rented or leased;						
1	6. If your organization is allowing other groups to use the property for a fee, please provide a detailed description of the groups utilizing the property, the fees associated with that usage, and the estimated percentage of the calendar year when the property is utilized by other organizations;					
	NA					
1	7. If your organization provides services for a fee, please describe the fee structure and identify what portion of your clientele (a) pay a reduced fee and/or (b) do not pay any fee for the service;					
1	8. Review the attached copy of Mississippi statute (Section 27-31-1) and list the specific section of that law that applies to your organization;					
1	9. Please attach or enclose any other information that will support your Application for tax exemption status.					

The undersigned, individual owner(s) of the property (the Pastor and one Deacon if a Church, or the church Business Manager), or an authorized officer of the company that owns the property, certifies that, to the best of his/her knowledge, no information contained hereinabove or in the attachments hereto is false in any way and that all information is truly descriptive of the property and the development for which this application for tax exemption is being submitted.

OWNER OR AUTHORIZED REPRESENTATIVE:

John Das. T		
Print Name		
PASTOR	-	
	_	
DEACON		
Mississippi Dubic Company or Organization Nam	Halth Instable	CFO Title
(201- 29 8-4406) Telephone	- –	Jemail Address
Signature		7-1-25 Date

Business ID: 984133

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OFFICE OF THE MISSISSIPPI

P.O. BOX 136, JACKSON, MS 39205-0136 (601) 359-1633 Articles of Incorporation

The undersigned, pursuant to Section 79-4-2.02 (if a profit corporation) or Section 79-11-137 (if a nonprofit corporation) of the Mississippi Code of 1972, hereby executes the following document and sets forth:

	1. Type of	Corporatio	on *Busi	ness Email A	ddress:				<u> </u>
⇔	Pro	·	V	Nonprof					
	2. Name of	f the Corpo	ration						
⇔	Missis	Mississippi Public Health Institute							
	3. The futu (Comple	re effective ete if applic						***************************************	
⇒	4. FOR NONPROFITS ONLY: The period of duration is years or perpetual								
	The purpose of the non-profit corporation Protect and Improve the Health and Wall of Most subplant and its environment through parlamentage committed to program information, the increase of health rescurrence, education, beach interesting environment, and profit development, and profit of development, and the program of colorable in improving the interesting program development in improving the authority development.								ntand I
	5. FOR PI	ROFITS O	NLY: The Numi	per (and Classes)	if any of shares the co	orporation is auti	horized to is	sue is (are) as	, <u> </u>
	Classes		# of Shares A	uthorized	If more than one (1) authorized, the preferrelative rights of each	ferences. limitatio	ins and		
⇒								(See Attached)	
⇒									
	6. Name and Street Address of the Registered Agent and Registered Office is								
⇒	Name	Matth	iew P. I	McLau	ghlin				
⇒	Physical Address 401 East Capitol Street, Suite 200								
⇒	P.O. Box 22587								
⇒	City, State,	ZIP5, ZIP4	Jack	son		MS	3920)1 ⁻ 2608	
									

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OFFICE OF THE MISSISSIPPI SECRETARY OF STATE P.O. BOX 136, JACKSON, MS 39205-0136 (601) 359-1633 Articles of Incorporation

7. The name and complete address of each incorporator are as follows

⇔	Name	Matthew P. McLaughlin					
⇔	Street	401 East Capitol Street, Suite 200					
⇔	City, State,	ZIP5, ZIP4	Jackson		MS	39201-2608	
⇔	Name	,					
⇔	Street						
⇔	City, State,	ZIP5, ZIP4				•	
⇔	Name						
⇔	Street						
⇔	City, State,	Z1P5, ZIP4				-	
⇔	8. Other Pr	ovisions	See Attached	d			
⇨	9. Incorpor	ators' Signat	ures (please keep wri	ting within blocks)			
		1	T_				

ARTICLES OF INCORPORATION

OF

MISSISSIPPI PUBLIC HEALTH INSTITUTE

TO THE SECRETARY OF STATE OF THE STATE OF MISSISSIPPI:

For the purpose of forming a corporation pursuant to the provisions of Sections 79-11-101, et seq., General Laws of Mississippi as amended (the "Mississippi Nonprofit Corporation Act"), the undersigned does hereby make, adopt, and file the following Articles of Incorporation:

ARTICLE I

Name

The name of the corporation (hereinafter referred to as the "Corporation") shall be:

Mississippi Public Health Institute

ARTICLE II

Duration

The duration and existence of the Corporation shall be perpetual.

ARTICLE III

Purpose

- 3.01 The Corporation is organized exclusively for charitable, religious, educational, literary, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the "Code"), or the corresponding provision of any subsequent federal tax law. In furtherance of such purposes, the Corporation is organized and will be operated primarily to protect and improve the health and well-being of Mississippians and its environment through partnerships committed to program innovation, the increase of health resources, education, health awareness, applied research, and policy development; and to engage in charitable programs dedicated to improving the health of Mississippians.
- 3.02 No part of the net carnings of the Corporation shall inure to the benefit of, or be distributable to, its directors, officers, or other private persons, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth herein. No substantial part of the activities of the Corporation shall be the carrying on of propaganda or otherwise attempting to influence legislation, and the Corporation shall not participate or intervene in (including the publishing or distribution of statements) any political campaign on behalf of (or in opposition to) any candidate for public office. Notwithstanding any other provisions of these Articles of Incorporation, the Corporation shall not carry on any other activities not permitted to be carried on (a) by an organization exempt from federal income

tax under Section 501(c)(3) of the Code or the corresponding provision of any subsequent federal tax law, or (b) by an organization contributions to which are deductible under Section 170(c)(2) of the Code or the corresponding provision of any subsequent federal tax law.

ARTICLE IV

Dissolution

Upon dissolution of the Corporation, the Board of Directors shall, after paying or making provision for the payment of all of the liabilities of the Corporation, distribute the assets of the Corporation as specified in a plan of distribution adopted by such Board.

ARTICLE V

Incorporator

The name and address of the Incorporator of the Corporation is as follows:

Matthew P. McLaughlin Balch & Bingham LLP 401 East Capitol Street Suite 200 Jackson, Mississippi 39201

ARTICLE VI

Amendment, Fundamental Corporate Change

These Articles of Incorporation may not be amended, nor may the Corporation adopt a plan of merger, consolidation, or dissolution, without the affirmative votes of not less than two thirds of the whole Board of Directors. Further, the Corporation may not sell, lease, exchange, mortgage, pledge, or otherwise dispose of all or substantially all of its property outside the regular course of business without the affirmative votes of not less than two thirds of the whole Board of Directors.

IN WITNESS WHEREOF, the Incorporator has hereunto set his hand on May 25, 2011.

Incorporator

Matthew McLaughtin



BALCH & BINGHAM LLP

Alabama • Georgia • Mississippi • Washington, DC

Matthew P. McLaughlin (601) 965-8162

Attorneys and Counselors 401 East Capitol Street Suite 200 P.O. Box 22587 (39225) Jackson, Mississippi 39201 (601) 961-9900 (601) 961-4466 Fax www.balch.com (866) 811-7321 (direct fax) mmelaughlin@balch.com

June 3, 2011

BY HAND DELIVERY

Mr. Delbert Hosemann Mississippi Secretary of State 700 North Street Jackson, Mississippi 39202

Re:

Mississippi Public Health Institute

Dear Mr. Hosemann:

Enclosed herewith for filing are Articles of Incorporation for the above-referenced entities. I have also enclosed a check in the amount of \$50.00 to cover the cost of the filing fee.

Should you have any questions or require anything further, please do not hesitate to contact me.

With kindest personal regards, we remain

Sincerely yours,

BALCH & BINGHAM LLP

Matthew P. McLaughlin

MPM:lh Enclosures

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Fee: \$



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P.O. BOX 136 JACKSON, MS 39205-0136 TELEPHONE: (601) 359-1633

2025 Annual Report

Business Information

Business ID: 984133

Business Name: Mississippi Public Health Institute

State of Incorporation: MS

Business Email: info@msphi.org

Phone: (***)***-***

FEIN: **-*****

Principal Address:

5 Olympic Way Suite A

Madison, MS 39110

Registered Agent

Name:

Jones, Ellen

Address:

115 Coventry Cove

Madison, MS 39110

Officers

Title/Name:	Address:	Director:
President:		
Vice President: Glenda Crump	5 Olympic Way Suite A Madison, MS 39110	
Secretary:		
Treasurer:		

NAICS Code/Nature of Business

923120 - Administration of Public Health Programs

Signature

By entering my name in the space provided, I certify that I am authorized to file this document on behalf of this entity, have examined the document and, to the best of my knowledge and belief, it is true, correct and complete as of this day 05/13/2025.

Name:

John M Davis

Assistant Secretary

Address:

217 Grayhawk Dr

Madison, MS 39110

Officers List

Name:

Roy Hart

Chief Executive Officer

John M Davis

Chief Financial Officer

Glenda Crump Vice President Address:

5 Olympic Way Suite A

Madison, MS 39110

217 Grayhawk Dr Madison, MS 39110

5 Olympic Way Suite A Madison, MS 39110