

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Form 3

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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(Print or Type Responses)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Corley Charlotte N.			2. Date of Event Requiring Statemen (Month/Day/Year)								
(Last) One Mississippi Plaza 201 South Spring Street	(First)	(Middle)	10/28/2020		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner S. If Amendment, Date Original Filed (Month/Day/Year)						
Tupelo, MS 38804	(Street)				Officer (give	eOthe e below)	r (specify below)	6. Individual or Joint/Group Filing (Check Applicable Line) XForm filed by One Reporting Person Form filed by More than One ReportingPerson			
(City)	(State)	(Zip)			Table I — Non-Derivative Securities Beneficially Owned						
1. Title of Security (Instr. 4)					nt of Securities cially Owned 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of (Instr. 5)	Indirect Beneficial Ownership			
Common Stock				1,164.2060		D					

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 5(b)(v).

Corley Charlotte N.

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		Derivative Security (Instr. 4)		sion or Exercise Price of Derivative	ship Form of Deriv- ative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
	Date Exer- cisable	Expira- tion Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)				
Explanation of Responses: /s/ Cathy S. Freeman as Attorney in Fact										
** Intentional misstatements or omissions of facts constitute Federal				10/29/2020						
See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).		Signature of I	Date							

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Corley Charlotte N.