Mississippi Net Taxable Income Schedule 2024

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R&D Expense Election

20 Apportionable business income (loss) (line 18 minus line 19)

FEIN Bonus Depreciation Election **FEDERAL TAXABLE INCOME** (ROUND TO THE NEAREST DOLLAR) Ordinary business income (loss) (from federal Form 1120S, page 1, line 22 or federal Form 1065, page 1, line 23. If multistate direct accounting, enter zero and skip to line 25) Total federal Schedule K income (pass-through items not included in line 1 above from federal Form 1120S, page 3, Schedule K, line 2 through line 10 or from federal Form 1065, page 5, Schedule K, line 2 through line 11) Total federal Schedule K deductions (pass-through items not included in line 1 above from federal Form 1120S, page 3, Schedule K, line 11 through line 12e or from federal Form 1065, page 5, Schedule K, line 12 through line 13e) Total federal business income (loss) (line 1 plus line 2 minus line 3) -00 STATE ADDITIONS TO FEDERAL TAXABLE INCOME State, local or foreign government taxes based on income Interest on obligations of other states or political subdivisions (net of expenses) Depletion expense in excess of cost Federal special depreciation allowance Other additions required by law (attach schedule) Total additions (add line 5 through line 9) STATE DEDUCTIONS FROM FEDERAL TAXABLE INCOME 11 Interest on obligations of the United States (net of expenses) 12 Wages reduced on federal return for federal employment tax credits 13 Income (loss) from partnership, S corporation or trust 14 Income (loss) from construction contracting or production of natural mineral resource products (net of expenses) 15 Additional depreciation due to a difference in the depreciable base for federal and state purposes (attach schedule) 16 Other deductions (attach schedule) 17 Total deductions (add line 11 through line 16) .00 APPORTIONMENT / ALLOCATION If 100% Mississippi, complete line 18 then skip to page 2, line 22 18 Adjusted federal income (loss) (line 4 plus line 10 minus line 17) 19 Adjustment for nonbusiness income (loss) net of expenses (from Form 84-150, column E, line 2)

Form 84-122-24-8-2-000 (Rev. 12/24



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Α	PPORTIONMENT / ALLOCATION		
21	Apportionment ratio (enter ratio and check box as shown on Form 84-125, Part II)	21	%
	Sales (retail) Manufacturers (retail) Manufacturers (wholesale), Financial institutions, Pipelines, (for pharmaceutical suppliers, see instructions)	Special Formula	
22	Mississippi apportioned income (loss) (if 100% Mississippi, enter line 18, otherwise, multiply line 20 by line 21)	22	.00.
23	Nonbusiness income (loss) allocated to Mississippi (from Form 84-150, column F, line 2)	23	.00.
24	Mississippi income (loss) from partnership, S corporation or trust (attach Mississippi K-1s, Form 84-132)	24	.00
25	Mississippi income (loss) from construction contracting or production of natural mineral resource products (from Form 84-124, page 2, line 31 or page 3, line 46)	25	.00.
26	Other adjustments required by law (attach schedule)	26	.00.
27	Income exemption (attach schedule; if not applicable, enter zero)	27	.00.
28	Total income (loss) apportioned and directly allocated to Mississippi (add line 22 through line 26 minus line 27)	28	.00
N	ISSISSIPPI COMPOSITE TAXABLE INCOME		
lf f	iling composite, complete lines 29 through 32		
29	Mississippi composite net income (loss) (from Form 84-131) line 4a	29	.00.
30	Composite return filing adjustment (attach schedule)	30	.00.
31	Less Mississippi composite net operating loss deduction (from Form 84-155, line 2)	31	.00.
32	Mississippi composite net taxable income (loss) (line 29 minus line 30 and line 31; enter on Form 84-105, line 5. If negative, enter zero on Form 84-105, line 5)	32	.00.
N	ISSISSIPPI ELECTING PASS-THROUGH ENTITY TAXABLE INCOME		
lf f	iling as an electing pass-through entity, complete lines 33 through 35		
33	Total Mississippi net income (loss) (from line 28)	33	.00.
34	Less Mississippi electing pass-through entity net operating loss deduction (from Form 84-155, line 2)	34	.00.
35	Mississippi net taxable income (loss) (line 33 minus line 34; enter on Form 84-105, line 5. If negative, enter zero on Form 84-105 line 5.)	35	.00.