



Mississippi Partnership Income Tax Estimate Voucher 2024

Tax Year Beginning _____
mm dd yyyy

Tax Year Ending _____
mm dd yyyy

Estimate Due Date _____
mm dd yyyy

FEIN _____

| | | | |
|-----------------------|-------|--------|---|
| Business Name and DBA | | | Total number of owners/partners filed on estimate form(s) _____ |
| Address | | | |
| City | State | Zip +4 | |

1 Total partnership net gain or profit 1 _____ .00

2 5% of net gain or profit remitted by the partnership for the owners/partners listed below 2 _____ .00

| OWNER/PARTNER NAME | FEIN | SSN | IDENTIFICATION NUMBER | OWNERSHIP PERCENTAGE | AMOUNT OF PAYMENT |
|--------------------|------|-----|-----------------------|----------------------|-------------------|
|--------------------|------|-----|-----------------------|----------------------|-------------------|

| | | | | | |
|---------|--------------------------|--------------------------|-------|---------------|-------------|
| 3 _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | 3 _____ .00 |
|---------|--------------------------|--------------------------|-------|---------------|-------------|

| | | | | | |
|---------|--------------------------|--------------------------|-------|---------------|-------------|
| 4 _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | 4 _____ .00 |
|---------|--------------------------|--------------------------|-------|---------------|-------------|

| | | | | | |
|---------|--------------------------|--------------------------|-------|---------------|-------------|
| 5 _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | 5 _____ .00 |
|---------|--------------------------|--------------------------|-------|---------------|-------------|

| | | | | | |
|---------|--------------------------|--------------------------|-------|---------------|-------------|
| 6 _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | 6 _____ .00 |
|---------|--------------------------|--------------------------|-------|---------------|-------------|

| | | | | | |
|---------|--------------------------|--------------------------|-------|---------------|-------------|
| 7 _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | 7 _____ .00 |
|---------|--------------------------|--------------------------|-------|---------------|-------------|

| | | | | | |
|---------|--------------------------|--------------------------|-------|---------------|-------------|
| 8 _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | 8 _____ .00 |
|---------|--------------------------|--------------------------|-------|---------------|-------------|

| | | | | | |
|---------|--------------------------|--------------------------|-------|---------------|-------------|
| 9 _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | 9 _____ .00 |
|---------|--------------------------|--------------------------|-------|---------------|-------------|

| | | | | | |
|----------|--------------------------|--------------------------|-------|---------------|--------------|
| 10 _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | 10 _____ .00 |
|----------|--------------------------|--------------------------|-------|---------------|--------------|

| | | | | | |
|----------|--------------------------|--------------------------|-------|---------------|--------------|
| 11 _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | 11 _____ .00 |
|----------|--------------------------|--------------------------|-------|---------------|--------------|

| | | | | | |
|----------|--------------------------|--------------------------|-------|---------------|--------------|
| 12 _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | 12 _____ .00 |
|----------|--------------------------|--------------------------|-------|---------------|--------------|

| | | | | | |
|----------|--------------------------|--------------------------|-------|---------------|--------------|
| 13 _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | 13 _____ .00 |
|----------|--------------------------|--------------------------|-------|---------------|--------------|

14 Total of amounts entered on line 3 through line 13 14 _____ .00

15 Total amounts from all supplemental pages (Form 84-387, page 2) 15 _____ .00

16 Total estimate payment (add line 14 and line 15; should equal amount of payment/gain entered on line 2) 16 _____ .00

I declare, under penalties of perjury, that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, this is a true, correct and complete return.

Officer/ Agent Signature

Title

Date

- **Print FEIN on check**
- **Make check or money order payable to Department of Revenue or see instructions for electronic payment options**

Mail To: Department of Revenue P.O. Box 23191 Jackson, MS 39225-3191



Mississippi Partnership Income Tax Estimate Voucher 2024

FEIN _____

| OWNER/PARTNER NAME | FEIN | SSN | IDENTIFICATION NUMBER | OWNERSHIP PERCENTAGE | AMOUNT OF PAYMENT |
|--|--------------------------|--------------------------|-----------------------|----------------------|-------------------|
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | ____ . ____ % | _____ .00 |
| Subtotal (add lines and enter total amount here and on Form 84-387, page 1, line 15) | | | | | _____ .00 |