

Mississippi Corporate Income and Franchise Tax Return 2015

08 Tax Year Beginning 99999999

Tax Year Ending 99999999

10 FEIN 999999999

Mississippi Secretary of State ID 999999999

Table with 3 columns: Legal Name and DBA, CHECK ALL THAT APPLY, CHECK ONE. Includes fields for Address, City, State, Zip +4, County Code, and NAICS Code.

FRANCHISE TAX (ROUND TO THE NEAREST DOLLAR)

Table for Franchise Tax with 3 columns: Line number, Description, Amount. Includes lines 1-4 for Taxable capital, Franchise tax, Franchise tax credit, and Net franchise tax due.

INCOME TAX

Table for Income Tax with 3 columns: Line number, Description, Amount. Includes lines 5-8 for Combined income tax return, Mississippi net taxable income, Income tax, and Net income tax due.

PAYMENTS AND TAX DUE

Table for Payments and Tax Due with 3 columns: Line number, Description, Amount. Includes lines 9-16 for Total franchise and income tax, Overpayments, Estimated tax payments, Total payments, Net total franchise and income tax, and Late payment interest/penalty.



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04
05
06
07
08 FEIN 999999999

11 17 Late filing penalty (minimum income tax penalty \$100) 17 999999999

12 18 Total balance due (if line 9 is larger than line 12, add line 13 through line 17) 18 999999999

13 19 Total overpayment (if line 12 is larger than line 9, subtract line 9 from line 12) 19 999999999

14 20 Overpayment credited to next year (from line 19) 20 999999999

15 21 Overpayment to be refunded (line 19 minus line 20) 21 999999999

20 See instructions for electronic payment options or attach payment voucher, Form 83-300, with check or money order for balance due.

PART I: CORPORATE INFORMATION

24 1 Is this a publicly traded corporation? Yes If yes, under what symbol? 9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X No

25 2 If final return, enter reason and date effective: 9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X Date 12312013

26 3 If the corporation has been sold or merged, complete the following: Name, address and FEIN of the new existing corporation:

27 9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X FEIN 999999999

28 4 If amended return, check reason. Mississippi Correction Federal Correction Other 9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X

29 5 Check if the company has been audited by the IRS. If the company has been audited, what year(s) are involved? 9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X

30 6 Principal business activity in Mississippi 9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X 6a County location in Mississippi XXXXXXXXXXXXXXXXXXXX

31 7 Principal product or service in Mississippi 9X

32 8 Contact person for this return 9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X 8a Location and Phone number 9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X

PART II: CORPORATE OFFICER INFORMATION

List the owners, officers, directors or partners who have a responsibility in the fiscal management of the organization.

OFFICER NAME AND TITLE	SSN	ADDRESS	OWNERSHIP PERCENTAGE
XXXXXXXXXXXXXXXXXXXXXX	999999999	X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9	999.9999
XXXXXXXXXXXXXXXXXXXXXX	999999999	X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9	999.9999
XXXXXXXXXXXXXXXXXXXXXX	999999999	X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9	999.9999
XXXXXXXXXXXXXXXXXXXXXX	999999999	X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9	999.9999
XXXXXXXXXXXXXXXXXXXXXX	999999999	X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9	999.9999
XXXXXXXXXXXXXXXXXXXXXX	999999999	X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9	999.9999

