5007 6000 505 17-32 1-0 00 167 60/1 106 170 20 21 22 23 24 25 20 04	6 27 28 29 3	0 31 32 33 34 35 36 37 38 39 4 WIISS Resident Individ						3 64 65 6	6 67 68 69 70 71 72 73 74 75 76 77 78 <u>79</u>
05					ilic	Iax	IXCIAIII		
06 8 8 8 8 9 1 0 5 1 7 3 1 0 0 0 1 1 1 1 1			201	/					
07									X Amended
08									
Taxpayer First Name		ast Name				SN			999999999
10 XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXX	XXXX	Sp	oouse	SSN		99999999
12 XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		(XXXXXXXXXXXXXX	XXX	XXXX	1 2	X X			ed or Joint Return (\$12,000 Died in Tax Year (\$12,000
₁₄ X9X9X9X9X9X9X9X9X9X9	(9X9)	x9x9x9x9x9x9x9	x92	(9X9X	3	Х	Married - F	iling S	eparate Returns (\$12,000)
15 City	State	Zip	Cou	nty Code	4	X	Head of Fa	mily (\$	88,000)
16XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XX	99999		99	5	X	Single (\$6,	000)	
17									
18 EXEMPTIONS									
19									
20 Dependents (in column B, enter "C" for child	, "P" for p	arent or "R" for relative)	8	X Ta	axpaye	er Age	65 or Over	X	Spouse Age 65 or Over
21 6 (A) Name	(B)	(C) Dependent SSN		X Ta	ахраує	er Blind	t	X	Spouse Blind
22 XXXXXXXXXXXXXXXXXXXX	X	999999999							
23 XXXXXXXXXXXXXXXXXXX	X	999999999	9	Total de	pende	ents lin	e 7 plus num	ber of	boxes checked line 8 99
24 XXXXXXXXXXXXXXXXXXX	X	999999999							
25 XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	X	999999999	10	Line 9 x				10	999999999
26			11		-		emption	11	999999999
7 Total number of dependents (from lin	e 6 and	Form 80-491) 9 9	12	Total (lin	ne 10 j	plus lir	ne 11)	12	999999999
28									
MISSISSIPPI INCOME TAX				Colum	ın A (Taxpa	yer)		Column B (Spouse)
30	/s	0 liv - 00)			000	000	000		000000000
31 13 Mississippi adjusted gross income			13/			999		13B	999999999
32 14 Standard or itemized deductions (if it			14/	_		999		14B	999999999
33 15 Exemptions (from line 12; if married			15/	4		999		15B	999999999
34 16 Mississippi taxable income (line 13			16/	. 9	999	999	999	16B	999999999
17 Income tax due (from Schedule of T		• • • • • • • • • • • • • • • • • • • •						17	999999999
18 Credit for tax paid to another state (from Form 80-160, line 13; attach other state return)							18	999999999	
19 Other credits (from Form 80-401, line 1)							19	999999999	
Net income tax due (line 17 minus li	ne 18 a	nd line 19)						20	999999999
239 21 Consumer use tax (see instructions)								21	999999999
22 Catastrophe savings tax (from Form 80-360, line 11)								22	999999999
23 Total Mississippi income tax due (line 20 p	olus line 21 and line 22)						23	999999999
42									
PAYMENTS									
24 Mississippi income tay withhold (com	volete F	orm 90 107)							000000000
4524 Mississippi income tax withheld (com			uin al	coture				24	999999999
46 25 Estimated tax payments, extension p	-				I\			25	999999999
Refund received and/or amount carried forward from original return (amended return only) Total payments (line 24 plus line 25 minus line 26)								26	999999999
Total payments (line 24 plus line 25 r	mnus IIr	IE 20)						27	999999999
REFUND OR BALANCE DUE									
		(If no overpayment is due	200	line 29	kin to	line 3	84)		
51 52 28 Overpayment (if line 27 is more than	line 22			20, 8	, KIP LO	,е	(*)		9999999999
			')	v	For	mere or	Fishermen	28	9999999999
				X		iners or e instruc		29	999999999
								30	999999999
								31	999999999
							DEELIND	32	9999999999
Overpayment refund (line 30 minus Balance due (if line 23 is more than			1		++	BAL A	REFUND NCE DUE	33	
				8)		DALA	NCE DUE	34	999999999
	esuma	teu tax (IIOIII FOIIII 80-320, I	irie I	0)	A 140	I INIT V		35	999999999
Total due (line 34 plus line 35)					AIVIU	UNI	OU OWE	36	999999999
61 V Installment Agreement Pogues									
62 X Installment Agreement Reques (see instructions for eligibility; a		m 71-661)							
63									

24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 4 **M ISSISSI D D** 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 Resident Individual Income Tax Return 05 2017 06 SSN 99999999 07 08 INCOME Column A (Taxpayer) Column B (Spouse) ງ9 10 10 11 37 Wages, salaries, tips, etc. (complete Form 80-107) 999999999 999999999 37A 11 ₁₂38 Business income (loss) (attach Federal Schedule C or C-EZ) 999999999 999999999 38A 38B 12 Capital gain (loss) (attach Federal Schedule D, if applicable) 13 39 999999999 999999999 39A 39B 13 1440 Rent, royalties, partnerships, S corporation trusts, etc. (from Form 80-108, part IV) 999999999 999999999 15 40A 40B 15 ₁₆41 Farm income (loss) (attach Federal Schedule F) 999999999 999999999 41A 41B 16 ₁₇42 Interest income (from Form 80-108, part II, line 3) 999999999 999999999 42A 42B 17 ₁₈43 Dividend income (from Form 80-108, part II, line 6) 999999999 999999999 43A 43B 18 ₁₉44 Alimony received 999999999 999999999 44A 44B 19 ₂₀45 Taxable pensions and annuities (complete Form 80-107) 999999999 999999999 45A 45B 20 ₂₁46 Unemployment compensation (complete Form 80-107) 999999999 999999999 46A 46B 21 ₂₂47 Other income (loss) (from Form 80-108, part V, line 10) 999999999 999999999 47A 47B 22 ₂₃48 Total income (add lines 37 through 47) 999999999 999999999 48A 48B 23 **ADJUSTMENTS** Column A (Taxpayer) Column B (Spouse) 2 26 26 ₂₇49 Payments to IRA 999999999 999999999 49A 49B 27 ₂₈50 Payments to self-employed SEP, SIMPLE and qualified retirement plans 999999999 999999999 50A 50B 28 Interest penalty on early withdrawal of savings 999999999 999999999 ₂₉51 51A 51B 29 ₃₀**52** Alimony paid (complete below) 999999999 999999999 52A 52B 30 31 31 Name XXXXXXXXXXXXXXXXXX SSN 999999999 State XX 32 32 SSN 99999999 XXName XXXXXXXXXXXXXXXXX State 33 33 34 34 999999999 999999999 ₃₅53 Moving expense (attach Federal Form 3903) 53A 53B 35 ₃₆54 National Guard or Reserve pay (enter the lesser of amount or \$15,000) 999999999 999999999 54A 54B 36 ₃₇55 Mississippi Prepaid Affordable College Tuition (MPACT) 999999999 999999999 55A 55B 37 Mississippi Affordable College Savings (MACS) 999999999 999999999 ₃₈56 56A 56B 38 ₃₉57 Self-employed health insurance deduction 999999999 999999999 57A 57B 39 Health savings account deduction 999999999 999999999 ₄₀58 58A 58B 40 ₄₁59 Catastrophe savings account deduction 999999999 999999999 59A 59B Self-employment tax deduction 999999999 999999999 4260 60A 60B 42 ₄₃61 Total adjustments (add lines 49 through 60) 999999999 999999999 61A 61B 43 999999999 999999999 4462 Mississippi adjusted gross income (line 48 minus line 61; enter 62A 62B 44 on page 1, line 13) AMENDED RETURN - EXPLANATION OF CHANGES TO ORIGINAL RETURN (attach additional statement if needed) 51 51 52 This return may be discussed with the preparer Χ Yes X No 52 53 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. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. 55 55 999999999 56 56 Taxpayer Signature Date Taxpayer Phone Number Paid Preparer PTIN 57 57 58 58 Spouse Signature Date Paid Preparer Phone Number Paid Preparer Email Address 59 59 60 60 Paid Preparer Signature Date Paid Preparer Address State Zip Code 61 61 62 62 Mail REFUND returns to: Department of Revenue, P.O. Box 23058, Jackson, MS 39225-3058