04			/liss	is	sippi			04 00 00		
05		Resident Indiv	/idua	al I	ncome	Tax Retu	ırn			
06			2	01	8				X Amended	
08									7111011404	
Taxpayer First Name	Initial	Last Name		\top	S	SN			999999999	
$_{10}$ XXXXXXXXXXXXXXXXXXXX	XX X	XXXXXXXXXXX	XXX	XX.	XXX S	oouse SSN			999999999	
Spouse First Name	Initial	Last Name								
$_{12}$ $XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX$	XX X	XXXXXXXXXXXX	XXX	XX.					ed or Joint Return (\$12,	
Mailing Address (Number and Street, Including Rura					2				Died in Tax Year (\$12,0	- 1
14 <u>X9X9X9X9X9X9X9X9X9X</u> 9X	9X9X9 State			X92 inty C					eparate Returns (\$12,00	00)
City City			000						8,000)	
16 XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XX XX	99999		9	9 3	X Singl	e (\$6,0)00)		
17 18 EXEMPTIONS										
18 EXEMPTIONS										
₂₀ Dependents (in column B, enter "C" for ch	ild, "P" for	parent or "R" for relative)	8	Х	Taxpaye	er Age 65 or 0	Over	Х	Spouse Age 65 or O	
21 6 (A) Name	(B)	(C) Dependent SSN		X	Taxpaye	7		X	Spouse Blind	
22 XXXXXXXXXXXXXXXXXXX	X	99999999								
23 XXXXXXXXXXXXXXXXXXXX	X	999999999	9	Tc	otal depende	ents line 7 plu	s num	ber of I	boxes checked line 8	
24 XXXXXXXXXXXXXXXXXX	X	999999999								
25 XXXXXXXXXXXXXXXXXXX	X	999999999	10		ne 9 x \$1,50			10	999999999	9
26			11			atus exemptio	n	11	999999999	
7 Total number of dependents (from	line 6 an	nd Form 80-491) 9 9	12	To	otal (line 10	plus line 11)		12	999999999	9
28										
MISSISSIPPI INCOME TAX				(Column A (Taxpayer)			Column B (Spouse)	
30	ma (from	nago 2 lino 64)			0000	00000			00000000	0
 Mississippi adjusted gross inco Standard or itemized deductions (incompared to the property) 			13			999999		13B	999999999	^
Standard or itemized deductions (iExemptions (from line 12; if marrie			14			999999		14B	999999999	^
33 13 Exemptions (non-line 12, in mark) 34 16 Mississippi taxable income (line						999999		15B	999999999	$^{\circ}$
3416 Mississippi taxable income (line 13 minus line 14 and line 15) 16A 99999999 18 Income tax due (from Schedule of Tax Computation, see instructions)								16B 17	999999999	^
38 18 Credit for tax paid to another state (from Form 80-160, line 14; attach other state return)								18	999999999	
37 19 Other credits (from Form 80-401, line 1)								19	999999999	
20 Net income tax due (line 17 minus line 18 and line 19)								20	999999999	
21 Consumer use tax (see instructions)								21	999999999	
22 Catastrophe savings tax (from Form 80-360, line 14)								22	999999999	_
23 Total Mississippi income tax due (line 20 plus line 21 and line 22)								23	999999999	
42										
PAYMENTS										
44										_
45 24 Mississippi income tax withheld (c								24	999999999	
4625 Estimated tax payments, extension payments and/or amount paid on original return								25	999999999	
4726 Refund received and/or amount carried forward from original return (amended return only)								26	999999999	^
Total payments (line 24 plus line 2	o minus	line 20)						27	999999999	
750 REFUND OR BALANCE DUE				_						
		(If no overpayment is o	lue on	line	28 skin to	line 34)				
51 52 28 Overpayment (if line 27 is more th	an line 2				, 20, 3KIP (C) IIIIC 04)		20	999999999	a l
₅₃ 29 Interest on underestimated tax (fro			_,,		X Fari	mers or Fisherr	nen	28 29	999999999	$^{\circ}$
430 Adjusted overpayment (line 28 minus line 29) (see instructions)							+++	30	999999999	
31 Overpayment to be applied to next year estimated tax account								31	999999999	
632 Voluntary contribution (from Form 80-108, part III)								32	999999999	
5733 Overpayment refund (line 30 minus line 31 and line 32) REFUND							ND	33	999999999	
BALANCE DUE BALANCE DUE								34	999999999	
₅₉ 35 Interest, penalty and interest on ur	nderestim	nated tax (from Form 80-320), line	19)				35	999999999	9
Total due (line 34 plus line 35)					AMO	UNT YOU O	WE	36	999999999	9
61										
62 X Installment Agreement Requ (see instructions for eligibility		form 71-661)								
63	, , , , , , , , , , , , , , , , , , , ,									

Form 80-105-18-3-2-000 (Rev. 08/18) 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 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 Mississippi Resident Individual Income Tax Return Page 2 05 06 2018 99999999 07 08 Column A (Taxpayer) **INCOME** Column B (Spouse) 19 10 10 11 37 999999999 999999999 Wages, salaries, tips, etc. (complete Form 80-107) 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 999999999 ₁₆41 Farm income (loss) (attach Federal Schedule F) 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 999999999 999999999 Alimony received 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 XXXXXXXXXXXXXXXXX SSN 999999999 State XX32 32 33 33 ₃₄53 999999999 999999999 Moving expense (attach Federal Form 3903) 53A 53B 34 National Guard or Reserve pay (enter the lesser of amount or \$15,000) 35 **54** 999999999 999999999 54A 35 54B ₃₆55 Mississippi Prepaid Affordable College Tuition (MPACT) 999999999 999999999 55A 55B 36 ₃₇56 Mississippi Affordable College Savings (MACS) 999999999 999999999 56A 56B 37 Self-employed health insurance deduction 999999999 999999999 ₃₈57 57A 57B 38 ₃₉58 Health savings account deduction 999999999 999999999 58A 58B 39 Catastrophe savings account deduction 999999999 999999999 ₄₀59 59A 59B 40 ₄₁60 Self-employment tax deduction 999999999 999999999 60A 60B 41 First-time home buyers savings account deduction 999999999 999999999 ₄₂61 61A 61B 42 ₄₃62 Agricultural disaster program compensation deduction 999999999 999999999 62A 62B 43 Total adjustments (add lines 49 through 62) 999999999 999999999 44 63 63A 44 999999999 999999999 45 **64** Mississippi adjusted gross income (line 48 minus line 63; enter 64A 64B 45 on page 1, line 13) 46 46 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 Χ 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 X99999999 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