MS8453-F		Mississippi come Tax Decla	ration	Submission N	999999999999999	999
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Tax Year Beginning 99		2016	Tax Ye	ear Ending	99 99 9999	
Name of Estate or Trust						
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Name and Title of Fiduciary						
Mailing Address (Number and Street, Inclu			Entity FEIN		999999	
<u> </u>	X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9	9X9X9X9X9X9X9X County Code	Decedent/Debtor	SSN	999999	9999
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Mississippi taxable income (F			1		999999999	
2 Total Mississippi tax (Form 8			2		999999999	
Mississippi tax payments (Fo			3		999999999	
Refund (Form 81-110, line 12 Amount you owe (Form 81-1			4		999999999	
6 Amount you owe (Form 81-1	TU, line 15)		5		9999999999	99
PART II: DIRECT DEPOSIT/D	IRECT DEBIT					
	99999	3 Туре	e of account:			
Account number 9999	99999999999999	Checkin	a v	Savings		
		CHECKIII	g X	Javings	X	
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