

Mississippi Secretary of State
700 North Street P. O. Box 136, Jackson, MS 39205-0136

ADMINISTRATIVE PROCEDURES NOTICE FILING

AGENCY NAME Mississippi Department of Revenue		CONTACT PERSON Sam Portera, CPA	TELEPHONE NUMBER 601-923-7317	
ADDRESS PO Box 1033		CITY Jackson	STATE MS	ZIP 39215
EMAIL sam.portera@dor.ms.gov	SUBMIT DATE 8/9/21	Name or number of rule(s): Title 35, Part III, Subpart 3, Chapter 03 Employee Benefits		

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: This rule was amended to include a sentence in paragraph to address the tax treatment of damages in cases of nonphysical injury. Old paragraph 105 was removed because it was based on IRC Section 120 that was repealed in 2014. Other minor changes were made.

Specific legal authority authorizing the promulgation of rule: Pursuant to Miss. Code Ann. Sections 27-7-81 and 27-7-343, the Commissioner of Revenue is authorized to, "from time to time make such rules and regulations, not inconsistent with [the Income Tax Law of 1952], as he may deem necessary to enforce its provisions."

List all rules repealed, amended, or suspended by the proposed rule: Miss. Admin Code Title 35.III.3.03 Employee Benefits.

ORAL PROCEEDING:

- An oral proceeding is scheduled for this rule on Date: Time: Place:
- Presently, an oral proceeding is not scheduled on this rule.

If an oral proceeding is not scheduled, an oral proceeding must be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) or more persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address, email address, and telephone number of the person(s) making the request; and, if you are an agent or attorney, the name, address, email address, and telephone number of the party or parties you represent. At any time within the twenty-five (25) day public comment period, written submissions including arguments, data, and views on the proposed rule/amendment/repeal may be submitted to the filing agency.

ECONOMIC IMPACT STATEMENT:

- Economic impact statement not required for this rule. Concise summary of economic impact statement attached.

TEMPORARY RULES	PROPOSED ACTION ON RULES	FINAL ACTION ON RULES
<p>Original filing _____</p> <p>Renewal of effectiveness _____</p> <p>To be in effect in _____ days</p> <p>Effective date:</p> <p>Immediately upon filing _____</p> <p>Other (specify): _____</p>	<p>Action proposed:</p> <p>New rule(s) _____</p> <p><input checked="" type="checkbox"/> Amendment to existing rule(s)</p> <p>Repeal of existing rule(s) _____</p> <p>Adoption by reference _____</p> <p>Proposed final effective date:</p> <p>30 days after filing _____</p> <p><input checked="" type="checkbox"/> Other (specify): 1/1/22</p>	<p>Date Proposed Rule Filed:</p> <p>Action taken:</p> <p>Adopted with no changes in text _____</p> <p>Adopted with changes _____</p> <p>Adopted by reference _____</p> <p>Withdrawn _____</p> <p>Repeal adopted as proposed _____</p> <p>Effective date:</p> <p>30 days after filing _____</p> <p>Other (specify): _____</p>

Printed name and Title of person authorized to file rules: Sam Portera, CPA, Deputy Office Director, Tax Policy

Signature of person authorized to file rules: *Sam Portera* Sam Portera

<p>OFFICIAL FILING STAMP</p> <div style="border: 1px solid black; height: 150px; width: 100%;"></div> <p>Accepted for filing by</p>	<p>DO NOT WRITE BELOW THIS LINE</p> <p>OFFICIAL FILING STAMP</p> <div style="border: 1px solid black; height: 150px; width: 100%;"></div> <p>Accepted for filing by</p>	<p>OFFICIAL FILING STAMP</p> <div style="border: 1px solid black; height: 150px; width: 100%;"></div> <p>Accepted for filing by</p>
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The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.