

Mississippi Partnership / LLP / LLC Partners/Members Shares of Income

Schedule K

Year

Page 1

Partnership Name	FEIN
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CURRENT YEAR'S TAX CREDITS (From Form 83-401)

1. Ad Valorem Tax Credit (From Schedule A, Form 83-401.)
2. Other credits: (Enter description and code number from Schedule B, Form 83-401.)
 - a. _____
 - b. _____
 - c. _____
 - d. _____

	Code	Credit Amount
	1 4	

Enter Partner/Member information below. If additional space is needed, use another Form 86-131.

(A) Name, Address & SSN/ FEIN of Each Partner/Member	(B) Ownership Percentage	(C) State of Residence	Allocations to Partners/Members		
			RESIDENTS		NON-RESIDENTS
			(D-1) Total Net Income (Fully Taxable)	(E-1) Total Amount of MS Income (Taxable)	(F) Total Amount of Non-MS Income (Not Taxable)
			(D-2) Total Credits (Memo Entry)	(E-2) Total Credits (Memo Entry)	
(a) SSN/FEIN:	%				
(b) SSN/FEIN:	%				
(c) SSN/FEIN:	%				
(d) SSN/FEIN:	%				
(e) SSN/FEIN:	%				
(f) SSN/FEIN:	%				
(g) SSN/FEIN:	%				

Amounts from Page 2		%	XXXX			
TOTALS (Column B, D-1, E-1, & F)		%	XXXX	\$	\$	\$
AMOUNT ALLOCATED TO PARTNERS - (Total of Columns D-1, E-1, & F)					\$	

A Mississippi Partnership/LLP/LLC Schedule K-1, Form 86-132, should be prepared for each partner/member. The amount taxable for each partner/member of the Partnership/LLP/LLC must be reported by each partner/member in their individual capacity as an element of income earned in Mississippi. Resident partners/members must report such income on Mississippi Resident Individual Income Tax Form 80-105. Non-resident partners/members must report their distributive share on Mississippi Nonresident or Part-year Individual Income Tax Form 80-205.

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			RESIDENTS	NON-RESIDENTS	
			(D-1) Total Net Income (Fully Taxable)	(E-1) Total Amount of MS Income (Taxable)	(F) Total Amount of Non-MS Income (Not Taxable)
			(D-2) Total Credits (Memo Entry)	(E-2) Total Credits (Memo Entry)	
(h) SSN/FEIN:	%				
(i) SSN/FEIN:	%				
(j) SSN/FEIN:	%				
(k) SSN/FEIN:	%				
(l) SSN/FEIN:	%				
(m) SSN/FEIN:	%				
(n) SSN/FEIN:	%				
(o) SSN/FEIN:	%				
(p) SSN/FEIN:	%				
(q) SSN/FEIN:	%				
TOTALS - Columns B, D-1, E-1, and F (To Page 1)	%	XXXX	\$	\$	\$