Mississippi Tax Credit For Income Tax Paid By Electing Pass-Through Entity

Pan	۵	1

Name	 FEIN

Complete this form if you are filing a composite or electing pass-through entity return and you have received credit for taxes paid on your behalf from another electing pass-through entity(s) that you are an owner, member, shareholder or partner of. Enter the name, FEIN, Mississippi taxable income and the amount of taxes paid on your behalf. The Mississippi K-1(s) you received from electing pass-through entities must be attached to the return.

COLUMN A	COLUMN B	COLUMN C		COLUMN D
NAME OF ENTITY	FEIN	MISSISSIPPI TAXABLE	INCOME	AMOUNT OF TAX PAID
			00 _	.00
			00 _	-,000
			00 _	.00.
				.00
				.00
			— <u> </u> 00 –	
			00 _	_ · O(
			00 _	O(
			00 _	_ o O
			00 _	- O
Total column C and column D from page 1 above	1C _		00 1D _	.00
Totals from page 2 (total of column C and column D from page(s) Form 84-161)	n additional 2C _		₀₀ 2D _	- 00
Total Mississippi taxable income (line 1C plus line 2C) a of taxes paid on pass-through entity returns (line 1D plu			₀₀ 3D _	
Income tax due (from Form 83-105, page 1, line 6; or Fo	orm 84-105, line 6)		4 _	_ · 0
Income tax credits (from Form 83-105, line 8; or Form 8-	4-105, line 8)		5 _	. 0
Net income tax due before electing pass-through entity	credits (line 4 minus line	5)	6 _	- O
Amount of credit claimed for tax paid on an electing Pas line 6; enter on Form 83-105, page 1, line 7 or Form 84- electing Pass-Through Entity Tax Return is not being cla	105, page 1, line 7); If cr		7 _	01
Excess credit for tax paid on an electing Pass-Through Form 83-105, page 2, line 20 or Form 84-105, page 2, li	Entity Return (line 3D mi ne 20)	nus line 7; include amount o	n 8 _	

Mississippi Tax Credit For Income Tax Paid By Electing Pass-Through Entity

	20	_	2
г	ay	E	_

FEIN

COLUMN A	COLUMN B	COLUMN C	COLUMN D
NAME OF ENTITY	FEIN	MISSISSIPPI TAXABLE INCOME	AMOUNT OF TAX PAID
			00
			00
		00 -	· 00
		00 -	.00
		00 -	00
		00 -	.00
		00 -	00
		00 -	.00
		00 -	00
		00 -	.00
		00 -	00
		00 -	00
			00
			- 00
		00 -	00
		00 -	00
		00 -	-00
		00 -	00
		00 -	00
		00 -	.00
		00 -	00
Totals (total of column C and column D; enter here page 1, line 2)	and on Form 84-161,	00 -	

Supplemental Page	of
11	