

MS8453-PTE

Mississippi Pass - Through Entity Declaration for Electronic Filing 2017

Tax Year Beginning

Tax Year Ending

FEIN

DO NOT MAIL THIS DOCUMENT TO THE DEPARTMENT OF REVENUE

Legal Name and DBA

Address City State Zip +4 County Code

PART I: TAX RETURN INFORMATION (ROUND TO THE NEAREST DOLLAR)

Table with 2 columns: Line number and Description. Rows include Mississippi taxable income, Total income tax, Total payments & credits, Amount you owe, Overpayment, Refund, and Amount of payment remitted electronically.

* If the pass-through entity is filing a balance due return and the Department of Revenue does not receive full and timely payment of its tax liability, the pass-through entity will be liable for the tax liability and all applicable interest and penalties.

PART II: DECLARATION OF OFFICER

Under the penalties of perjury, I declare that I am an officer of the above pass-through entity and that the information I have given my electronic return originator (ERO), transmitter, and/or intermediate service provider (ISP) and the amounts in Part I above agree with the amounts on the corresponding lines of the pass-through entity's Mississippi Pass-Through Entity Tax Return.

Sign Here Signature of Officer Date Title

PART III: DECLARATION OF ELECTRONIC RETURN ORIGINATOR (ERO) AND PAID PREPARER

I declare that I have reviewed the above pass-through entity's return and that the entries on Form MS8453-PTE are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return.

Form with fields for ERO Signature, Date, Check if Also Paid Preparer, Check if Self-Employed, ERO SSN or PTIN, Firm Name, address and ZIP code, EIN, and Phone No.

Under penalties of perjury, I declare that I have examined the above pass-through entity's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This declaration is based on all information of which I have any knowledge.

Form with fields for Paid Preparer Signature, Date, Check if Also Paid Preparer, Check if Self-Employed, Preparer SSN or PTIN, Firm Name, address and ZIP code, EIN, and Phone No.