Form 80-107-23-8-1-000 (Rev. 11/23)



Mississippi Income / Withholding Tax Schedule 2023

Primary Taxpayer Name (as shown on Forms 80-105, 80-205 and 81-110)	

THIS FORM MUST BE FILED EVEN IF YOU HAVE NO MISSISSIPPI WITHHOLDING				
1	A - Statement Information	B - Income and Withhholding	C - Employer or Payer Information	
	Check appropriate box W-2 W-2G 1099	MS State State Wages, Tips, Etc.	Employer or payer name	
	If 1099-R, Code in Box 7	00	Address	
	Employer or Payer ID from W-2 or 1099 Taxpayer Name	Mississippi Withholding Only	City, State, ZIP	
	Taxpayer Social Security Number	State Income from Other State		
2	A - Statement Information	B - Income and Withhholding	C - Employer or Payer Information	
	Check appropriate box			
	W-2 W-2G 1099	State Wages, Tips, Etc.	Employer or payer name	
	If 1099-R, Code in Box 7 Employer or Payer ID from W-2 or 1099	Mississippi Withholding Only	Address	
	Taxpayer Name	State Income from Other State	City, State, ZIP	
	Taxpayer Social Security Number			
3	A - Statement Information	B - Income and Withhholding	C - Employer or Payer Information	
	Check appropriate box	B - Income and Withinfolding	C - Employer of Fayer information	
	W-2G 1099	State Wages, Tips, Etc.	Employer or payer name	
	If 1099-R, Code in Box 7 Employer or Payer ID from W-2 or 1099	Mississippi Withholding Only	Address	
	Taxpayer Name	.00	City, State, ZIP	
	Taxpayer Social Security Number	State Income from Other State		
		1	1	
4	A - Statement Information	B - Income and Withhholding	C - Employer or Payer Information	
	Check appropriate box W-2 W-2G 1099	State Wages, Tips, Etc.	Employer or payer name	
	If 1099-R, Code in Box 7	Wastering Withhalding Only	Address	
	Employer or Payer ID from W-2 or 1099 Taxpayer Name	Mississippi Withholding Only	City, State, ZIP	
	Taxpayer Social Security Number	State Income from Other State		