



Mississippi Fiduciary Income Tax Return (For Estates and Trusts) 2013

Amended

Tax Year Beginning _____
m m d d y y y y

Tax Year Ending _____
m m d d y y y y

Date of decedent death
or date trust established

Estate / Trust FEIN _____
Decedent / Debtor SSN _____

m m d d y y y y

Name of Estate or Trust				Check All That Apply		Type of Entity	
Title of Fiduciary				<input type="checkbox"/> Initial Return <input type="checkbox"/> Amended Return <input type="checkbox"/> Final Return <input type="checkbox"/> Short Period Return	<input type="checkbox"/> Estate <input type="checkbox"/> Bankruptcy Estate <input type="checkbox"/> Simple Trust <input type="checkbox"/> Complex Trust <input type="checkbox"/> Grantor Trust		
Name of Fiduciary							
Mailing Address							
City	State	Zip	County Code				
				Number of Mississippi K-1 schedules attached			

A COMPLETE COPY OF FEDERAL FORM 1041 MUST BE ATTACHED TO THIS RETURN

1 Mississippi taxable income (loss) (from page 2, line 10)	1	_____ .00
2 Total income tax due (see instructions)	2	_____ .00
3 Other credits (attach Form 80-401)	3	_____ .00
4 Net income tax due (line 2 minus line 3)	4	_____ .00
5 Late filing penalty (see instructions)	5	_____ .00
6 Estimated tax payments, overpayments from prior year and amount paid with extension	6	_____ .00
7 Enter amount of overpayment (if line 6 (payments) is larger, subtract line 4 plus line 5 from line 6)	7	_____ .00
8 Overpayment (line 7) to be applied to next year estimate tax account	8	_____ .00
9 Overpayment to be refunded (line 7 minus line 8)	9	_____ .00
10 Balance due (if line 4 plus line 5 (tax and penalty) is larger, subtract line 6 from line 4 plus line 5)	10	_____ .00
11 Late payment interest and penalty (see instructions)	11	_____ .00
12 Total due (line 10 plus line 11)	12	_____ .00

Yes No This return may be discussed with the preparer

I declare, under penalties of perjury, that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, this is a true, correct and complete return. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of Fiduciary or Officer Representing Fiduciary	Date	Phone Number	FEIN of Fiduciary
Paid Preparer Signature	Date	Paid Preparer Phone Number	Paid Preparer PTIN
Paid Preparer Address	City	State	Zip Code

Mail REFUND To: Department of Revenue, P.O. Box 23058, Jackson, MS 39225-3058
Mail All Other Returns To: Department of Revenue, P.O. Box 23050, Jackson, MS 39225-3050

Duplex and Photocopies are NOT Acceptable



Mississippi Fiduciary Net Taxable Income Schedule 2013

Estate / Trust FEIN _____

COMPUTATION OF TAXABLE INCOME

1 Federal adjusted total income (loss) from federal Form 1041 line 17	1	_____ .00
2 a State, local and foreign government taxes based on income	2a	_____ .00
b Depletion in excess of cost basis	2b	_____ .00
c Interest on obligations of other states/political subdivisions	2c	_____ .00
d Expenses applicable to earning interest on U.S. Government obligations (see instructions)	2d	_____ .00
e Itemized deductions claimed on federal Form 1041 (add if claimed standard deduction on 5e)	2e	_____ .00
f Mississippi source QSST income _____	2f	_____ .00
g Other additions (itemize each item) _____	2g	_____ .00
h _____	2h	_____ .00
i _____	2i	_____ .00
3 Total additions (add lines 2a through line 2i)	3	_____ .00
4 Total income (line 1 plus line 3)	4	_____ .00
5 a Interest on U.S. government obligations	5a	_____ .00
b Wages reduced by federal employment tax credits	5b	_____ .00
c Miss. Code Ann. § 27-7-9(f)(10) included in line 4, page 1, federal Form 1041 (see instructions)	5c	_____ .00
d Expenses applicable to earning interest income on line 2c above (see instructions)	5d	_____ .00
e Standard deduction (see line 2e above if standard deduction is claimed)	5e	_____ .00
f Non-Mississippi income (net of expenses) (non-resident fiduciary returns only)	5f	_____ .00
g Other deductions (itemize each item) _____	5g	_____ .00
h _____	5h	_____ .00
i _____	5i	_____ .00
6 Total deductions (add lines 5a through 5i)	6	_____ .00
7 Adjusted net income (loss) for Mississippi purposes (line 4 minus line 6)	7	_____ .00
8 Amount allocated to beneficiaries (attach Schedule K, Form 81-131)	8	_____ .00
9 Exemption (see instructions)	9	_____ .00
10 Taxable income (loss) for Mississippi purposes (line 7 minus line 8 and line 9; enter here and on page 1, line 1)	10	_____ .00