801612281000

Reset Form

Print Form

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

Name _____ SSN _____

Enter the name, FEIN, Mississippi taxable income and the amount of taxes paid on your behalf by electing pass-through entities. The Mississippi K-1s 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	.00
		.00	.00
		.00	.00
		.00	.00
		.00	.00
		.00	.00
		.00	.00
		.00	.00
		.00	.00

1 Total column C and column D from page 1 above — 1C _____.00 — 1D _____.00

2 Totals from page 2 (total of column C and column D from additional page(s) Form 80-161) — 2C _____.00 — 2D _____.00

3 Total Mississippi taxable income (line 1C plus line 2C) and amount of taxes paid on pass-through entity returns (line 1D plus line 2D) — 3C _____.00 — 3D _____.00

4 Income tax due (from Form 80-105, page 1, line 17; or Form 80-205, page 1, line 20; or Form 81-110, page 1, line 2) — 4 _____.00

5 Credit for tax paid to another state and other credits (from Form 80-105, page 1, line 18 and line 20); or Form 80-205, page 1, line 22; or Form 81-110, page 1, line 3 and line 5) — 5 _____.00

6 Net income tax due before electing pass-through entity credits (line 4 minus line 5) — 6 _____.00

7 Amount of credit claimed for tax paid on an electing Pass-Through Entity Tax Return (the lesser of line 3D or line 6; enter amount on Form 80-105, page 1, line 19; or Form 80-205, page 1, line 21; or Form 81-110, page 1, line 4); If credit for tax paid on an electing Pass-Through Entity Tax Return is not being claimed, enter zero. — 7 _____.00

8 Excess credit for tax paid on an electing Pass-Through Entity Return (line 3D minus line 7; include amount on Form 80-105, page 1, line 31; or Form 80-205, page 1, line 33; or Form 81-110, page 1, line 11) — 8 _____.00

801612282000

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

SSN _____

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
		.00	.00
		.00	.00
		.00	.00
Totals (total of column C and column D; enter here and on Form 80-161, page 1, line 2)		.00	.00