



801052431223

Mississippi Resident Individual Income Tax Return 2024

Amended

Taxpayer First Name a	Initial	Last Name a		
Spouse First Name	Initial	Last Name		
Mailing Address (Number and Street, Including Rural Route)				
City	State	Zip	County Code 90	

SSN **490549999**

Spouse SSN

- 1 Married - Combined or Joint Return (\$12,000)
 2 Married - Spouse Died in Tax Year (\$12,000)
 3 Married - Filing Separate Returns (\$12,000)
 4 **X** Head of Family (\$8,000)
 5 Single (\$6,000)

EXEMPTIONS

Dependents (in column B, enter "C" for child, "P" for parent or "R" for relative)

6 (A) Name	(B)	(C) Dependent SSN
n a	C	490548888

7 Total number of dependents (from line 6 and Form 80-491) **1**

8 Taxpayer Age 65 or Over Taxpayer Blind	Spouse Age 65 or Over Spouse Blind
9 Total dependents line 7 plus number of boxes checked line 8	1
10 Line 9 x \$1,500	10 1500
11 Enter filing status exemption	11 8000
12 Total (line 10 plus line 11)	12 9500

MISSISSIPPI INCOME TAX**Column A (Taxpayer)****Column B (Spouse)**

13 Mississippi adjusted gross income (from page 2, line 66)	13A	35000	13B	
14 Standard or itemized deductions (if itemized, attach Form 80-108)	14A	3400	14B	
15 Exemptions (from line 12; if married filing separately use 1/2 amount)	15A	9500	15B	
16 Mississippi taxable income (line 13 minus line 14 and line 15)	16A	22100	16B	
17 Income tax due (from Schedule of Tax Computation, see instructions)			17	569
18 Credit for tax paid to another state (from Form 80-160, line 12; attach other state return)			18	
19 Other credits (from Form 80-401, line 1)			19	
20 Net income tax due (line 17 minus line 18 and line 19)			20	569
21 Consumer use tax (see instructions)			21	
22 Catastrophe savings tax (see instructions)			22	
23 Total Mississippi income tax due (line 20 plus line 21 and line 22)			23	569

PAYMENTS

24 Mississippi income tax withheld (complete Form 80-107)	24
25 Estimated tax payments, extension payments and/or amount paid on original return	25
26 Credit for tax paid on an electing Pass-Through Entity Tax Return (from Form 80-161, line 3D)	26
27 Refund received and/or amount carried forward from original return (amended return only)	27
28 Total payments (line 24 plus line 25 and line 26 minus line 27)	28

REFUND OR BALANCE DUE

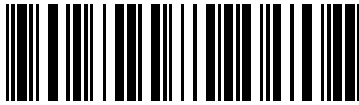
29 Overpayment (if line 28 is more than line 23, subtract line 23 from line 28; if zero, skip to line 35)	29
30 Interest and penalty (from Form 80-320, line 11 and/or line 12)	30
31 Adjusted overpayment (line 29 minus line 30)	31
32 Overpayment to be applied to next year estimated tax account	32
33 Voluntary contribution (from Form 80-108, part III)	33
34 Overpayment refund (line 31 minus line 32 and line 33)	34

Direct Deposit Request
(check box and go to page 3)

35 Balance due (if line 23 is more than line 28, subtract line 28 from line 23)	BALANCE DUE	35	569
36 Interest and penalty (from Form 80-320, line 19)		36	18
37 Total due (line 35 plus line 36)	AMOUNT YOU OWE	37	587

Installment Agreement Request
(see instructions for eligibility; attach Form 71-661)

PLEASE SIGN THIS TAX RETURN ON THE BOTTOM OF PAGE 3



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INCOME		Column A (Taxpayer)	Column B (Spouse)
38	Wages, salaries, tips, etc. (complete Form 80-107)	38A 35000	38B
39	Business income (loss) (attach Federal Schedule C or C-EZ)	39A	39B
40	Capital gain (loss) (attach Federal Schedule D, if applicable)	40A	40B
41	Rent, royalties, partnerships, S corporations, trusts, etc. (from Form 80-108, part IV)	41A	41B
42	Farm income (loss) (attach Federal Schedule F)	42A	42B
43	Interest income (from Form 80-108, part II, line 3)	43A	43B
44	Dividend income (from Form 80-108, part II, line 6)	44A	44B
45	Alimony received	45A	45B
46	Taxable pensions and annuities (complete Form 80-107)	46A	46B
47	Unemployment compensation (complete Form 80-107)	47A	47B
48	Other income (loss) (from Form 80-108, part V, line 10)	48A	48B
49	Total income (add lines 38 through 48)	49A 35000	49B

ADJUSTMENTS		Column A (Taxpayer)	Column B (Spouse)	
50	Payments to IRA	50A	50B	
51	Payments to self-employed SEP, SIMPLE and qualified retirement plans	51A	51B	
52	Interest penalty on early withdrawal of savings	52A	52B	
53	Alimony paid (complete below)	53A	53B	
	Name	SSN	State	Date of Divorce
54	Moving expense (attach Federal Form 3903)	54A		54B
55	National Guard or Reserve pay (enter the lesser of amount or \$15,000)	55A		55B
56	Mississippi Prepaid Affordable College Tuition (MPACT)	56A		56B
57	Mississippi Affordable College Savings (MACS)	57A		57B
58	Self-employed health insurance deduction	58A		58B
59	Health savings account deduction	59A		59B
60	Catastrophe savings account deduction	60A		60B
61	Self-employment tax deduction	61A		61B
62	First-time home buyer savings account deduction	62A		62B
63	Agricultural disaster program compensation deduction	63A		63B
64	Mississippi Achieving a Better Life Experience (ABLE) Act deduction	64A		64B
65	Total adjustments (add lines 50 through 64)	65A		65B
66	Mississippi adjusted gross income (line 49 minus line 65; enter on page 1, line 13)	66A	35000	66B

AMENDED RETURN - EXPLANATION OF CHANGES TO ORIGINAL RETURN (attach additional statement if needed)



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490549999**DIRECT DEPOSIT INFORMATION****1** Overpayment refund (from page 1, line 34)

1

	Routing Number	Account Number	Checking	Savings	Direct Deposit 1 Amount
					1a
a	Routing Number 1	Account Number 1	Checking	Savings	Direct Deposit 1 Amount
b	Routing Number 2	Account Number 2	Checking	Savings	Direct Deposit 2 Amount
					1b

SIGNATURE

This return may be discussed with the preparer

Yes

No

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.

Taxpayer Signature	Date	Taxpayer Phone Number	Paid Preparer PTIN		
Spouse Signature	Date	Paid Preparer Phone Number	Paid Preparer Email Address		
Paid Preparer Signature	Date	Paid Preparer Address	City	State	Zip Code

Mail REFUND returns 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 NOT Acceptable