



Mississippi Summary of Net Income Schedule 2024

FEIN 999999999

(ROUND TO THE NEAREST DOLLAR)

Column A	Column B	Column C
Name of Company FEIN	Credit Code Credit Amount	Net Taxable Income (Loss)
1 Reporting company		
NAME X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9	99 9999999999	
FEIN 999999999	99 9999999999	99999999999
2 Subsidiary companies		
NAME X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9	99 9999999999	
FEIN 999999999	99 9999999999	99999999999
NAME X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9	99 9999999999	
FEIN 999999999	99 9999999999	99999999999
NAME X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9	99 9999999999	
FEIN 999999999	99 9999999999	99999999999
NAME X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9	99 9999999999	
FEIN 999999999	99 9999999999	99999999999
3 Total column B and column C (total of credit amounts line 1 and line 2, column B and total net taxable income (loss) from column C)		99999999999
4 Totals from page 2 (total of column B and column C from additional page(s) Form 83-310)		99999999999
5 Total income tax credits and net taxable income (loss) (sum of line 3 and line 4. Enter the total from column B on Form 83-105, page 1, line 7 or Form 83-391, line 4, page 1. Enter the total from column C on Form 83-105, page 1, line 5 or Form 83-391, page 1, line 1. If the total in column C is negative, enter zero on Form 83-105, page 1, line 5 or Form 83-391, page 1, line 1)		99999999999



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Column A	Column B		Column C
Name of Company FEIN	Credit Code	Credit Amount	Net Taxable Income (Loss)
NAME: X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9	99	9999999999	
	99	9999999999	
FEIN 999999999	99	9999999999	99999999999
	99	9999999999	
NAME: X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9	99	9999999999	
	99	9999999999	
FEIN 999999999	99	9999999999	99999999999
	99	9999999999	
NAME: X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9	99	9999999999	
	99	9999999999	
FEIN 999999999	99	9999999999	99999999999
	99	9999999999	
NAME: X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9	99	9999999999	
	99	9999999999	
FEIN 999999999	99	9999999999	99999999999
	99	9999999999	
NAME: X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9	99	9999999999	
	99	9999999999	
FEIN 999999999	99	9999999999	99999999999
	99	9999999999	
Totals (total of column B and column C; enter on Form 83-310, page 1, line 4)		9999999999	99999999999