



Mississippi Net Taxable Income Schedule 2020

FEIN 999999999

FEDERAL TAXABLE INCOME (ROUND TO THE NEAREST DOLLAR)

11	1	Ordinary business income (loss) (from federal Form 1120S, page 1, line 21 or federal Form 1065, page 1, line 22. If multistate direct accounting, enter zero and skip to line 25)	9999999999
13	2	Total federal Schedule K income (pass-through items not included in line 1 above from federal Form 1120S, page 3, Schedule K, line 2 through line 10 or from federal Form 1065, page 4, Schedule K, line 2 through line 11)	9999999999
16	3	Total federal Schedule K deductions (pass-through items not included in line 1 above from federal Form 1120S, page 3, Schedule K, line 11 through line 12d or from federal Form 1065, page 4, Schedule K, line 12 through line 13d)	9999999999
19	4	Total federal business income (loss) (line 1 plus line 2 minus line 3)	9999999999

STATE ADDITIONS TO FEDERAL TAXABLE INCOME

23	5	State, local or foreign government taxes based on income	9999999999
25	6	Interest on obligations of other states or political subdivisions (net of expenses)	9999999999
27	7	Depletion expense in excess of cost	9999999999
29	8	Federal special depreciation allowance	9999999999
31	9	Other additions required by law (attach schedule)	9999999999
33	10	Total additions (add line 5 through line 9)	9999999999

STATE DEDUCTIONS FROM FEDERAL TAXABLE INCOME

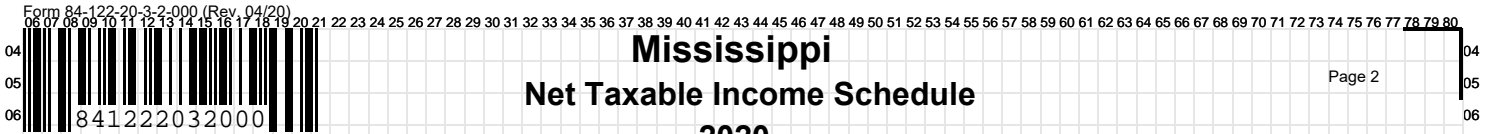
37	11	Interest on obligations of the United States (net of expenses)	9999999999
39	12	Wages reduced on federal return for federal employment tax credits	9999999999
41	13	Income (loss) from partnership, S corporation or trust	9999999999
43	14	Income (loss) from construction contracting or production of natural mineral resource products (net of expenses)	9999999999
46	15	Additional depreciation due to a difference in the depreciable base for federal and state purposes (attach schedule)	9999999999
49	16	Other deductions (attach schedule)	9999999999
51	17	Total deductions (add line 11 through line 16)	9999999999

APPORTIONMENT / ALLOCATION

If 100% Mississippi, complete line 18 then skip to page 2, line 22

57	18	Adjusted federal income (loss) (line 4 plus line 10 minus line 17)	9999999999
59	19	Adjustment for nonbusiness income (loss) net of expenses (from Form 84-150, column E, line 2)	9999999999
61	20	Apportionable business income (loss) (line 18 minus line 19)	9999999999

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APPORTIONMENT / ALLOCATION

21	Apportionment ratio (enter ratio and check box as shown on Form 84-125, Part II)	21	999.9999
15	<input checked="" type="checkbox"/> Sales (retail) <input checked="" type="checkbox"/> Manufacturers (retail) <input checked="" type="checkbox"/> Manufacturers (wholesale), Financial institutions, Pipelines, (for pharmaceutical suppliers, see instructions) <input checked="" type="checkbox"/> Special Formula		
22	Mississippi apportioned income (loss) (if 100% Mississippi, enter line 18, otherwise, multiply line 20 by line 21)	22	9999999999
23	Nonbusiness income (loss) allocated to Mississippi (from Form 84-150, column F, line 2)	23	9999999999
24	Mississippi income (loss) from partnership, S corporation or trust (attach Mississippi K-1s, Form 84-132)	24	9999999999
25	Mississippi income (loss) from construction contracting or production of natural mineral resource products (from Form 84-124, page 2, line 31 or page 3, line 46)	25	9999999999
26	Other adjustments required by law (attach schedule)	26	9999999999
27	Income exemption (attach schedule; if not applicable, enter zero)	27	9999999999
28	Total income (loss) apportioned and directly allocated to Mississippi (add line 22 through line 26 minus line 27)	28	9999999999

MISSISSIPPI COMPOSITE TAXABLE INCOME

If filing composite, complete lines 29 through 32

29	Mississippi composite net income (loss) (from Form 84-131) line 4a	29	9999999999
30	Composite return filing adjustment (attach schedule)	30	9999999999
31	Less Mississippi composite net operating loss deduction (from Form 84-155, line 2)	31	9999999999
32	Mississippi composite net taxable income (loss) (line 29 minus line 30 and line 31; enter on Form 84-105, line 5. If negative, enter zero on Form 84-105, line 5)	32	9999999999