Under penalties of perjury, I declare that I have examined the above pass-through entity's return and accompanying schedules and statements, and to the best of my belief, they are true, correct, and complete. This declaration is based on all information of which I have any knowledge.  Preparer Signature  Date  Check if Also Preparer Signature  Preparer Signature  Firm Name (or yours if self-employed), address and ZIP code  X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X	)4		2 23 24 25 26 27 28 29 30 31 32 3	Mississip	pi				
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The pass-through entity will be liable for the tax liability and all applicable interest and penalties.  PART II: DECLARATION OF DEFICER  Under the penalties of perjury, I declare that I am an officer of the above pass-through entity and that the information I have given my electronic return originator (ER transmitter, and/or intermediate service provider (ISP) and the amounts in Part I above agree with the amounts on the corresponding lines of the pass-through entity frequency and the pass-through entity for the correct and complete. I consent to the DOR my ERQ, transmitter, and/or ISP sending the pass-through entity's return, this declaration, and accompanying schedules and statements to the Department of Revenue (IDCR). It is consent to the DOR my ERQ, transmitter, and/or ISP and acknowledgement of receipt of transmission and an indication of whether or not the pass-through entity's return accepted, and, if rejected, the reason(s) for the rejection. This declaration is to be maintained by the ERQ and provided to DOR on request.  Sign Here  PART III: DECLARATION OF ELECTRONIC RETURN ORIGINATOR (ERQ) AND PAID PREPARER  I declare that I have reviewed the above pass-through entity's return and only declare that this form accurately reflects the data on the return. The corporate officer will have sign its form before I submit the return. I will give the officer a copy of all forms and information to be filled with the Department of Revenue (DOR), and have followed all of requirements in Pub. 3112, IRS e-file Application and Participation and Pub. 4163, Modernized e-File (MeP) information for Authorized IRS e-file Providers, If I am also form whowledge and belief, they are true, correct and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.  ERO Signature  Date  Paid Preparer  Date  Check if Also Preparer  Paid Preparer  Name (or yours if self-water)  Self-making (or yours if self-water)  Self-making (or yours if self-water)  Paid Preparer  Firm Name (or yours if se		through entity is filing	a a balance due return	and the Department of Ro	evenue does not red	ceive full and t	imely paymer	nt of its tax li	ability
Under the penalties of perjury, I declare that I am an officer of the above pass-through entity and that the information I have given my electronic return originator (ER transmitter, and/or intermediate service provider (ISP) and the amounts in Part I above agree with the amounts on the corresponding lines of the pass-through entity transmitter, and/or ISP sending the pass-through entity's return is true, correct and complete. I consent to my ER (ISP) and the pass-through entity's return is true, correct and complete. I consent to my ERO, transmitter, and/or ISP and acknowledgement of receipt of transmission and an indication of whether or not the pass-through entity's return accepted, and, if rejected, the reason(s) for the rejection. This declaration is to be maintained by the ERO and provided to DOR on request.  **Sign**    PART III: DECLARATION OF ELECTRONIC RETURN ORIGINATOR (ERO) AND PAID PREPARER*    Ledeclare that I have reviewed the above pass-through entity's return and that the enties on Form MSS453-PTE are complete and correct to the best of my knowledge. If I is not proposed to the pass of th	the nace thr						, , , , , , , , , , , , , , , , , , , ,		, ,
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Date   Check if Also   Paid Preparer		nature of Officer		Date		Title			
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Firm Name (or yours if self-employed), address and ZIP code    Self-employed	only a collector this form before requirements in Paid Preparer, tof my knowled	r, I am not responsible e I submit the return. I n Pub. 3112, IRS e-file under penalties of perju ge and belief, they are t	for reviewing the return a will give the officer a cop Application and Participa ury, I declare that I have e	nd only declare that this form y of all forms and information ition and Pub. 4163, Moderni examined the above pass-thro. This Paid Preparer declaration	n accurately reflects the nobe filed with the Dized e-File (MeF) Informough entity's return and ion is based on all informough entity's return and ion is based on all informough entity in the control of the control o	e data on the re Department of Re Transition for Author Department of Author Department of Which Check if	turn. The corpo evenue (DOR), orized IRS e-file schedules and I have any kno Self-	rate officer w and have foll e Providers. If statements, a wledge.	ill have sign owed all oth I am also thand to the be
Self-employed), address and ZIP code  X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X		- Name (autour if					IN I	JAJ	AJAJA
Phone No.  (1999) 999–9999  Under penalties of perjury, I declare that I have examined the above pass-through entity's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This declaration is based on all information of which I have any knowledge.  Paid Preparer Signature  Date Check if Also Prieparer Signature Prim Name (or yours if self-employed), address and ZIP code  X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X	self	-employed), address	XOXOXOXOX	X9X9 X9X9X9X9	X9X9X9 XX			99	
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