Form 80-106-25-3-1-000 (Rev. 08/25) 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28	8 29 30 31 32 33 34 3	5 36 37 38 39 40 41 42 43 44 45 46 Mississi		51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66	67 68 69 70	0 71 72 73	74 75 76 77 78 79
5	dividual /	Fiduciary Inco		ax Voucher			
6	arviadar,	Tradelary med	,,,,,	ux voucilei			
7 ₃Instructions							
9							
Who Must Make Estimated Tax Pa							
¹ Every individual taxpayer who does not have a ² estimated tax payments if his/her annual tax li ³ estimated income tax payments, please see th	ability exceeds	s two hundred dollars (\$200). F	or more information about the pa			
Seturn Payments							
₇ This voucher may be used to make return pay	ments for tax	due on the Individual In	come Ta	ax Return (Form 80-105), Non-Re	esident	Income	e Tax Return
$_8$ (Form 80-205) and the Fiduciary Income Tax I	Return (Form	81-110).					
Extension Payments							
This voucher may be used to make extension							
Return (Form 80-205) and the Fiduciary Incor	ne Tax Return	(Form 81-110). Exten	sion pay	ments should be filed and paid o	n or bet	fore Ap	oril 15th.
Payment Options							
6 • To pay this amount online, go to www.dor.m	ns.gov, click or	n Taxpayer Access Poir	nt (TAP)	and follow the instructions.			
7							
⁸ • To pay by check or money order, complete	the payment c	oupon below:					
- Make the check or money order payable	e to Departme	nt of Revenue					
- Mail the payment coupon and check/mc	oney order with	return to: P.O. Box 2	3050, Ja	ckson, MS 39225-3050			
- Mail the payment coupon and check/mc	oney order with	out return to: P.O. Bo	x 23192,	Jackson, MS 39225-3192			
- Check the appropriate box on the vouch	ner for the pay	ment type you are remi	tting.				
- Check the amended return box on the v	oucher if you	are making a payment	with an a	mended return.			
- Write the identification number on the cl	heck or money	order.					
 Duplex forms or photocopies are NOT a 	acceptable.						
8							
9							
0							
2							
3		Cut Along the Do	ted Line				
5		Out Mong the Bo	ilea Eirie				
Form80-106-25-3-1-000(Rev. 0825)							
7		Mississip	i	Tax Year Beginning	99	99	9999
8 1 1 1 1 1 1 1 1 1	Indiv	idual / Fiduciary		e Tax	0.0	0.0	0000
9		Payment Vouc	cher	Tax Year Ending	99	99	9999
Taxpayer SSN/ITIN 999999999			1T	rust FEIN 999999999			
₂ Spouse SSN/ITIN 99999999		Name	of Estat	e / Trust X9X9X9X9X9X	9X92	(9X9	X9X9X9
3 Taxpayer First Name Initial		ast Name	ary paymei		A	T	
4 ' '		(XXXXXXXXXXXX		Payment Type (Check One) Quarterly Estimate Payment	ACCOL	unt iyi	Pe (Check One)
Spouse First Name Initial		ast Name	A				
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXX	XXXXXXXXXXX	XX	Return Payment	Х	Indivi	dual Income
Address	7037037037	77.07.07.07.07.07.07.	0				:
9X9X9X9X9X9X9X9X9X9X9X9X City	State	9X9X9X9X9X9X Zip	19 X	Extension Payment	X	Fiduc	iary Income
ol Oity							

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