Form 80-205-25-3-1-000 (Rev. 08/25)

Mississippi
Non-Resident / Part-Year Resident Individual Income Tax Return
2025

802052531000

X Amended

X Non-Resident X Part-Year, Tax Year Beginning 99999999 and Ending 99999999

Taxpayer First Name	Initial	Last Name
XXXXXXXXXXXXXXXXXXXX	X	XXXXXXXXXXXXXXXXXXXX
Spouse First Name	**Initial**	**Last Name**
XXXXXXXXXXXXXXXXXXXX	X	XXXXXXXXXXXXXXXXXXXX

Mailing Address (Number and Street, Including Rural Route)
X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X9X

City	State	Zip	County Code
XXXXXXXXXXXXXXXXXXXX	XX	99999	99

SSN 999999999
Spouse SSN 999999999

1 X Married - Combined or Joint Return ($12,000)
2 X Married - Spouse Died in Tax Year ($12,000)
3 X Married - Filing Separate Returns ($12,000)
4 X Head of Family ($8,000)
5 X 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
XXXXXXXXXXXXXXXXXXXX	X	999999999
XXXXXXXXXXXXXXXXXXXX	X	999999999
XXXXXXXXXXXXXXXXXXXX	X	999999999
XXXXXXXXXXXXXXXXXXXX	X	999999999

7 Total number of dependents (from line 6 and Form 80-491) 99

8 X Taxpayer Age 65 or Over X Spouse Age 65 or Over
X Taxpayer Blind X Spouse Blind

9 Total dependents line 7 plus number of boxes checked line 8 99
10 Line 9 x **$1,500** 10 9999999999
11 Enter filing status exemption 11 9999999999
12 Total (line 10 plus line 11) 12 9999999999

PRORATION (COMPLETE PAGE 2 BEFORE PROCEEDING FURTHER)

13a Mississippi adjusted gross income 9999999999
b Adjusted gross income from all sources 9999999999
c Line 13a divided by line 13b 99.999999

14a Standard or itemized deductions 9999999999
b Mississippi deductions (line 14a multiplied by line 13c) 9999999999

15a Exemptions (from line 12; if married filing separate, use 1/2 amount) 9999999999
b Mississippi exemption (line 15a multiplied by line 13c) 9999999999

MISSISSIPPI INCOME TAX

		Column A (Taxpayer)	Column B (Spouse)
16	**Mississippi adjusted gross income** (from page 2, line 67 or line 68)	16A 9999999999	16B 9999999999
17	Deductions (from line 14b; if itemized, **attach Form 80-108**)	17A 9999999999	17B 9999999999
18	Exemptions (from line 15b)	18A 9999999999	18B 9999999999
19	**Mississippi taxable income** (line 16 minus line 17 and line 18)	19A 9999999999	19B 9999999999
20	**Income tax due** (from Schedule of Tax Computation, see instructions)		20 9999999999
21	Other credits (from Form 80-401, line 1)		21 9999999999
22	**Net income tax due** (line 20 minus line 21)		22 9999999999
23	**Consumer use tax (see instructions)**		23 9999999999
24	Catastrophe savings tax (see instructions)		24 9999999999
25	**Total Mississippi income tax due** (line 22 plus line 23 and line 24)		25 9999999999
26	**Mississippi income tax withheld (complete Form 80-107)**		26 9999999999
27	Estimated tax payments, extension payments and/or amount paid on original return		27 9999999999
28	Credit for tax paid on an electing Pass-Through Entity Tax Return (from Form 80-161, line 3D)		28 9999999999
29	Refund received and/or amount carried forward from original return **(amended return only)**		29 9999999999
30	Total payments (line 26 plus line 27 and line 28 minus line 29)		30 9999999999
31	**Overpayment** (if line 30 is more than line 25, subtract line 25 from line 30; if zero, skip to line 36)		31 9999999999
32	Interest and penalty (from Form 80-320, line 11 and/or line 12)		32 9999999999
33	Adjusted overpayment (line 31 minus line 32)		33 9999999999
34	Overpayment to be applied to next year estimated tax account X Farmers or Fishermen (see instructions)		34 9999999999
35	**Overpayment refund** (line 33 minus line 34) **REFUND**		35 9999999999
	X Direct Deposit Request (check box and go to page 3)		
36	**Balance due** (if line 25 is more than line 30, subtract line 30 from line 25) **BALANCE DUE**		36 9999999999
37	Interest and penalty (from Form 80-320, line 19)		37 9999999999
38	**Total due** (line 36 plus line 37) **AMOUNT YOU OWE**		38 9999999999

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

PLEASE SIGN THIS TAX RETURN ON THE BOTTOM OF PAGE 3

802052532000

Mississippi
Non-Resident / Part-Year Resident Individual Income Tax Return
2025

SSN 999999999

INCOME		Total Income From All Sources		Mississippi Income ONLY
39 Wages, salaries, tips, etc. **(complete Form 80-107)**	39	9999999999	39	9999999999
40 Business income (loss) **(attach Federal Schedule C or C-EZ)**	40	9999999999	40	9999999999
41 Capital gain (loss) **(attach Federal Schedule D, if applicable)**	41	9999999999	41	9999999999
42 Rent, royalties, partnerships, S corporations, trusts, etc. (from Form 80-108, part IV)	42	9999999999	42	9999999999
43 Farm income (loss) **(attach Federal Schedule F)**	43	9999999999	43	9999999999
44 Interest income (from Form 80-108, part II, line 3)	44	9999999999	44	9999999999
45 Dividend income (from Form 80-108, part II, line 6)	45	9999999999	45	9999999999
46 Alimony received	46	9999999999	46	9999999999
47 Taxable pensions and annuities **(complete Form 80-107)**	47	9999999999	47	9999999999
48 Unemployment compensation **(complete Form 80-107)**	48	9999999999	48	9999999999
49 Other income (loss) (from Form 80-108, part V, line 10)	49	9999999999	49	9999999999
50 **Total income** (add lines 39 through 49)	50	9999999999	50	9999999999

ADJUSTMENTS		Total Income From All Sources		Mississippi Income ONLY
51 Payments to IRA	51	9999999999	51	9999999999
52 Payments to self-employed SEP, SIMPLE and qualified retirement plans	52	9999999999	52	9999999999
53 Interest penalty on early withdrawal of savings	53	9999999999	53	9999999999
54 Alimony paid (complete below)	54	9999999999	54	9999999999

Name XXXXXXXXXXXXXXXXXXX SSN 999999999 State XX Date of Divorce 99999999

55 Moving expense **(attach Federal Form 3903)**	55	9999999999	55	9999999999
56 National Guard or Reserve pay (enter the lesser of amount or $15,000)	56	9999999999	56	9999999999
57 Mississippi Prepaid Affordable College Tuition (MPACT)	57	9999999999	57	9999999999
58 Mississippi Affordable College Savings (MACS)	58	9999999999	58	9999999999
59 Self-employed health insurance deduction	59	9999999999	59	9999999999
60 Health savings account deduction	60	9999999999	60	9999999999
61 Catastrophe savings account deduction	61	9999999999	61	9999999999
62 Self-employment tax deduction	62	9999999999	62	9999999999
63 First-time home buyer saving account deduction	63	9999999999	63	9999999999
64 Agricultural disaster program compensation deduction	64	9999999999	64	9999999999
65 Mississippi Achieving a Better Life Experience (ABLE) Act deduction	65	9999999999	65	9999999999
66 **Total adjustments** (add lines 51 through 65)	66	9999999999	66	9999999999
67 **Adjusted gross income** (line 50 minus line 66; **enter total AGI on page 1, line 13b and Mississippi AGI line 13a**)	67	9999999999	67	9999999999
68 **Split Mississippi AGI on line 67 between taxpayer and spouse**	**T** 68	9999999999	**S** 68	9999999999

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

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Form 80-205-25-3-3-000 (Rev. 08/25)

802052533000

Mississippi
Non-Resident / Part-Year Resident Individual Income Tax Return 2025

SSN 999999999

DIRECT DEPOSIT INFORMATION

1 Overpayment refund (from page 1, line 35) 1 9999999999

	Routing Number	Account Number			Direct Deposit Amount
a	999999999	9999999999999999	X Checking	X Savings	1a 9999999999
b	999999999	9999999999999999	X Checking	X Savings	1b 9999999999

SIGNATURE

This return may be discussed with the preparer X Yes X 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	X99999999 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