Form 80-108-23-3-1-000 (Rev. 10/23)



Mississippi Adjustments And Contributions 2023

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Taxpayer Name		SSN			
PART I: SCHEDULE A - ITEMIZED DEDUCTIONS (ATTACH FEDERA	L FORM 1040 SCHE	DULE A)			
In the event you filed using the standard deduction on your federal return and wish to itemize for Mississippi purposes, use Federal Form 1040 Schedule A as a worksheet and transfer the information from the specific lines indicated to this Schedule A.					
Federal adjusted gross income from Federal Form 1040, line 11	1				
 a Medical and dental expenses b Multiply line 1 by 7.5% (.075) c Medical and dental expense deduction (line 2a minus line 2b) 	2a 2b	2c			
 a Total taxes paid b Less state income taxes (or other taxes in lieu of) c Total taxes paid deduction (line 3a minus line 3b) 	3a 3b	3с			
 4 Total interest paid 5 Charitable contributions 6 Total casualty or theft loss (attach Federal Form 4684) 		4 5 6			
 7 a Other miscellaneous deductions b Less Mississippi gambling losses c Total other miscellaneous deductions (line 7a minus line 7b) 	7a 7b	7c			
8 Mississippi itemized deductions (add lines 2c, 3c, 4, 5, 6, 7c); enter he page 1, line 14 or Non-Resident Form 80-205, page 1, line 14a	Form 80-105, 8				
PART II: SCHEDULE B - INTEREST AND DIVIDEND INCOME (FROM	FEDERAL FORM 10)40, SCHEDULE B)			
 Interest income from all sources Amount of Mississippi nontaxable interest in line 1 Total Mississippi interest (line 1 minus line 2, enter here and on Form 80-105, line 43 or Form 80-205, line 44) Total dividends from all sources Amount of Mississippi nontaxable distributions reported in line 4 Total Mississippi dividends (line 4 minus line 5, enter here and on Form 80-105, line 44 or Form 80-205, line 45 		4 5			
PART III: VOLUNTARY CONTRIBUTION CHECK-OFFS (RESIDENTS	ONLY)				
You may elect to voluntarily contribute all or part (at least \$1) of your income tax refund be downloaded from our website at www.dor.ms.gov) for an explanation of the purpose					

Military Family Relief Fund Burn Care Fund Wildlife Heritage Fund Educational Trust Fund Wildlife Fisheries and Parks Foundation Commission for Volunteer Service Fund

Enter total of check-offs here and on Form 80-105, page 1, line 33

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SSN

PART IV: I NCOME (LOSS) FROM RENTS, ROYALTIES, PARTNERSHIPS, S CORPORATIONS, TRUSTS AND ESTATES					
Α	INCOME (LOSS) FROM RENTAL REAL ESTATE AND ROYA	ALTIES			
	Total rental real estate and royalty income (loss) (from Feder	ral Schodulo E. Part 1 and Part 5:			
	attach Federal Schedule E)	iai Scriedule E, Part I and Part 5,	Δ.4		
	2 Add: depletion claimed in excess of cost basis		A1 A2		
	3 Rental real estate and royalty income (loss) for Mississippi p	urposes (line 1 plus line 2)	A3		
В	INCOME (LOSS) FROM PARTNERSHIPS, S CORPORATION	NS, ESTATES AND TRUSTS			
	(ATTACH MISSISSIPPI K-1S AS APPLICABLE)				
COLUMN A COLUMN B COLUMN					
	NAME OF ENTITY	FEIN (MUST INCLUDE FEIN)	INCOME (LOSS) MISSISSIPPI K-1S		
	Total income (loss) from partnerships, s corporations, esta Total of Section A and Section B income (loss)(line A3 plus 80-105, line 41 or Form 80-205, line 42		B1		
Р	ART V: SCHEDULE N - OTHER INCOME (LOSS) AND SUPPL	EMENTAL INCOME			
1	Net operating loss (enter from Form 80-155, line 2)				
2	First-time home buyer unqualified expenses		1		
3	Catastrophe savings taxable distribution		2		
,	Catastrophie savings taxable distribution		3		
Lis	st other types of income (loss)				
,					
4 5			4		
5 6			5		
7			6		
8			7		
9			8		
J			9		
10	Total Schedule N Other Income (Loss); enter here and on Forn Form 80-205, page 2, line 49	n 80-105, page 2, line 48 or	10		