Complete the return as it should have been originally completed. Mark the circle by the line number for each line that was changed from the original return.



Mississippi Resident AMENDED Individual Income Tax Return

2011

Page 1 WII A

Duplex or Photocopies NOT Acceptable

Taxpayer Last Name	First Name Middle Initia		Middle Initial	SSN			:		
Spouse Last Name	Spouse First Name		Middle Initial	3311		. : - : :			
Mailing Address (Number & Street, Including Rural Route)				Spouse SSN		-	: = :		
City	State	Zip		A '	YOU N	IUST	ENT	ER S	SN ▲
The state of the last Pole of the	\$12,000 on Line 1			Resid	dence Cou	nty Code -	See Ins	structions	;
1. Married - Combined or Joint Return - Enter			ayer.						:
2. Enter \$12,000 on Line 12. Enter Spouse Nam	000 on Line 12. Ent	er Spouse N	ame and	7.	Mark "X" ON Taxpayer Ag		·—	Taxpayer	r Blind
3. <u>E</u> SSN in boxes provided above. (Cannot cha	nge from Joint to S	eparate after	due date.)						
4.		, and Relatior	nship of the	:[]	Spouse Age	os or Over	:Ш	Spouse E	siina
 5. Single - Enter \$6,000 on Line 12. 6. Dependents (In column (B) enter C for cl 	aild P for parent	or P for rela	ative)	8.	Number of D	ependents Lis	sted on Li	ne 6.	
(A) Name (B)	(C) Dependen			9.	Number of B	oxes Marked	"X" on Lir	ne 7.	
	-			10.	Total of Line	8 plus Line 9		:	
	-			11.	Line 10 x \$	1,500 =		: :	00
				12.	Enter Amoun				00
				13.	Total (Line 1				
				14.	If Filing MFS				00
If Filing a Combined Return, Use Column A for	4 ⁷ 444.7	A /T	·		Enter 1/2 of to Neares	4		:	00
Taxpayer and Column B for Spouse, Otherwise Use Column A ONLY. So instructions in booklet.	e Colur	nn A (Tax	kpayer)		Dollar		Jiumn E	3 (Spous	<u>se)</u>
15. Wages, salaries, tips, etc. (Must Attach W-2s)				00					00
16. Other Income (Amount from Line 44, Page 2 of this Form)		:		00	—				00
17. Adjustments to Gross Income (Amount from Line 54, Page 2 of this form)		· · · · · · · · · · · · · · · · · · ·		00					00
18. Mississippi Adjusted Gross Income (Line 15 plus Line 16 minus Line 17)		:	· · · · · · · · · · · · · · · · · · ·	00 ▶	· (B) :				00
19 Standard or Itemized Deductions (For Itemized	 ▶(F)				(-) <u> </u>				00
20 Amount of Exemption				00	(1.1)				
Line 13 (Line 14 if Married Filing Separately) 21. Mississippi Taxable Income (Line 18 Less Lines	19			00					00
and 20) See Instructions (If less than 0, enter 0)		i :		00					00
22. Total Income Tax Due (See page 8 of the Reside	nt and Non-Residen	t Instructions	3)						00
23. Mississippi Income Tax Withheld (Must Attach	ı W-2s)				▶ (W)				00
24. Estimated Tax Payments, Amount Paid with Ex	tension and/or Am	ount Paid w	rith ORIGINAL F	RETURN	▶ (E)				00
25. Credit for Income Tax Paid to Another State (N	lust Attach Copy	of Return	filed with other	r State(s)) > (S)				00
Other Credits (See Instructions) Enter code for eatype of credit claimed (Must Attach Form 80-4	nch 1 92)				▶ (O)				00
27. Overpayment from original return	1				▶ (O)				00
28. Total Credits (Add Lines 23 through 26 less line	e 27)								00
29. Enter the Amount of Refund if Line 28 is Large			R	EFUND	▶ (R)				00
5			BALANG		` ,				
30. Enter Balance Due if Line 22 Is Larger Than Li				OL DUE					00
31. Interest on Underpayment of Estimated Tax Payments (Must Attach Form 80-320)						00			
32. Late Payments - Interest @ 1% Per Month and	, _ h Obh M		for Total		▶ (T)				00
33. TOTAL DUE (Add Lines 30, 31, and 32) Must At Due payable to: Department of Revenue. (I	ENCLOSE PAYME	NT VOUCH	IER 80-106) TO	TAL DU	E ► (V)				00

Mississippi Resident AMENDED Individual Income Tax Return

2011 Social Security

Return					
Social Security	Number	Page 2			
					•
	. - }	; - ;			
ayer)	C	Columr	n B (Spo	use)

001701102000	Example:					• • • • • • • • • • • • • • • • • • • •		
OTHER INCOME shad	showing a loss, le minus (-) in box.	Column A (Taxpayer)			Column B (Spouse)			
34. Business Income (Loss) (Must Attach Federal Scho	edule C or C-EZ)		00			00		
35. Capital Gain (Loss) (Must Attach Federal Scho	edule D)		00			00		
36. Rent, Royalties, P-Ship, S-C Trusts, etc. (Must Attach F	Corps ederal Schedule E)		00			00		
37. Farm Income (Loss) (Must Attach Federal Scho	edule F)		00			00		
38. Interest Income			00			00		
39. Dividend Income	:		00			00		
40. Alimony Received	:		00			00		
41. Taxable Pensions and Annu (Must Attach 1099-R)	uities		00			00		
42. Unemployment Compensati (Must Attach Form(s) 109	ion 3-G)		00	**************************************		00		
43. Other Income (Loss) (Must Attach Schedule N)	· · · · · · · · · · · · · · · · · · ·		00			00		
Total Other Income (Add L through 43. Carry Amts. to Pa			00			00		
ADJUSTMENTS TO GR	OSS INCOME					······································		
45. Payments to IRA			00	: :		. 00		
46. Payments to Self-Employe SIMPLE, & Qualified Retire	d SEP,		00			00		
47. Interest Penalty on Early Withdrawal of Savings	:		00			00		
48. Alimony Paid (Must Comp	lete Schedule P Below)		00			00		
49. Moving Expense (Must Att	tach Federal Form 3903)		00			00		
National Guard or Reserve Pa 50. Reserve Pay or the \$15,000 S	y (Enter the Lesser of the Guard/ itatutory Exclusion Per Taxpayer)		00			00		
51. MS Prepaid Affordable College Affordable College Savings (MA			00			00		
52. Self-Employed Health Insura Deduction			00			00		
53. Health Savings Account De	eduction		00			00		
54. Total Adjustments (Add Lines Amts. to Page 1, Line 17)	45 through 53. Carry		00			00		
Schedule P - Alimony	> -			; .				
If a deduction is claimed for Alimony Paid, please furnish the name, SSN,			SSN of Recipient	=	-			
the state of residency of the individua whom the amount was paid.	al to Name		State of Residency					
		OR CHANGES TO ORI	GINAL RETURN					
THE DETUDY MUST BE SIGN	JED. Hadanaan Missa afaa ah							
THIS RETURN MUST BE SIGN statements, and to the best of n						schedules and		
Taxpayer Signature		Taxpayer Phone		Paid Firm Identification Number				
Spouse Signature (If joint, BC	OTH must sign)	Nate /	Paid Pr	Paid Preparer Social Security Number or PTIN OR				
				- 1	-			
Paid Preparer Signature		Date	Paid Pr	eparer (Print F	irm Name)			
Paid Preparer Phone		Paid Preparer Address						
()								