Form 84-105-21-8-1-000 (Rev. 04/21)

16 Late payment penalty

Mississippi Pass-Through Entity Tax Return 2021

| | 841052181000 | ., | |
|------|---|-------------------------|------------------------------|
| Tax | x Year Beginning | Tax | x Year Ending |
| FE | IN Mississippi Secretary of State | D | mm dd yyyy NAICS Code |
| Lega | al Name and DBA | Partnership / LLC / LLP | S Corporation |
| Add | ress | (Federal 1065) | (Federal 1120-S) |
| | | CHECK ALL THAT APPLY | CHECK ONE |
| | | Composite Return | 100% Mississippi |
| City | State Zip +4 | Amended Return | Multistate Apportioning |
| Со | unty Code Total Number of Mississippi K-1s | Final Return | Multistate Direct Accounting |
| | If issuing 100 or more K-1s, this return <u>must</u> be filed electronically. See www.dor.ms.gov for information. | Non Profit | , loccularing |
| S | CORPORATION FRANCHISE TAX | (ROUN | ID TO THE NEAREST DOLLAR) |
| 1 | Taxable capital (from Form 84-110, line 18) | 1 | |
| 2 | Franchise tax (minimum tax \$25) | Fee-In-Lieu 2 | 00. |
| 3 | Franchise tax credit (from Form 84-401, line 1) | 3 | .00 |
| 4 | Net franchise tax due (line 2 minus line 3) | 4 | .00. |
| C | COMPOSITE INCOME TAX | | |
| 5 | Mississippi net taxable income (from Form 84-122, line 32) | 5 | .00. |
| 6 | Income tax | 6 | .00. |
| 7 | Income tax credits (from Form 84-401, line 3) | 7 | .00. |
| 8 | Net income tax due (line 6 minus line 7) | 8 | .00 |
| P | AYMENTS AND TAX DUE | | |
| 9 | Total franchise and/or income tax (S corporations use line 4 only; composite S corporations use line 4 plus line 8; composite partnerships use line 8 only) | | .00 |
| 10 | Overpayments from prior year | | .00 |
| 11 | Estimated tax payments and payment with extension | 11 | .00. |
| 12 | Total payments (line 10 plus line 11) | 12 | .00. |
| 13 | Net total franchise and/or income tax (line 9 minus line 12) | 13 | .00 |
| 14 | Interest and penalty on underestimated income tax payments (composite S of from Form 83-305, line 19 and composite partnerships from IIT Form 80-320 | | .00 |
| 15 | Late payment interest | 15 | .00. |

Page 2



Mississippi Pass-Through Entity Tax Return 2021

| Total balance due (if line 9 is larger than line 12, add line 13 through line 17) Total overpayment (if line 12 is larger than line 9 plus line 14, subtract line 9 and line 14 from line 12) Overpayment credited to next year (from line 19) Overpayment to be refunded (line 19 minus line 20) See instructions for electronic payment options or attach payment voucher, Form 84-300, with check or money order for balance due. PART I: ENTITY INFORMATION If final return, enter reason and date effective: Date If the entity has been sold, merged, incorporated, or elected to become a Qualified Sub-Chapter S Subsidiary (QSSS), or converted to a Single-Member LLC (SMLLC), complete the following: Name, address and FEIN of the new existing corporation, parent of QSSS or owner of the SMLL FEIN If amended return, check reason. Mississippi Correction Federal Correction Other If a partnership or LLC, has a federal election been made to file as a corporation? Yes No Check if the company has been audited by the IRS. If the company has been audited, what year(s) are involved? | | | | | |
|--|--|---|---|---|---|
| Total balance due (if line 9 is larger than line 12, add line 13 through line 17) Total overpayment (if line 12 is larger than line 9 plus line 14, subtract line 9 and line 14 from line 12) Overpayment credited to next year (from line 19) Overpayment to be refunded (line 19 minus line 20) See instructions for electronic payment options or attach payment voucher, Form 84-300, with check or money order for balance due. PART I: ENTITY INFORMATION If final return, enter reason and date effective: Date If the entity has been sold, merged, incorporated, or elected to become a Qualified Sub-Chapter S Subsidiary (QSSS), or converted to a Single-Member LLC (SMLLC), complete the following: Name, address and FEIN of the new existing corporation, parent of QSSS or owner of the SMLL FEIN If amended return, check reason. Mississippi Correction Other If a partnership or LLC, has a federal election been made to file as a corporation? Yes No Check if the company has been audited by the IRS. If the company has been audited, what year(s) are involved? Principal product or service in Mississippi Contact person for this return 8a Location and phone number PART II: PASS-THROUGH ENTITY SCHEDULE List all pass-through entities in Mississippi that the S corporation / Partnership invested in during the tax year. Attach additional schedule(s), Form 84-105, page 4, if needed. | Late filing penalty (minimum incom | ne tax penalty \$100) | | 17 | 000 |
| 19 Total overpayment (if line 12 is larger than line 9 plus line 14, subtract line 9 and line 14 from line 12) 20 Overpayment credited to next year (from line 19) 21 Overpayment to be refunded (line 19 minus line 20) 21 See instructions for electronic payment options or attach payment voucher, Form 84-300, with check or money order for balance due. PART I: ENTITY INFORMATION 1 If final return, enter reason and date effective: 2 If the entity has been sold, merged, incorporated, or elected to become a Qualified Sub-Chapter S Subsidiary (QSSS), or converted to a Single-Member LLC (SMLLC), complete the following: Name, address and FEIN of the new existing corporation, parent of QSSS or owner of the SMLL FEIN 3 If amended return, check reason. Mississippi Correction Federal Correction Other 4 If a partnership or LLC, has a federal election been made to file as a corporation? Yes No 5 Check if the company has been audited by the IRS. If the company has been audited, what year(s) are involved? 6 Principal business activity in Mississippi 6 County location in Mississippi 7 Principal product or service in Mississippi 8 Contact person for this return 8 Location and phone number PART II: PASS-THROUGH ENTITY SCHEDULE List all pass-through entities in Mississippi that the S corporation / Partnership invested in during the tax year. Attach additional schedule(s), Form 84-105, page 4, if needed. | | | | 18 | |
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| See instructions for electronic payment options or attach payment voucher, Form 84-300, with check or money order for balance due. PART I: ENTITY INFORMATION | , | ar (from line 19) | | 20 | |
| See instructions for electronic payment options or attach payment voucher, Form 84-300, with check or money order for balance due. PART I: ENTITY INFORMATION | | , , | | | .00 |
| PART I: ENTITY INFORMATION 1 If final return, enter reason and date effective: 2 If the entity has been sold, merged, incorporated, or elected to become a Qualified Sub-Chapter S Subsidiary (QSSS), or converted to a Single-Member LLC (SMLLC), complete the following: Name, address and FEIN of the new existing corporation, parent of QSSS or owner of the SMLL FEIN 3 If amended return, check reason. Mississippi Correction Federal Correction Other 4 If a partnership or LLC, has a federal election been made to file as a corporation? Yes No 5 Check if the company has been audited by the IRS. If the company has been audited, what year(s) are involved? 6 Principal business activity in Mississippi 6 County location in Mississippi 7 Principal product or service in Mississippi 8 Contact person for this return 8 Location and phone number PART II: PASS-THROUGH ENTITY SCHEDULE List all pass-through entities in Mississippi that the S corporation / Partnership invested in during the tax year. Attach additional schedule(s), Form 84-105, page 4, if needed. | Overpayment to be refunded (line | 19 minus line 20) | | 21 | .00 |
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| If the entity has been sold, merged, incorporated, or elected to become a Qualified Sub-Chapter S Subsidiary (QSSS), or converted to a Single-Member LLC (SMLLC), complete the following: Name, address and FEIN of the new existing corporation, parent of QSSS or owner of the SMLL FEIN If amended return, check reason. Mississippi Correction Federal Correction Other If a partnership or LLC, has a federal election been made to file as a corporation? Yes No Check if the company has been audited by the IRS. If the company has been audited, what year(s) are involved? Principal business activity in Mississippi 6a County location in Mississippi Principal product or service in Mississippi Contact person for this return 8a Location and phone number PART II: PASS-THROUGH ENTITY SCHEDULE List all pass-through entities in Mississippi that the S corporation / Partnership invested in during the tax year. Attach additional schedule(s), Form 84-105, page 4, if needed. | ART I: ENTITY INFORMATION | | | | |
| Member LLC (SMLLC), complete the following: Name, address and FEIN of the new existing corporation, parent of QSSS or owner of the SMLL FEIN If amended return, check reason. Mississippi Correction Federal Correction Other If a partnership or LLC, has a federal election been made to file as a corporation? Yes No Check if the company has been audited by the IRS. If the company has been audited, what year(s) are involved? Principal business activity in Mississippi 6a County location in Mississippi Principal product or service in Mississippi Contact person for this return 8a Location and phone number PART II: PASS-THROUGH ENTITY SCHEDULE List all pass-through entities in Mississippi that the S corporation / Partnership invested in during the tax year. Attach additional schedule(s), Form 84-105, page 4, if needed. | If final return, enter reason and date | effective: | | Date | |
| 4 If a partnership or LLC, has a federal election been made to file as a corporation? Yes No Check if the company has been audited by the IRS. If the company has been audited, what year(s) are involved? Principal business activity in Mississippi 6a County location in Mississippi Principal product or service in Mississippi 8 Contact person for this return 8a Location and phone number PART II: PASS-THROUGH ENTITY SCHEDULE List all pass-through entities in Mississippi that the S corporation / Partnership invested in during the tax year. Attach additional schedule(s), Form 84-105, page 4, if needed. | | | | corporation, parent of QSS | SS or owner of the SMLLC: |
| 5 Check if the company has been audited by the IRS. If the company has been audited, what year(s) are involved? 6 Principal business activity in Mississippi 6a County location in Mississippi 7 Principal product or service in Mississippi 8 Contact person for this return 8a Location and phone number PART II: PASS-THROUGH ENTITY SCHEDULE List all pass-through entities in Mississippi that the S corporation / Partnership invested in during the tax year. Attach additional schedule(s), Form 84-105, page 4, if needed. | If amended return, check reason. | Mississippi | Correction Federal Correction | Other | |
| 6 Principal business activity in Mississippi 6a County location in Mississippi 7 Principal product or service in Mississippi 8 Contact person for this return 8a Location and phone number PART II: PASS-THROUGH ENTITY SCHEDULE List all pass-through entities in Mississippi that the S corporation / Partnership invested in during the tax year. Attach additional schedule(s), Form 84-105, page 4, if needed. | If a partnership or LLC, has a federa | al election been mad | e to file as a corporation? | Yes No | |
| 7 Principal product or service in Mississippi 8 Contact person for this return | Check if the company has been aud | lited by the IRS. | If the company has been audited, | what year(s) are involved | ? |
| 8 Contact person for this return | Principal business activity in Mississ | зіррі | 6a County lo | ocation in Mississippi | |
| PART II: PASS-THROUGH ENTITY SCHEDULE List all pass-through entities in Mississippi that the S corporation / Partnership invested in during the tax year. Attach additional schedule(s), Form 84-105, page 4, if needed. | Principal product or service in Missis | ssippi | | | |
| List all pass-through entities in Mississippi that the S corporation / Partnership invested in during the tax year. Attach additional schedule(s), Form 84-105, page 4, if needed. | Contact person for this return | | 8a Location | and phone number | |
| Form 84-105, page 4, if needed. | ART II: PASS-THROUGH ENTITY | SCHEDULE | | | |
| ENTITY NAME FEIN ADDRESS ENTITY TYPE | | ppi that the S corpora | ation / Partnership invested in during t | he tax year. Attach additio | onal schedule(s), |
| | ENTITY NAME | FEIN | ADDRESS | | ENTITY TYPE |
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| | | Total balance due (if line 9 is larger from line 12) Overpayment credited to next year overpayment to be refunded (line See instructions for electronic parametric ENTITY INFORMATION If final return, enter reason and date lif the entity has been sold, merged, Member LLC (SMLLC), complete the lif amended return, check reason. If a partnership or LLC, has a federate the company has been aud Principal business activity in Mississ Principal product or service in Mississ Contact person for this return ART II: PASS-THROUGH ENTITY all pass-through entities in Mississipm 84-105, page 4, if needed. | Total balance due (if line 9 is larger than line 12, add line 12 total overpayment (if line 12 is larger than line 9 plus line 12) Overpayment credited to next year (from line 19) Overpayment to be refunded (line 19 minus line 20) See instructions for electronic payment options or a lart I: ENTITY INFORMATION If final return, enter reason and date effective: If the entity has been sold, merged, incorporated, or election member LLC (SMLLC), complete the following: Name, a lif amended return, check reason. Mississippi If a partnership or LLC, has a federal election been maded. Check if the company has been audited by the IRS. Principal business activity in Mississippi Principal product or service in Mississippi Contact person for this return ART II: PASS-THROUGH ENTITY SCHEDULE all pass-through entities in Mississippi that the S corporation 84-105, page 4, if needed. | Total balance due (if line 9 is larger than line 12, add line 13 through line 17) Total overpayment (if line 12 is larger than line 9 plus line 14, subtract line 9 and line 14 from line 12) Overpayment credited to next year (from line 19) Overpayment to be refunded (line 19 minus line 20) See instructions for electronic payment options or attach payment voucher, Form 84-30 ART I: ENTITY INFORMATION If final return, enter reason and date effective: If the entity has been sold, merged, incorporated, or elected to become a Qualified Sub-Chapt Member LLC (SMLLC), complete the following: Name, address and FEIN of the new existing of the apartnership or LLC, has a federal election been made to file as a corporation? If a partnership or LLC, has a federal election been made to file as a corporation? Check if the company has been audited by the IRS. If the company has been audited, Principal business activity in Mississippi Contact person for this return 8a County Ic ART II: PASS-THROUGH ENTITY SCHEDULE all pass-through entities in Mississippi that the S corporation / Partnership invested in during the made 105, page 4, if needed. | Total balance due (if line 9 is larger than line 12, add line 13 through line 17) Total overpayment (if line 12 is larger than line 9 plus line 14, subtract line 9 and line 14 from line 12) Overpayment credited to next year (from line 19) Overpayment to be refunded (line 19 minus line 20) See instructions for electronic payment options or attach payment voucher, Form 84-300, with check or money ART I: ENTITY INFORMATION If final return, enter reason and date effective: Date If the entity has been sold, merged, incorporated, or elected to become a Qualified Sub-Chapter S Subsidiary (QSSS), C Member LLC (SMLLC), complete the following: Name, address and FEIN of the new existing corporation, parent of QSS FEIN If amended return, check reason. Mississippi Correction Federal Correction Other If a partnership or LLC, has a federal election been made to file as a corporation? Yes No Check if the company has been audited by the IRS. If the company has been audited, what year(s) are involved Principal business activity in Mississippi 6a County location in Mississippi Principal product or service in Mississippi Contact person for this return 8a Location and phone number ART II: PASS-THROUGH ENTITY SCHEDULE all pass-through entities in Mississippi that the S corporation / Partnership invested in during the tax year. Attach addition 84-105, page 4, if needed. |



Mississippi Pass-Through Entity Schedule 2021

Q-SUBS/DISREGARDED ENTITY SCHEDULE

| Page | 3 |
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| raye | J |

FEIN

PART III

| ENTITY NAME | FEIN | | ADDRESS | | MISSISSIPPI OPERATIO (Y/N) |
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| ART IV | | ENTITY OFFICER | | | - |
| the owners, officers, directors, or part | ners who have | | | ne organization. | OWNERSHIP |
| | | | fiscal management of th | ne organization. | OWNERSHIP PERCENTAGE |
| the owners, officers, directors, or part | | | fiscal management of th | ne organization. | |
| the owners, officers, directors, or part | | | fiscal management of th | ne organization. | |
| the owners, officers, directors, or part | | | fiscal management of th | ne organization. | |
| the owners, officers, directors, or part | | | fiscal management of th | ne organization. | |
| the owners, officers, directors, or part | | | fiscal management of th | ne organization. | |
| the owners, officers, directors, or part | | | fiscal management of th | ne organization. | |
| the owners, officers, directors, or part | SSN | a responsibility in the | fiscal management of th | ne organization. | |
| OFFICER NAME AND TITLE Check box if return may be disc | SSN | a responsibility in the | fiscal management of the | | PERCENTAGE |
| OFFICER NAME AND TITLE Check box if return may be disc | SSN | eparer. | fiscal management of the | ments, and to the | PERCENTAGE |
| OFFICER NAME AND TITLE Check box if return may be disc | SSN | eparer. | fiscal management of the | ments, and to the | PERCENTAGE |
| OFFICER NAME AND TITLE Check box if return may be disc | SSN | eparer. | fiscal management of the | ments, and to the | e best of my knowledge and believeparer has any knowledge. |
| Check box if return may be discolare, under penalties of perjury, that I hais a true, correct and complete return. | SSN | eparer. | ADDRESS Applying schedules and states ayer) is based on all inform | ments, and to the | e best of my knowledge and believeparer has any knowledge. |
| Check box if return may be discolare, under penalties of perjury, that I hais a true, correct and complete return. | SSN | eparer. s return and accompareparer (other than taxp | ADDRESS Applying schedules and states ayer) is based on all inform | ments, and to the | e best of my knowledge and believeparer has any knowledge. |
| Check box if return may be disculare, under penalties of perjury, that I had is a true, correct and complete return. D | cussed with property of proper | eparer. s return and accompareparer (other than taxp | nying schedules and stater ayer) is based on all inform | ments, and to the | e best of my knowledge and belicoreparer has any knowledge. |



Mississippi Supplemental Pass-Through Entity Schedule 2021

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| FFIN | | | |
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PASS-THROUGH ENTITY SCHEDULE

List all pass-through entities in Mississippi that the S corporation / Partnership invested in during the tax year, continued from page 2, part II.

| ENTITY NAME | FEIN | ADDRESS | ENTITY TYPE |
|-------------|------|---------|-------------|
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Q-SUBS/DISREGARDED ENTITY SCHEDULE

List all qualified subchapter S subsidiaries (Q-Subs) and/or disregarded entities, continued from page 3, part III.

| ENTITY NAME | FEIN | ADDRESS | MISSISSIPPI OPERATIONS (Y/N) |
|-------------|------|---------|------------------------------|
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