Form 84-115-25-8-1-000 (Rev. 10/25)

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MS8453-PTE

Mississippi
Pass-Through Entity Declaration for Electronic Filing
2025

Tax Year Beginning _____ (mm dd yyyy)

Tax Year Ending _____ (mm dd yyyy)

DO NOT MAIL THIS DOCUMENT TO THE DEPARTMENT OF REVENUE

FEIN _____

Legal Name and DBA

Address | City | State | Zip +4 | County Code

PART I: TAX RETURN INFORMATION **(ROUND TO THE NEAREST DOLLAR)**

1	Mississippi taxable income (Form 84-105, line 5)	1 .00
2	Total income tax (Form 84-105, line 6)	2 .00
3	Total credits and payments (Form 84-105, line 7 and line 13)	3 .00
4	Amount you owe (Form 84-105, line 19)	4 .00
5	Overpayment (Form 84-105, line 20)	5 .00
6	Refund (Form 84-105, line 22)	6 .00
7	Amount of payment remitted electronically	7 .00

* If the pass-through entity is filing a balance due return and the Department of Revenue does not receive full and timely payment of its tax liability, the pass-through entity will be liable for the tax liability and all applicable interest and penalties.

PART II: DECLARATION OF OFFICER

Under the penalties of perjury, I declare that I am an officer of the above pass-through entity and that the information I have given my electronic return originator (ERO), transmitter, and/or intermediate service provider (ISP) and the amounts in Part I above agree with the amounts on the corresponding lines of the pass-through entity's Mississippi Pass-Through Entity Tax Return. To the best of my knowledge and belief, the pass-through entity's return is true, correct and complete. I consent to my ERO, transmitter, and/or ISP sending the pass-through entity's return, this declaration, and accompanying schedules and statements to the Department of Revenue (DOR). I also consent to the DOR my ERO, transmitter, and/or ISP an acknowledgement of receipt of transmission and an indication of whether or not the pass-through entity's return is accepted, and, if rejected, the reason(s) for the rejection. This declaration is to be maintained by the ERO and provided to DOR on request.

Sign Here Signature of Officer | Date | Title

PART III: DECLARATION OF ELECTRONIC RETURN ORIGINATOR (ERO) AND PAID PREPARER

I declare that I have reviewed the above pass-through entity's return and that the entries on Form MS8453-PTE are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The corporate officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the Department of Revenue (DOR), and have followed all other requirements in Pub. 3112, IRS e-file Application and Participation and Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers. If I am also the Paid Preparer, under penalties of perjury, I declare that I have examined the above pass-through entity's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO Use Only

ERO Signature | Date | Check if Also Paid Preparer ☐ | Check if Self-Employed ☐ | ERO SSN or PTIN

Firm Name (or yours if self-employed), address and ZIP code | EIN | Phone No.

Under penalties of perjury, I declare that I have examined the above pass-through entity's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This declaration is based on all information of which I have any knowledge.

Paid Preparer Use Only

Preparer Signature | Date | Check if Also Paid Preparer ☐ | Check if Self-Employed ☐ | Preparer SSN or PTIN

Firm Name (or yours if self-employed), address and ZIP code | EIN | Phone No.

DO NOT Mail this Document to the Mississippi Department of Revenue