Mississippi Secretary of State

700 North Street P. O. Box 136, Jackson, MS 39205-0136

ADMINISTR	ATIVE	PRO	CEDITRES	NOTICE	FILING
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AGENCY NAME Mississippi Department of Revenue		CONTACT PERSON Sam Portera, CPA	TELEPHONE NUMBER 601-923-7317					
ADDRESS PO Box 1033		CITY Jackson		STATE MS	ZIP 39215			
EMAIL sam.portera@dor.ms.gov	SUBMIT DATE 10/17/17	Name or number of rule(s): Title 35, Part IV, Subpart 10, Chapter 01 Construction Contractors System Number: 22809						
Short explanation of rule/amendment/repeal and	l reason(s) for proposin	g rule/amendment/repeal: This amende	ed rule is inten	ded to clarify w	vhat contracts qualify for			
contractor's tax, how MPC's apply and what payr	nents are subject to per	nalty.		83				
Specific legal authority authorizing the promulgat	ion of rule: Miss. Code	Ann. Section 27-65-93, "(1) The commis	sioner shall, fr	om time to tim	e, promulgate rules and			
regulations, not inconsistent with the provisions	of the sales tax law, for	making returns and for the ascertainmen	nt, assessment	and collection	of the tax imposed by			
the sales tax law as he may deem necessary to en	force its provisions."							
List all rules repealed, amended, or suspended by	the proposed rule: Mis	s. Admin Rule 35.IV.10.01 Construction	Contractors					
ORAL PROCEEDING:		The state of the s						
An oral proceeding is scheduled for 500 Clinton Center Drive, Clinton, MS 3:		: <u>07/26/17</u> Time: <u>2:30 p.m.</u> P	lace: <u>Missis</u>	sippi Depart	tment of Revenue,			
	101 AN 101 AN 102 BD	oro ll es			***			
Presently, an oral proceeding is not If an oral proceeding is not scheduled, an oral proten (10) or more persons. The written request sh notice of proposed rule adoption and should incluagent or attorney, the name, address, email addromment period, written submissions including a ECONOMIC IMPACT STATEMENT: Economic impact statement not request.	ceeding must be held it ould be submitted to th ide the name, address, ess, and telephone num rguments, data, and vie	a written request for an oral proceeding the agency contact person at the above a demail address, and telephone number o ther of the party or parties you represen	ddress within t f the person(s) t. At any time epeal may be s	wenty (20) day making the re- within the twe submitted to th	s after the filing of this quest; and, if you are an enty-five (25) day public le filing agency.			
TEMPODADY DUI CC								
TEMPORARY RULES PF		OSED ACTION ON RULES	FINAL ACTION ON RULES Date Proposed Rule Filed: 6/21/17					
Original filing	Original filing Action prop		Action taken:					
Renewal of effectiveness To be in effect in days		rule(s) ndment to existing rule(s)	Adopted with no changes in text					
Effective date:	1.6	al of existing rule(s)	Adopted with changes Adopted by reference					
Immediately upon filing	Ador	otion by reference	x Withdrawn					
Other (specify):		nal effective date:	Repeal adopted as proposed					
		nys after filing r (specify):	Effective date: 30 days after filing					
			X Oth	er (specify): <u>/</u>	mmediately			
Printed name and Title of person authorized to file rules: Sam Portera, CPA, Deputy Office Director, Tax Policy								
Signature of person authorized to	file rules:	Vilus Sam Portera						
		DO NOT WRITE BELOW THIS LINE OFFICIAL FILING STAMP						
OFFICIAL FILING STAMP				OFFICIAL FILING STAMP				
				12.50-2-50-1-00-	OF STATE			
Accepted for filing by	Accepted f	or filing by	Accepted for filling by					

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.