



Schedule 2K-1 Beneficiary's Massachusetts Information

2006

**Massachusetts
Department of
Revenue**

Name of estate or trust		Estate or trust employer identification	
Name of beneficiary	Legal domicile of beneficiary (state)	Beneficiary's identification number	
Mailing address of beneficiary	City/Town	State	Zip
Name of fiduciary			
Mailing address of fiduciary	City/Town	State	Zip
In care of address	City/Town	State	Zip

Check if: Amended 2K-1 Final 2K-1

Beneficiary's percentage of taxable income _____

What type of entity is this beneficiary? Individual Estate/trust Charitable organization Other

Is this beneficiary a nonresident of Massachusetts? Yes No

	a. Amount from federal 1041 allocable to this beneficiary	b. Massachusetts adjustments	c. Total amounts using Mass- achusetts law (see instructions) add col's. a and b	d. Massachusetts source income (see instructions)
Allocable share item				
Part B income				
1 Wages, salaries, tips and other employee compensation . . . 1				
2 Taxable pensions and annuities 2				
3 Business/profession or farm income or loss. 3				
4 Rental, royalty and REMIC income or loss 4				
5 Massachusetts bank interest 5				
6 Other income, such as winnings, lump-sum distributions, etc. (itemize) 6				
7 Deductions allowed decedents 7				
Part A interest and dividend income				
8 Interest and dividend income (do not include income from common trust funds) 8				
9 Common trust fund interest and dividend income 9				
Part A capital gains				
10 Taxable Part A 12% capital gains (do not include income from common trust funds). 10				
11 Part A 12% short-term common trust fund capital gains . . . 11				
Part C capital gains				
12 Part C 5.3% long-term capital gains (do not include income from common trust funds) 12				
13 Part C 5.3% long-term common trust fund capital gains . . . 13				
Credits				
14 Taxes paid to other jurisdictions 14				
15 Lead Paint. 15				
16 Economic Opportunity Area 16				
17 Full Employment 17				
18 Brownfields. Certificate number _____ 18				
19 Low-income Housing 19				
20 Historic Rehabilitation 20				
21 Home Energy Efficiency 21				
22 Film Incentive. Certificate number _____ 22				
23 Medical Device. Certificate number _____ 23				