



PRINT IN BLACK INK

FOR PRIVACY ACT NOTICE, SEE INSTRUCTIONS.

Calendar year filers enter 01-01-2012 and 12-31-2012 below. Fiscal year filers enter appropriate dates. Complete one Schedule 3K-1 for each partner.

Tax year beginning > [MMDDYYYY] Tax year ending > [MMDDYYYY]

# Schedule 3K-1 Partner's Massachusetts Information 2012

NAME OF PARTNER \_\_\_\_\_ TAXPAYER IDENTIFICATION NUMBER \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/TOWN/POST OFFICE \_\_\_\_\_ STATE \_\_\_\_\_ ZIP + 4 \_\_\_\_\_

NAME OF PARTNERSHIP \_\_\_\_\_ FEDERAL IDENTIFICATION NUMBER (FID) \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/TOWN/POST OFFICE \_\_\_\_\_ STATE \_\_\_\_\_ ZIP + 4 \_\_\_\_\_

- A. Type of entity (fill in **one** only):**  Individual resident  Individual nonresident  Trust or estate  S corporation  
 Partnership or other PTE  IRA  Disregarded entity  Exempt organization  Corporation
- B. Type of partner:**  Limited  General
- C. Type of form submission:**  Final  Amended 3K-1
- D. Was there a sale, transfer or liquidation of any part of this partnership interest during the tax year?**  Yes  No
- E. Did the partnership participate in one or more installment sales transactions?**  Yes  No
- If Yes, indicate whether information has been communicated to the partner to calculate an addition to Massachusetts tax under M.G.L., ch. 62C, sec. 32A based on the following Internal Revenue Code (IRC) provisions (check all that apply):  IRC 453A  IRC 453(l)(2)(B)

PARTNER'S DISTRIBUTIVE SHARE		▼ If showing a loss, mark an X in box at left	
<b>1</b>	Massachusetts ordinary income or loss (from Form 3, line 20) . . . . . 1	<input checked="" type="checkbox"/>	00
<b>2</b>	Guaranteed payments to partners (deductible and capitalized) (from U.S. Form 1065, Schedule K) . . . 2		00
<b>3</b>	Separately stated deductions . . . . . 3		00
<b>4</b>	Combine lines 1 through 3. . . . . 4	<input checked="" type="checkbox"/>	00
<b>5</b>	Credits available:		00
	<b>a.</b> Taxes due to another jurisdiction (full-year residents and part-year residents only) . . . . . 5a		00
	<b>b.</b> Lead Paint credit . . . . . 5b		00
	<b>c.</b> <input type="radio"/> Economic Opportunity Area . . . . . 5c		00
	<input type="radio"/> Economic Development Incentive Program . . . . . 5c		00
	<b>d.</b> Brownfields credit . . . . . 5d		00
	<b>e.</b> Low-Income Housing credit. . . . . 5e		00
	<b>f.</b> Historic Rehabilitation credit. . . . . 5f		00
	<b>g.</b> Film Incentive credit. . . . . 5g		00
	<b>h.</b> Medical Device credit . . . . . 5h		00
	<b>i.</b> Refundable Film credit . . . . . 5i		00
	<b>j.</b> Refundable Dairy credit. . . . . 5j		00
	<b>k.</b> Refundable Conservation credit . . . . . 5k		00
	<b>l.</b> Total credits. . . . . 5l		00
<b>6</b>	Net income or loss from rental real estate activity(ies) (from Form 3, line 23) . . . . . 6	<input checked="" type="checkbox"/>	00

BE SURE TO CONTINUE SCHEDULE 3K-1 ON OTHER SIDE



TAXPAYER IDENTIFICATION NUMBER

Grid for Taxpayer Identification Number

Table with 3 columns: Line number, Description, and Amount. Includes sections for Corporate Partner Information and Reconciliation of Partner's Capital Account.



TAXPAYER IDENTIFICATION NUMBER

Grid for Taxpayer Identification Number

PARTNER'S SHARE OF PROFIT, LOSS AND CAPITAL

Table with 6 rows (30-35) for Partner's Share of Profit, Loss and Capital. Columns include description, Beginning, and Ending values.

PASS-THROUGH ENTITY PAYMENT AND CREDIT INFORMATION

Declaration election code: Withholding, Composite, Member self-file, Exempt PTE, Insurance company, Non-profit, Exempt corporate limited partner

Table with 4 rows (36-39) for Pass-through Entity Payment and Credit Information. Columns include description, amount, and code.