

Schedule CG Combined Reporting Allocation Schedule

2013

Massachusetts

Department of Revenue

For calendar year 2013 or taxable period beginning 2013 and ending Federal Identification number Name of principal reporting corporation Principal address City/Town State Contact person Telephone number **Part 1. Total Excise Tax Due and Payments** 7 Amount paid with extension Part 2. Required Annual Payment Part 3. Payments by the Principal Reporting Corporation Part 4. Additional Payments Made Separately by Individual Members Member 1 Taxpayer name Federal Identification number

7 Amount paid with extension

Member 2 Taxpayer name Federal Identification number Member 3 Taxpayer name Federal Identification number Member 4 Taxpayer name Federal Identification number

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Taxpayer name	Federal Identification number	
Period end date per prior year separate return	1	
2 Overpayment from prior year return		
3 First installment estimated tax payments		
4 Second installment estimated tax payments		
5 Third installment estimated tax payments		
6 Fourth installment estimated tax payments		
7 Amount paid with extension	7	