



CORPORATION NAME

FEDERAL IDENTIFICATION NUMBER

Schedule S S Corporation Distributive Income

2014

CLASSIFICATION INFORMATION

Table with 12 rows (1-12) for Classification Information. Columns include description, line number, and a 5-digit grid for input.

S corporations sharing common ownership and engaged in a unitary business with one or more entities, complete lines 13 through 16. All other corporations, skip to line 17.

Table with 5 rows (13-17) for inter-company transactions and aggregated receipts. Columns include description, line number, and a 5-digit grid for input.

S CORPORATION INCOME

▼ If a loss, mark an X in box at left

Table with 7 rows (18-25) for S Corporation Income. Columns include description, line number, and a 5-digit grid for input with an X in the first box for losses.



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RESIDENT AND NONRESIDENT RECONCILIATION (cont'd.)		
44	i. Line 35	44i
	j. Line 36	44j
	k. Line 37	44k
	l. Line 38	44l
	m. Line 39	44m
	n. Line 40	44n
	o. Line 41	44o
	p. Line 42	44p
	q. Line 43	44q
45	Nonresident taxable income. Multiply the amounts from lines 44a through 44q by the apportionment percentage in Form 355S, Schedule F, line 5.	
	a. Line 44a times apportionment percentage	45a
	b. Line 44b times apportionment percentage	45b
	c. Line 44c times apportionment percentage	45c
	d. Line 44d times apportionment percentage	45d
	e. Line 44e times apportionment percentage	45e
	f. Line 44f times apportionment percentage	45f
	g. Line 44g times apportionment percentage	45g
	h. Line 44h times apportionment percentage	45h
	i. Line 44i times apportionment percentage	45i
	j. Line 44j times apportionment percentage	45j
	k. Line 44k times apportionment percentage	45k
	l. Line 44l times apportionment percentage	45l
	m. Line 44m times apportionment percentage	45m
	n. Line 44n times apportionment percentage	45n
	o. Line 44o times apportionment percentage	45o
	p. Line 44p times apportionment percentage	45p
	q. Line 44q times apportionment percentage	45q



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47 Apportioned Massachusetts total. Add the amounts from lines 45a through 45q to the corresponding amounts from lines 46a through 46q.

a. Line 45a plus line 46a	47a	<input checked="" type="checkbox"/>							
b. Line 45b plus line 46b	47b	<input checked="" type="checkbox"/>							
c. Line 45c plus line 46c	47c	<input checked="" type="checkbox"/>							
d. Line 45d plus line 46d	47d								
e. Line 45e plus line 46e	47e								
f. Line 45f plus line 46f	47f								
g. Line 45g plus line 46g	47g								
h. Line 45h plus line 46h	47h								
i. Line 45i plus line 46i	47i								
j. Line 45j plus line 46j	47j	<input checked="" type="checkbox"/>							
k. Line 45k plus line 46k	47k								
l. Line 45l plus line 46l	47l	<input checked="" type="checkbox"/>							
m. Line 45m plus line 46m	47m	<input checked="" type="checkbox"/>							
n. Line 45n plus line 46n	47n	<input checked="" type="checkbox"/>							
o. Line 45o plus line 46o	47o	<input checked="" type="checkbox"/>							
p. Line 45p plus line 46p	47p								
q. Line 45q plus line 46q	47q	<input checked="" type="checkbox"/>							



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SHAREHOLDER INFORMATION

List all resident, nonresident and other shareholders. Fill in if attaching additional page(s) to include additional taxpayers.

SOCIAL SECURITY OR FEDERAL IDENTIFICATION NUMBER	RESIDENT	NON- RESIDENT	OTHER	NAME OF SHAREHOLDER (last, first)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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