2017 Schedule 3K-1

XXXXXXXXXXXXX

Partner's Massachusetts Information

Year beginning XXXXXXXX Ending XXXXXXXX

PARTNERNAMEXXXXXXXXXXXXXXXXXXXXX TAXPAYRIDNO
PARTNERADDRESSXXXXXXXXXX CITYTOWNPOSTOFFICEXXXXXX ST ZIP+FOURX
PARTNERSHIPNAMEXXXXXXXXXXXXXXXXX FEDERALIDNO
PARTNERSHIPADDRESSXXXXXX CITYTOWNPOSTOFFICEXXXXXX ST ZIP+FOURX

A. Type of entity X Individual resident X Individual nonresident X Trust or estate
X S corporation X Corporation X Partnership or other PTE X IRA X Disregarded entity X Exempt org

B. Type of partner X Limited X General

C. Type of form submission X Final X Amended return

D. Fill in if there was a sale, transfer or liquidation of any part of this partnership interest during the tax year X

E. Fill in if the partnership participated in one or more installment sales transactions X

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) X IRC 453A X IRC 453(I)(2)(B)

Partner's Distributive Share

1.	Massachusetts ordinary income or loss	**1**	–XXXXXXXXXXX
2.	Guaranteed payments to partners (deductible and capitalized)	**2**	XXXXXXXXXXX
3.	Separately stated deductions	**3**	XXXXXXXXXXX
4.	Combine lines 1 through 3	**4**	–XXXXXXXXXXX
5.	Credits available		
a.	Taxes due to another jurisdiction (full-year and part-year residents only)	**5a**	XXXXXXXXXXX
b.	Lead Paint	**5b**	XXXXXXXXXXX
c.	X Economic Opportunity Area X Economic Development Incentive Program	**5c**	XXXXXXXXXXX
d.	Brownfields	**5d**	XXXXXXXXXXX
e.	Low-Income Housing	**5e**	XXXXXXXXXXX
f.	Historic Rehabilitation	**5f**	XXXXXXXXXXX
g.	Film Incentive	**5g**	XXXXXXXXXXX
h.	Medical Device	**5h**	XXXXXXXXXXX
i.	Employer Wellness Program	**5i**	XXXXXXXXXXX
j.	Farming and Fisheries	**5j**	XXXXXXXXXXX
k.	Certified Housing Development	**5k**	XXXXXXXXXXX
l.	Life Sciences	**5l**	XXXXXXXXXXX
m.	Veterans Hire	**5m**	XXXXXXXXXXX
n.	Low Income Housing Donation	**5n**	XXXXXXXXXXX

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Partner's Massachusetts Information

TXPAYERIDNUM

5.	o. Refundable Film Credit	**5o**	XXXXXXXXXXX
	p. Refundable Dairy Credit	**5p**	XXXXXXXXXXX
	q. Refundable Conservation Tax Credit	**5q**	XXXXXXXXXXX
	r. Refundable Community Investment Tax Credit	**5r**	XXXXXXXXXXX
	s. Total credits	**5s**	XXXXXXXXXXX
6.	Net income or loss from rental real estate activity	**6**	–XXXXXXXXXXX
7.	Net income or loss from other rental activity	**7**	–XXXXXXXXXXX
8.	Interest from U.S. obligations	**8**	XXXXXXXXXXX
9.	Interest (5.1%) from Massachusetts banks	**9**	XXXXXXXXXXX
10.	Other interest and dividend income	**10**	XXXXXXXXXXX
11.	Non-Massachusetts state and municipal bond interest	**11**	XXXXXXXXXXX
12.	Royalty income	**12**	XXXXXXXXXXX
13.	Short-term capital gains	**13**	XXXXXXXXXXX
14.	Short-term capital losses	**14**	–XXXXXXXXXXX
15.	Gain on the sale, exchange or involuntary conversion of property used in a trade or business held for one year or less	**15**	XXXXXXXXXXX
16.	Loss on the sale, exchange, or involuntary conversion of property used in a trade or business held for one year or less	**16**	–XXXXXXXXXXX
17.	Long-term capital gain or loss	**17**	–XXXXXXXXXXX
18.	Net gain or loss under Section 1231	**18**	–XXXXXXXXXXX
19.	Long-term gains on collectibles and pre-1996 installment sales	**19**	XXXXXXXXXXX
20.	Differences and adjustments	**20**	–XXXXXXXXXXX

Corporate Partner Information

21.	State and municipal bond interest not included in U.S. net income	**21**	XXXXXXXXXXX
22.	Foreign, state or local income, franchise, excise or capital stock taxes deducted from U.S. net income	**22**	XXXXXXXXXXX
23.	Other adjustments, if any	**23**	–XXXXXXXXXXX

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Partner's Massachusetts Information

TXPAYERIDNUM

Reconciliation of Partner's Capital Account

24.	Balance at the beginning of the year	**24**	–XXXXXXXXXXX
25.	Massachusetts net income for the year	**25**	–XXXXXXXXXXX
26.	Entire net income for the year	**26**	–XXXXXXXXXXX
27.	Capital contributions	**27**	XXXXXXXXXXX
28.	Withdrawals	**28**	XXXXXXXXXXX
29.	Balance at end of year	**29**	–XXXXXXXXXXX

Partner's Share of Profit, Loss and Capital

30.	Percentage of profit	Beginning	X.XXXXX	Ending	X.XXXXX
31.	Percentage of loss	Beginning	X.XXXXX	Ending	X.XXXXX
32.	Percentage of capital	Beginning	X.XXXXX	Ending	X.XXXXX
33.	Non-recourse liabilities			Ending	XXXXXXXXXXX
34.	Qualified non-recourse financing			Ending	XXXXXXXXXXX
35.	Recourse liabilities			Ending	XXXXXXXXXXX

Pass-through Entity Payment and Credit Information

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

36.	Withholding amount	**36**	XXXXXXXXXXX
37.	Payments made in a composite filing	**37**	XXXXXXXXXXX
38.	Credit for amounts withheld by lower-tier entity(ies)	**38**	XXXXXXXXXXX
	Payer ID number FEDERALIDNO		
39.	Payments made with a composite filing by lower-tier entity(ies)	**39**	XXXXXXXXXXX

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