



PRINT IN BLACK INK

FOR PRIVACY ACT NOTICE, SEE INSTRUCTIONS.

Calendar year filers enter 01-01-2020 and 12-31-2020 below. Fiscal year filers enter appropriate dates.

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

Form 355 Business/Manufacturing Corporation Excise Return 2020

NAME OF CORPORATION, FEDERAL IDENTIFICATION NUMBER (FID), PRINCIPAL BUSINESS ADDRESS, CITY/TOWN/POST OFFICE, STATE, ZIP+4, MASSACHUSETTS ADDRESS

Fill in if: Amended return, Federal amendment, Federal audit, Member of lower-tier entity, Enclosing Schedule TDS, Final Massachusetts return, Initial return, Name change, Address change, Enclosing Schedule FCI, S election termination or revocation

- 1 Fill in if corporation is incorporated within Massachusetts
2 Date of incorporation in Massachusetts
3 Type of corporation (select one, if applicable)
4 Type of corporation (select one, if applicable)
5 Fill in if corporation is included in a 355U filing
6 FID of principal reporting corporation
7 Fill in if line 5 is filled in and corporation's tax year ends in a different month
8 Fill in if corporation is an insurance mutual holding corporation
9 Fill in if corporation is requesting alternative apportionment
10 Principal business code
11 Average number of employees in Massachusetts
12 Average number of employees worldwide
13 Foreign corporation: first date of business in Massachusetts
14 Last year audited by IRS
15 Fill in if adjustments have been reported to Massachusetts
16 Fill in if corporation is deducting intangible or interest expenses paid to a related entity
17 Fill in if: Taxpayer is claiming exemption from the income measure of the excise pursuant to PL 86-272, Taxable only with respect to partnership activity

SIGN HERE. Under penalties of perjury, I declare that to the best of my knowledge and belief this return and enclosures are true, correct and complete.

Signature of appropriate officer, Date, Print paid preparer's name, Preparer's SSN or PTIN, Title, Date, Paid preparer's phone, Paid preparer's EIN, Are you signing as an authorized delegate of the appropriate corporate officer?, Taxpayer's e-mail address



FEDERAL IDENTIFICATION NUMBER

Input field for Federal Identification Number

2020 FORM 355, PAGE 2
EXCISE CALCULATION

1	Taxable Massachusetts tangible property, if applicable (from Schedule C, line 4)	<input type="text"/>	× .0026 =	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Taxable net worth, if applicable (from Schedule D, Line 10)	<input type="text"/>	× .0026 =	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	Massachusetts taxable income (from Schedule E, line 27). Not less than "0"	<input type="text"/>	× .0800 =	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	Credit recapture (enclose Credit Recapture Schedule). See instructions			4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	Additional tax on installment sales			5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6	Excise before credits. Add line 1 or 2, whichever applies, to total of lines 3 through 5			6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7	Total credits (from Credit Manager Schedule; combined report filers, see instructions)			7	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8	Excise after credits. Subtract line 7 from line 6			8	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9	Combined filers only, enter the amount of tax from Schedule U-ST, line 41			9	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10	Minimum excise (cannot be prorated; combined report filers, see instructions)			10	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
11	Excise due before voluntary contribution. (line 8 or 10, whichever is greater)			11	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
12	Voluntary contribution for endangered wildlife conservation			12	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
13	Excise due plus voluntary contribution. Add lines 11 and 12			13	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
14	2019 overpayment applied to your 2020 estimated tax			14	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
15	2020 Massachusetts estimated tax payments (do not include amount in line 14)			15	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
16	Payment made with extension.			16	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
17	Payment with original return. Use only if amending a return			17	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
18	Pass-through entity withholding (from Schedule 3K-1) Payer ID number <input type="text"/>			18	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
19	Total refundable credits (from Credit Manager Schedule).			19	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
20	Total payments. Add lines 14 through 19			20	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
21	Amount overpaid. Subtract line 13 from line 20			21	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
22	Amount overpaid to be credited to 2021 estimated tax.			22	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
23	Amount overpaid to be refunded. Subtract line 22 from line 21			Refund 23	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
24	Balance due. Subtract line 20 from line 13			Balance due 24	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
25	a. M-2220 penalty <input type="text"/> b. Late file/pay penalties <input type="text"/>			a + b = 25	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
26	Interest on unpaid balance.			26	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
27	Payment due at time of filing. See instructions.			Total due 27	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>



CORPORATION NAME

FEDERAL IDENTIFICATION NUMBER

Schedule A Balance Sheet

2020

ASSETS	A. ORIGINAL COST	B. ACCUMULATED DEPRECIATION AND AMORTIZATION	C. NET BOOK VALUE
1 Capital assets in Massachusetts:			
a. Buildings 1a	<input type="text"/>	<input type="text"/>	<input type="text"/>
b. Land 1b	<input type="text"/>	<input type="text"/>	<input type="text"/>
c. Motor vehicles and trailers 1c	<input type="text"/>	<input type="text"/>	<input type="text"/>
d. Machinery taxed locally 1d	<input type="text"/>	<input type="text"/>	<input type="text"/>
e. Machinery not taxed locally 1e	<input type="text"/>	<input type="text"/>	<input type="text"/>
f. Equipment 1f	<input type="text"/>	<input type="text"/>	<input type="text"/>
g. Fixtures 1g	<input type="text"/>	<input type="text"/>	<input type="text"/>
h. Leasehold improvements taxed locally 1h	<input type="text"/>	<input type="text"/>	<input type="text"/>
i. Leasehold improvements not taxed locally 1i	<input type="text"/>	<input type="text"/>	<input type="text"/>
j. Other fixed depreciable assets 1j	<input type="text"/>	<input type="text"/>	<input type="text"/>
k. Construction in progress 1k	<input type="text"/>	<input type="text"/>	<input type="text"/>
l. Total capital assets in Massachusetts 1l	<input type="text"/>	<input type="text"/>	<input type="text"/>
2 Inventories in Massachusetts:			
a. General merchandise 2a	<input type="text"/>	<input type="text"/>	<input type="text"/>
b. Exempt goods 2b	<input type="text"/>	<input type="text"/>	<input type="text"/>
3 Supplies and other non-depreciable assets in Massachusetts 3	<input type="text"/>	<input type="text"/>	<input type="text"/>
4 Total tangible assets in Massachusetts 4	<input type="text"/>	<input type="text"/>	<input type="text"/>
5 Capital assets outside in Massachusetts:			
a. Buildings and other depreciable assets 5a	<input type="text"/>	<input type="text"/>	<input type="text"/>
b. Land 5b	<input type="text"/>	<input type="text"/>	<input type="text"/>
6 Leaseholds/leasehold improvements outside Massachusetts 6	<input type="text"/>	<input type="text"/>	<input type="text"/>
7 Total capital assets outside Massachusetts 7	<input type="text"/>	<input type="text"/>	<input type="text"/>

BE SURE TO CONTINUE SCHEDULE A ON OTHER SIDE



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Input boxes for Federal Identification Number

2020 SCHEDULE A, PAGE 2

Table with 3 columns: Line number, Description, and Amount. Rows 8-18 include Inventories, Supplies, Tangible assets, Investments, Notes receivable, Accounts receivable, Intercompany receivables, Cash, and Other assets.

LIABILITIES AND CAPITAL

Table with 3 columns: Line number, Description, and Amount. Rows 19-33 include Mortgages, Bonds and other funded debt, Accounts payable, Notes payable, Miscellaneous current liabilities, Miscellaneous accrued liabilities, Total liabilities, Total capital stock issued, Paid-in or capital surplus, Retained earnings and surplus reserves, Undistributed S corporation net income, Total capital, Treasury stock, and Total liabilities and capital.

If a loss, mark an X in box at left



CORPORATION NAME

FEDERAL IDENTIFICATION NUMBER

Schedule B Tangible or Intangible Property Corporation Classification

2020

Enter all values as net book values from Schedule A, col. c.

1	Total Massachusetts tangible property (from Schedule A, line 4)	1	<input type="text"/>
2	Massachusetts real estate (from Schedule A, lines 1a and 1b)	2	<input type="text"/>
3	Massachusetts motor vehicles and trailers (from Schedule A, line 1c)	3	<input type="text"/>
4	Massachusetts machinery taxed locally. Classified manufacturers enter 0 (from Schedule A, line 1d)	4	<input type="text"/>
5	Massachusetts leasehold improvements taxed locally (from Schedule A, line 1h)	5	<input type="text"/>
6	Massachusetts tangible property taxed locally. Add lines 2 through 5	6	<input type="text"/>
7	Massachusetts tangible property not taxed locally. Subtract line 6 from line 1	7	<input type="text"/>
8	Total assets (from Schedule A, line 18)	8	<input type="text"/>
9	Massachusetts tangible property taxed locally (from line 6 above)	9	<input type="text"/>
10	Total assets not taxed locally. Subtract line 9 from line 8	10	<input type="text"/>
11	Investments in subsidiaries at least 80% owned (from Schedule A, line 12a)	11	<input type="text"/>
12	Assets subject to allocation. Subtract line 11 from line 10	12	<input type="text"/>
13	Income apportionment percentage (from Schedule F, line 5)	13	<input type="text"/>
14	Allocated assets. Multiply line 12 by line 13	14	<input type="text"/>
15	Tangible property percentage. Divide line 7 by line 14	15	<input type="text"/>

Schedule C Tangible Property Corporation

Complete only if Sched. B, line 15 is 10% or more. Enter all values as net book values from Sched. A, col. c.

1	Total Massachusetts tangible property (from Schedule A, line 4)	1	<input type="text"/>
2	Exempt Massachusetts tangible property:		
	a. Massachusetts real estate (from Schedule A, lines 1a and 1b)	2a	<input type="text"/>
	b. Massachusetts motor vehicles and trailers (from Schedule A, line 1c)	2b	<input type="text"/>
	c. Massachusetts machinery taxed locally. Classified manufacturers enter "0" (from Schedule A, line 1d)	2c	<input type="text"/>
	d. Massachusetts leasehold improvements taxed locally (from Schedule A, line 1h)	2d	<input type="text"/>
	e. Exempt goods (from Schedule A, line 2b)	2e	<input type="text"/>
	f. Certified Massachusetts industrial waste/air treatment facilities	2f	<input type="text"/>
	g. Certified Massachusetts solar or wind power deduction	2g	<input type="text"/>
3	Total exempt Massachusetts tangible property. Add lines 2a through 2g.	3	<input type="text"/>
4	Taxable Massachusetts tangible property. Subtract line 3 from line 1. Do not enter less than "0." Enter result in line 1 of the Excise Calculation on page 2, and enter "0" in line 2 of the Excise Calculation	4	<input type="text"/>



CORPORATION NAME

FEDERAL IDENTIFICATION NUMBER

Schedule D Intangible Property Corporation

2020

Complete only if Sched. B, line 15 is less than 10%. Enter all values as net book values from Sched. A, col. c.

1	Total assets (from Schedule A, line 18).....	1	<input type="text"/>
2	Total liabilities (from Schedule A, line 26).....	2	<input type="text"/>
3	Massachusetts tangible property taxed locally (from Schedule B, line 6).....	3	<input type="text"/>
4	Mortgages on Massachusetts tangible property taxed locally (from Schedule A, line 19a).....	4	<input type="text"/>
5	Subtract line 4 from line 3. Do not enter less than "0".....	5	<input type="text"/>
6	Investments in subsidiaries at least 80% owned (from Schedule A, line 12a).....	6	<input type="text"/>
7	Deductions from total assets. Add lines 2, 5 and 6.....	7	<input type="text"/>
8	Allocable net worth. Subtract line 7 from line 1. Do not enter less than "0".....	8	<input type="text"/>
9	Income apportionment percentage (from Schedule F, line 5).....	9	<input type="text"/>
10	Taxable net worth. Multiply line 8 by line 9. Enter result in line 2 of the Excise Calculation on page 2, and enter "0" in line 1 of the Excise Calculation.....	10	<input type="text"/>

Schedule E-1 Dividends Deduction

1	Total dividends. See instructions.....	1	<input type="text"/>
2	Dividends from Massachusetts corporate trusts.....	2	<input type="text"/>
3	Dividends from non-wholly-owned DISCs.....	3	<input type="text"/>
4	Dividends, if less than 15% of voting stock owned.....	4	<input type="text"/>
5	Dividends from RICs.....	5	<input type="text"/>
6	Dividends from REITs.....	6	<input type="text"/>
7	Total taxable dividends. Add lines 2 through 6.....	7	<input type="text"/>
8	Dividends eligible for deduction. Subtract line 7 from line 1.....	8	<input type="text"/>
9	Dividends deduction. Multiply line 8 by .95.....	9	<input type="text"/>

