

## Massachusetts Department of Revenue Schedule 2K-1 Beneficiary's Massachusetts Information

2020

Name of estate or trust	Estate or trust employer Identification number					
Name of beneficiary	Legal domicile (state) of beneficiary			Identification number of beneficiary		
Street address						
City/Town S	State	Zip				
Name of fiduciary						
Street address						
City/Town S	State	Zip				
In/care/of address						
City/Town	State	Zip				
Fill in one only:	Percenta	ge of beneficiary's ta	axable income			
O Amended 2K-1 O Final 2K-1						
What type of entity is beneficiary?				Fill in if beneficiary is a r	onresident of Mass.	
○ Individual ○ Estate/trust ○ Charitable organization ○ Other				0		
Allocable share item	to	a. Amount from federal 1041 allocable o this beneficiary	b. Massachusetts adjustments	c. Total amounts using Mass- achusetts law (see instructions)	d. Massachusetts source income (see instructions)	
Part B income	_	Fill in oval if showi	ing a loss			
1 Wages, salaries, tips and other employee compensation	. 1 🖵					
2 Taxable pensions and annuities	. 2					
3 Business/profession or farm income or loss	. 3	1	0	0	0	
4 Rental, royalty and REMIC income or loss	. 4		0	0	0	
5 Massachusetts bank interest	. 5					
<b>6</b> Other income, such as winnings, lump-sum distributions, etc. (itemize)	. 6	)	0	0	0	
7 Deductions allowed decedents	. 7					
Part A interest and dividend income  8 Interest and dividend income (do not include income from common trust funds)	. 8 🗀					
9 Common trust fund interest and dividend income	. 9					
Part A capital gains  10 Taxable Part A 12% capital gains (do not include income from common trust funds)	10					
11 Part A 12% short-term common trust fund capital gains						
Part C capital gains 12 Part C 5.0% long-term capital gains (do not include						
income from common trust funds)	12					
13 Part C 5.0% long-term common trust fund capital gains	13					



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Name of estate or trust

Estate or trust employer Identification number

Allocable share item (cont'd.)	a. Amount from federal 1041 allocable to this beneficiary	b. Massachusetts adjustments	c. Total amounts using Mass- achusetts law (see instructions)	d. Massachusetts source income (see instructions)
Credits and estimated tax payments				
14 Taxes paid to other jurisdictions				
<b>15</b> Lead Paint <b>15</b>				
16a Economic Opportunity Area16a				
16b Economic Development Incentive Program				
Certificate number				
<b>17</b> Brownfields				
Certificate number				
<b>18</b> Low-Income Housing				
Building Identification number				
19 Historic Rehabilitation. 19				
Certificate number				
20 Film Incentive				
Certificate number				
21 Medical Device				
<b>22</b> Employer Wellness Program				
23 Farming and Fisheries				
24 Senior Circuit Breaker				
<b>25</b> Solar/Wind				
<b>26</b> Septic				
27 Certified Housing Development				
Certificate number				
<b>28</b> Life Sciences				
<b>29</b> Veterans Hire				
Certificate number				
<b>30</b> Low-Income Housing Donation				
Certificate number				
<b>31</b> Angel Investor <b>31</b>				
<b>32</b> Apprentice				
Certificate number				
33 Vacant Store Front				
Certificate number				



## 2020 SCHEDULE 2K-1, PAGE 3

Name of estate or trust Estate or trust employer Identification number Allocable share item (cont'd.) a. Amount c. Total amounts d. from federal b. using Mass-Massachusetts 1041 allocable Massachusetts achusetts law source income to this beneficiary adjustments (see instructions) (see instructions) **Credits and estimated tax payments** (cont'd.) 34 Estimated tax payments made on behalf of nonresident beneficiary by fiduciary..... Certificate number ...... Certificate number ...... Certificate number .....