

**CAUTION:**  
**This tax return must  
be filed electronically.**

Paper versions of this return  
**will not** be accepted.

If you have questions about filing electronically,  
contact us at 617-887-6367.

See <https://www.mass.gov/info-details/dor-e-filing-and-payment-requirements> for further information about our electronic filing and payment requirements.



Fill out in black ink.

**Massachusetts Department of Revenue**  
**Form 3 Partnership Return of Income****2021**

Calendar year filers enter 01–01–2021 and 12–31–2021 below; fiscal year filers enter appropriate dates

Tax year beginning

Tax year ending

MMDDYYYY

MMDDYYYY

NAME OF PARTNERSHIP

FEDERAL IDENTIFICATION NUMBER (FID)

MAILING ADDRESS

CITY/TOWN/POST OFFICE

STATE

ZIP + 4

C/O NAME

C/O ADDRESS

CITY/TOWN/POST OFFICE

STATE

ZIP + 4

A. PRINCIPAL BUSINESS ACTIVITY

B. PRINCIPAL PRODUCT OR SERVICE

C. BUSINESS CODE NUMBER

D. DATE BUSINESS STARTED

E. TOTAL ASSETS

F. Reason for filing (fill in all that apply; see instructions)

☐ Initial return☐ Final return☐ Name change☐ Federal amendment☐ Technical termination☐ Enclosing Schedule TDS☐ Common-trust fund☐ Enclosing Schedule FCI☐ Amended return☐ Amended return due to IRS BBA Partnership Audit☐ Federal BBA Audit Assessment in current tax year☐ Enclosing Schedule DRE

G. Accounting method (fill in one)

☐ Cash☐ Accrual☐ Other

H. How many Schedules 3K-1 are attached to this return? (Attach one Schedule 3K-1 for each person who was a partner at any time during tax year)

**Note:** Partnerships **must** file electronically. See TIR 21-9 for more information.

I. Fill in if you are a member of a lower-tier

J. Fill in if this partnership is an investment partnership as defined in the Pass-Through Entity Withholding Reg., 830 CMR 62B.2.2(2)

K. Fill in if this partnership elected out of the federal centralized partnership audit regime this tax year.

L. Annual Voluntary Election: Fill in if pass-through entity has elected to pay tax at the entity level pursuant to MGL ch 63D (this election is irrevocable)

Total amount paid.

**PART 1. MASSACHUSETTS INFORMATION****1** Gross income. See instructions**2** Fill in if this partnership is engaged exclusively in buying, selling, dealing in or holding securities on its own behalf and not as a broker**3** Fill in if this partnership is organized as a Limited Liability Company and treated as a partnership for federal income tax purposes**4** Fill in if this partnership is a publicly traded partnership as defined in IRC § 469(k)2**5** Fill in if there has been a sale or transfer or liquidation of a partnership interest during the period reported on this return**6** Income apportionment percentage (from line 46 of Income Apportionment Schedule, or 100%, whichever applies)**DECLARATION. 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 GENERAL PARTNER

DATE

PRINT PAID PREPARER'S NAME

PAID PREPARER'S PTIN

TITLE

DATE

PAID PREPARER'S PHONE

PAID PREPARER'S EIN

MAY DOR DISCUSS THIS RETURN WITH THE PREPARER?

PAID PREPARER'S SIGNATURE

DATE

IS PAID PREPARER SELF-EMPLOYED?

☐ Yes☐ Yes

NAME OF DESIGNATED TAX MATTERS PARTNER

IDENTIFYING NUMBER OF TAX MATTERS PARTNER



NAME OF PARTNERSHIP

FEDERAL IDENTIFICATION NUMBER

7 Fill in if any partners in this partnership file as part of a nonresident composite income tax return ..... 0  
If filled in, enter Federal Identification number under which the composite return is filed ..... 7  
Number of partners included in composite return ..... 1

8 Fill in if this partnership is under audit by the IRS, or has been audited in a prior year ..... 0

9 Withholding amount. Add all Schedules 3K-1, line 37 ..... 9 0 0

10 Payments made with composite return. Add all Schedules 3K-1, line 38 ..... 10 0 0

11 Credit for amounts withheld by lower-tier entities. Add all Schedules 3K-1, line 39 ..... 11 0 0

12 Payments made with a composite filing by lower-tier entities. Add all Schedules 3K-1, line 40 ..... 12 0 0

**MASSACHUSETTS ORDINARY INCOME OR LOSS**

13 Ordinary income or loss (from U.S. Form 1065, line 22) ..... 13 0 0

14 Other income or loss (from U.S. Form 1065, Schedule K, line 11) ..... 14 0 0

15 State, local and foreign income and unincorporated business taxes or excises ..... 15 0 0

16 Subtotal. Add lines 13 through 15 ..... 16 0 0

17 IRC § 1231 gains or losses included in line 16 ..... 17 0 0

18 Subtotal. Subtract line 17 from line 16 ..... 18 0 0

19 Adjustments (if any) to line 18. Enter the applicable line number from U.S. Form 1065 and the amount of the adjustment.

a. Line number 00 Amount 0 0

b. Line number 00 Amount 0 0

Total adjustments 19 0 0

20 Massachusetts ordinary income or loss. Combine lines 18 and 19 ..... 20 0 0

21 Net income or loss from rental real estate activities (from U.S. Form 1065, Schedule K, line 2) ..... 21 0 0

22 Adjustments (if any) to line 21. Enter the applicable line number from U.S. Form 8825 and the amount of the adjustment.

a. Line number 00 Amount 0 0

b. Line number 00 Amount 0 0

Total adjustments 22 0 0

23 Adjusted Massachusetts net income or loss from rental real estate activities. Combine lines 21 and 22 ..... 23 0 0

24 Net income or loss from other rental activities (from U.S. Form 1065, Schedule K, line 3c) ..... 24 0 0

25 Adjustments (if any) to line 24. Enter the applicable line number from U.S. Form 1065 and the amount of the adjustment.

a. Line number 00 Amount 0 0

b. Line number 00 Amount 0 0

Total adjustments 25 0 0

26 Adjusted Massachusetts net income or loss from other rental activities. Combine lines 24 and 25 ..... 26 0 0





NAME OF PARTNERSHIP

FEDERAL IDENTIFICATION NUMBER

## Income Apportionment Schedule

**41** Complete the Income Apportionment Schedule only if: there is one or more corporate or nonresident individual partners; income was derived from business activities in another state; and such activities provide that state with the jurisdiction to levy an income tax or a franchise tax.

### BUSINESS LOCATIONS OUTSIDE OF MASSACHUSETTS

CITY AND STATE	SPECIFY WHETHER FACTORY, SALES OFFICE, WAREHOUSE, CONSTRUCTION SITE, ETC.	ACCEPTS ORDERS	REGISTERED TO DO BUSINESS IN STATE	FILES RETURNS IN STATE
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### APPORTIONMENT FACTORS

#### 42 Tangible property

a. Property owned (averaged) . . . . .	Massachusetts	<input type="checkbox"/>	Worldwide	<input type="checkbox"/>
b. Property rented (capitalized) . . . . .	Massachusetts	<input type="checkbox"/>	Worldwide	<input type="checkbox"/>
c. Total property owned and rented . . . . .	Massachusetts	<input type="checkbox"/>	Worldwide	<input type="checkbox"/>
d. Tangible property apportionment percentage. Divide Massachusetts total by worldwide total (from line 42c) . . . . .				42d

#### 43 Payroll

a. Total payroll . . . . .	Massachusetts	<input type="checkbox"/>	Worldwide	<input type="checkbox"/>
b. Payroll apportionment percentage. Divide Massachusetts total payroll by worldwide total payroll (from line 43a). . . . .				43b

#### 44 Sales

a. Tangibles . . . . .	Massachusetts	<input type="checkbox"/>	Worldwide	<input type="checkbox"/>
b. Services (including mutual fund sales) . . . . .	Massachusetts	<input type="checkbox"/>	Worldwide	<input type="checkbox"/>
c. Rents and royalties . . . . .	Massachusetts	<input type="checkbox"/>	Worldwide	<input type="checkbox"/>
d. Other . . . . .	Massachusetts	<input type="checkbox"/>	Worldwide	<input type="checkbox"/>
e. Total sales . . . . .	Massachusetts	<input type="checkbox"/>	Worldwide	<input type="checkbox"/>
f. Sales apportionment percentage. Divide Massachusetts total sales by worldwide total sales (from line 44e). . . . .				44f

**45** Apportionment percentage. Add lines 42d, 43b and  $(44f \times 2)$  . . . . . 45

**46** Massachusetts apportionment percentage. Divide line 45 by 4. **Note:** If an apportionment factor is inapplicable, divide by the number of times each applicable factor is used (see instructions) . . . . . 46



NAME OF PARTNERSHIP

FEDERAL IDENTIFICATION NUMBER

**PARTNERSHIP CREDITS****47 Credits available**

a. Taxes due to another jurisdiction (full-year residents and part-year residents only) ..... 47a

b. Other credits (from Schedule CMS) ..... 47b

**48** Credit recapture (from Schedule CRS) ..... 48**MISCELLANEOUS FEDERAL INFORMATION****49** Gross receipts or sales (from Part 2, Federal Information, line 1a) ..... 49**50** Total income or loss (from Part 2, Federal Information, line 8) ..... 50 ☒**51** Bad debts (from Part 2, Federal Information, line 12) ..... 51**52** Interest (from Part 2, Federal Information, line 15) ..... 52**53** Fill in if during the tax year the partnership had any debt that was cancelled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt ..... ☐**54** Investment interest expense (from Part 2, Federal Information, line 50b) ..... 54

**E-File Only.**  
Paper returns will not be accepted.  
See TIRs 16-9 and 21-9 for more information.



NAME OF PARTNERSHIP

FEDERAL IDENTIFICATION NUMBER

**Part 2. Federal Information****Income.** From U.S. Form 1065.**Note:** Include only trade or business income and expenses on lines 1a through 22. See instructions.

Fill in oval if showing a loss

<b>1a</b> Gross receipts or sales	<b>1a</b>	<input type="text"/>
<b>1b</b> Returns and allowances	<b>1b</b>	<input type="text"/>
<b>1c</b> Total. Subtract line 1b from line 1a	<b>1c</b>	<input type="text"/>
<b>2</b> Cost of goods sold (attach Form 1125-A)	<b>2</b>	<input type="text"/>
<b>3</b> Gross profit. Subtract line 2 from line 1c	<b>3</b>	<input type="text"/>
<b>4</b> Ordinary income or loss from other partnerships, estates and trusts (attach statement)	<b>4</b>	<input type="text"/>
<b>5</b> Net farm profit or loss (from U.S. Form 1040, Schedule F)	<b>5</b>	<input type="text"/>
<b>6</b> Net gain or loss (from U.S. Form 4797, Part II, line 17; attach U.S. Form 4797)	<b>6</b>	<input type="text"/>
<b>7</b> Other income or loss (attach statement)	<b>7</b>	<input type="text"/>
<b>8</b> Total income or loss. Combine lines 3 through 7	<b>8</b>	<input type="text"/>

**Deductions.** From U.S. Form 1065. See instructions for limitations.

<b>9</b> Salaries and wages (other than to partners; less employment credits)	<b>9</b>	<input type="text"/>
<b>10</b> Guaranteed payments to partners	<b>10</b>	<input type="text"/>
<b>11</b> Repairs and maintenance	<b>11</b>	<input type="text"/>
<b>12</b> Bad debts	<b>12</b>	<input type="text"/>
<b>13</b> Rent	<b>13</b>	<input type="text"/>
<b>14</b> Taxes and licenses	<b>14</b>	<input type="text"/>
<b>15</b> Interest	<b>15</b>	<input type="text"/>
<b>16a</b> Depreciation (from U.S. Form 4562)	<b>16a</b>	<input type="text"/>
<b>16b</b> Less depreciation reported on Form 1125-A and elsewhere on return	<b>16b</b>	<input type="text"/>
<b>16c</b> Total. Subtract line 16b from line 16a	<b>16c</b>	<input type="text"/>
<b>17</b> Depletion (do not deduct oil and gas depletion)	<b>17</b>	<input type="text"/>
<b>18</b> Retirement plans, etc	<b>18</b>	<input type="text"/>
<b>19</b> Employee benefit programs	<b>19</b>	<input type="text"/>
<b>20</b> Other deductions (attach statement)	<b>20</b>	<input type="text"/>
<b>21</b> Total deductions. Add lines 9 through 20 (do not include lines 16a and 16b)	<b>21</b>	<input type="text"/>
<b>22</b> Ordinary business income or loss. Subtract line 21 from line 8	<b>22</b>	<input type="text"/>



NAME OF PARTNERSHIP

FEDERAL IDENTIFICATION NUMBER

**Part 2. Federal Information** (cont'd.)**Cost of goods sold.** From U.S. Form 1125-A (see instructions).

<b>23</b> Inventory at beginning of year	<b>23</b>	
<b>24</b> Purchases less cost of items withdrawn for personal use	<b>24</b>	
<b>25</b> Cost of labor	<b>25</b>	
<b>26</b> Additional IRC § 263A costs (attach statement)	<b>26</b>	
<b>27</b> Other costs (attach statement)	<b>27</b>	
<b>28</b> Total. Add lines 23 through 27.	<b>28</b>	
<b>29</b> Inventory at end of year	<b>29</b>	
<b>30</b> Cost of goods sold. Subtract line 29 from line 28	<b>30</b>	

**Other information.** From U.S. Form 1065, Schedule B.**31** Type of entity filing this return (fill in one):

- |  |  |
|--|--|
| <input type="radio"/> Domestic general partnership       | <input type="radio"/> Domestic limited partnership           |
| <input type="radio"/> Domestic limited liability company | <input type="radio"/> Domestic limited liability partnership |
| <input type="radio"/> Foreign partnership                | <input type="radio"/> REIT                                   |
| <input type="radio"/> Other (specify) _____              |  |

- 32** Fill in if at any time during the tax year any partner in the partnership was a disregarded entity, a partnership (including an entity treated as a partnership), a trust, an S corporation, an estate (other than an estate of a deceased partner) or a nominee or similar person ☐
- 33** Fill in if this partnership is a publicly traded partnership as defined in IRC § 469(k)(2) ☐
- 34** Fill in if during the tax year the partnership had any debt that was cancelled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt ☐
- 35** Fill in if the partnership is making, or had previously made (and not revoked), an IRC § 754 election (see instructions for details regarding an IRC § 754 election.) ☐
- 36** Fill in if the partnership made for this tax year an optional basis adjustment under IRC § 743(b) or 734(b). If Yes, attach a statement showing the computation and allocation of the basis adjustment (see instructions). ☐
- 37** Fill in if during the current or prior tax year the partnership engaged in a like-kind exchange or distributed any property received in a like-kind exchange, or contributed such property to another entity (other than entities wholly-owned by the partnership throughout the tax year) ☐

**Partners' Distributive Share Items.** From U.S. Form 1065, Schedule K.**Income or loss**

Fill in oval if showing a loss

<b>38</b> Ordinary business income or loss	<b>38</b>	<input type="radio"/>
<b>39</b> Net rental real estate income or loss (from U.S. Form 8825)	<b>39</b>	<input type="radio"/>
<b>40a</b> Other gross rental income or loss	<b>40a</b>	<input type="radio"/>
<b>40b</b> Expenses from other rental activities (attach statement)	<b>40b</b>	
<b>40c</b> Other net rental income or loss. Subtract line 40b from line 40a	<b>40c</b>	<input type="radio"/>
<b>41</b> Guaranteed payments	<b>41</b>	
<b>42</b> Interest income	<b>42</b>	
<b>43a</b> Ordinary dividends	<b>43a</b>	
<b>43b</b> Qualified dividends	<b>43b</b>	
<b>44</b> Royalties	<b>44</b>	
<b>45</b> Net short-term capital gain or loss (from U.S. Form 1065, Schedule D)	<b>45</b>	<input type="radio"/>





FEDERAL IDENTIFICATION NUMBER

Fill in oval if showing a loss

## Deductions

## Other information

## Analysis of Net Income or Loss

## 55 Analysis by partner type

Corporate	Individual (active)	Individual (passive)	Partnership	Exempt organization	Nominee / other



NAME OF PARTNERSHIP

FEDERAL IDENTIFICATION NUMBER

**Balance sheets per books**

From U.S. Form 1065, Schedule L.

**Assets**

	– Beginning of tax year –		– End of tax year –	
	a.	b.	c.	d.
<b>56</b> Cash .....				
<b>57a</b> Trade notes and accounts receivable .....				
<b>b</b> Less allowance for bad debts .....				
<b>58</b> Inventories .....				
<b>59</b> U.S. government obligations .....				
<b>60</b> Federally tax-exempt securities .....				
<b>61</b> Other current assets (attach statement) .....				
<b>62a</b> Loans to partners (or persons related to partners) .....				
<b>b</b> Mortgage and real estate loans .....				
<b>63</b> Other investments (attach statement) .....				
<b>64a</b> Buildings and other depreciable assets .....				
<b>b</b> Less accumulated depreciation .....				
<b>65a</b> Depletable assets .....				
<b>b</b> Less accumulated depletion .....				
<b>66</b> Land (net of any amortization) .....				
<b>67a</b> Intangible assets (amortizable only) .....				
<b>b</b> Less accumulated amortization .....				
<b>68</b> Other assets (attach statement) .....				
<b>69</b> Total assets .....				

**Liabilities and capital**

	a.	b.	c.	d.
<b>70</b> Accounts payable .....				
<b>71</b> Mortgages, notes, bonds payable in less than one year .....				
<b>72</b> Other current liabilities (attach statement) .....				
<b>73</b> All nonrecourse loans .....				
<b>74a</b> Loans from partners (or persons related to partners) .....				
<b>b</b> Mortgages, notes, bonds payable in one year or more .....				
<b>75</b> Other liabilities (attach statement) .....				
<b>76</b> Partners' capital accounts .....				
<b>77</b> Total liabilities and capital .....				



NAME OF PARTNERSHIP

FEDERAL IDENTIFICATION NUMBER

**Reconciliation of income or loss per books with income or loss per return**

From U.S. Form 1065, Schedule M-1. Note: If filing U.S. Form 1065, Schedule M-3, you still must complete this section.

Fill in oval if showing a loss

<b>78</b> Net income or loss per books .....	<b>78</b>	<input type="radio"/>
<b>79</b> Income included in Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10 and 11, not recorded on books this year (attach statement) .....	<b>79</b>	<input type="text"/>
<b>80</b> Guaranteed payments (other than health insurance) .....	<b>80</b>	<input type="text"/>
<b>81</b> Expenses recorded on books this year not included in Schedule K, lines 1 through 13d and 21 (attach statement) .....	<b>81</b>	<input type="text"/>
<b>a</b> Depreciation .....	<b>81a</b>	<input type="text"/>
<b>b</b> Travel and entertainment .....	<b>81b</b>	<input type="text"/>
<b>82</b> Add lines 78 through 81 (do not include lines 81a and 81b) .....	<b>82</b>	<input type="radio"/>
<b>83</b> Income recorded on books this year not included in Schedule K, lines 1 through 11 (attach statement) .....	<b>83</b>	<input type="text"/>
<b>a</b> Federally tax-exempt interest .....	<b>83a</b>	<input type="text"/>
<b>84</b> Deductions included in Schedule K, lines 1 through 13d and 21, not charged against book income this year (attach statement) .....	<b>84</b>	<input type="text"/>
<b>a</b> Depreciation .....	<b>84a</b>	<input type="text"/>
<b>85</b> Add lines 83 and 84 (do not include lines 83a and 84a) .....	<b>85</b>	<input type="text"/>
<b>86</b> Income or loss. Subtract line 85 from line 82 .....	<b>86</b>	<input type="radio"/>

**Analysis of partners' capital accounts.** From U.S. Form 1065, Schedule M-2.

<b>87</b> Balance as of beginning of year .....	<b>87</b>	<input type="text"/>
<b>88a</b> Capital contributed: cash .....	<b>88a</b>	<input type="text"/>
<b>b</b> Capital contributed: property .....	<b>88b</b>	<input type="text"/>
<b>89</b> Net income or loss per books .....	<b>89</b>	<input type="radio"/>
<b>90</b> Other increases (attach statement) .....	<b>90</b>	<input type="text"/>
<b>91</b> Add lines 87 through 90 .....	<b>91</b>	<input type="radio"/>
<b>92a</b> Distributions: cash .....	<b>92a</b>	<input type="text"/>
<b>b</b> Distributions: property .....	<b>92b</b>	<input type="text"/>
<b>93</b> Other decreases (attach statement) .....	<b>93</b>	<input type="text"/>
<b>94</b> Add lines 92a, 92b and 93 .....	<b>94</b>	<input type="text"/>
<b>95</b> Balance at end of year. Subtract line 94 from line 91 .....	<b>95</b>	<input type="radio"/>