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



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2021 SCHEDULE S, PAGE 1

CORPO	RATION NAME	DERAL IDENTIFICATION NUMBER
Col	adula C. C. Corporation Distributive Income	0001
2 Cl	edule S S Corporation Distributive Income	2021
4	CLASSIFICATION INFORMATION	
1	Gross receipts or sales (from U.S. Form 1120S, line 1c)	
2	Net gain. Not less than "0" (from U.S. Form 1120S, line 4)	
3	Gross income from rental real estate activity (from U.S. Form 8825, line 18a)	3
4	Gross income from other rental activity (from U.S. Form 1120S, Schedule K, line 3a)	4
5	Interest income (from U.S. Form 1120S, Schedule K, line 4).	
6	Dividend income (from U.S. Form 1120S, Schedule K, line 5a)	
7	Royalty income (from U.S. Form 1120S, Schedule K, line 6)	7
8	Net short-term capital gain. Not less than "0" (from U.S. Form 1120S, Schedule K, line 7)	
9	Net long-term capital gain. Not less than "0" (from U.S. Form 1120S, Schedule K, line 89,	
10	Net gain under the provisions of Section 1231. Not less than "0" (from U.S. Form 120S, Sched. K, line 9)	. 10
11	Other income. Not less than "0". See instructions	. 11
12	Add lines 1 through 11	. 12
	S corporations sharing common ownership and engaged in a unitary business with one or more entities, complete All other corporations, skip to line 17.	lines 13 through 16.
13	Receipts from inter-company transactions included in lines1 through 11. See instructions	. 13
14	Total receipts excluding receipts from intercompany transactions. Subtract line 13 from line 12.	. 14
15	Total aggregated receipts of all other related entities. See instructions	. 15
16	Add lines 14 and 15	. 16
17	Enter amount from line 12 or 16, whichever is applicable	. 17
	S CORPORATION INFORMATION	
18	S-election effective date	
19	Accounting method (fill in one) Cash Cash Cash Other	
20	How many Schedules SK-1 are attached to this return? Attach one for each person who was a shareholder at any time during the tax year	20
21	Fill in if any shareholders in this S corporation file as part of a nonresident composite income tax return	▶□
22a	If line 21 is filled in, enter Federal Identification number under which the composite return is filed > 22a	
22b	Number of shareholders included in composite return.	22b
23	Annual Voluntary Election- Pass-through entity has elected to pay tax at the entity level pursuant to MGL ch 63D (thi	s election is irrevocable) 🕨 🥯
	23a Total amount paid	23a



FEDERAL IDENTIFICATION NUMBER

2021 SCHEDULE S, PAGE 2

	S CORPORATION INCOME		▼ If a loss, mark an X in bo	x at left		
24	Ordinary business income or loss (from U.S. Form 1120S, line 21)	. 24				
25	Other income or loss (from U.S. Form 1120S, Schedule K, line 10)	. 25				
26	Foreign, state or local income, franchise, excise or capital stock taxes deducted from U.S. net income		26			
27	Subtotal. Add lines 24 through 26	. 27				
28	Other Massachusetts gains or losses. See instructions	. 28				
29	Subtotal. Subtract line 28 from line 27	. 29				
30	Other adjustments, if any	. 30				
31	Massachusetts ordinary income or loss. Add lines 29 and 30	31				
32	Net income or loss from rental real estate activity (from U.S. Form 1120S, Schedule K, line 2)	. 32				
33	Adjustments (if any) to line 32. Enter the line number and amount from U.S. Form 1120S to which the adjustr		applies. See instruct	ions.		<u>.</u>
	a. Line number Amount Amount Amount			X	S	2
	b. Line number Amount Amount Total adjustments				0	0
34	Adjusted Mass. net income or loss from rental real estate activities. Combine lines 32 and 33 ► 34				0	0
35	Net income or loss from other rental real estate activity (from U.S. Form 1120S, Schedule K, line 3c)	. 35				
36	Adjustments (if any) to line 35. Enter the line number and amount from U.S. Form 1120S to which the adjustr	nent a	applies. See instruct	ions.		
	a. Line number Amount Amount	5				
	b. Line number Amount Amount Total adjustments				0	-
37	Adjusted Mass. net income or loss from other rental real estate activities. Combine lines 35 and 36 37				0	0
38	U.S. portfolio income, excluding capital gains (from U.S. Form 1120S, Schedule K, lines 4, 5a and 6)		. 38			
39	Interest on U.S. obligations included in line 38		. 39			
40	5.0% interest included in line 38. Enclose statement listing sources and amounts		. 40			
41	Other interest and dividend income included in line 38. Enclose statement listing sources and amounts					
42	Non-Massachusetts state and municipal bond interest		. 42			
43	Royalty income included in line 38		. 43			
44	Other income included in line 38		. 44			
45	Total short-term capital gains included in U.S. Form 1120S, Schedule D, line 7		. 45			
46	Total short-term capital losses included in U.S. Form 1120S, Schedule D, line 7	. 46				
47	Gain on the sale, exchange or involuntary conversion of property used in a trade or business and held for one year or less (from U.S. Form 4797).		. 47			
48	Loss on the sale, exchange or involuntary conversion of property used in a trade or business and held for one year or less (from U.S. Form 4797)	. 48				



2021 SCHEDULE S, PAGE 3

CORPO	RATION NAME	FEDERAL IDENTIFICATION NUMBER
	S CORPORATION INCOME (cont'd)	
49	Net long-term capital gain or loss (from U.S. Form 1120S, Schedule D, line 15)	49
50	Net gain or loss under the provisions of Section 1231 (from U.S. Form 1120S, Sched. K, line 9)	50
51	Other long-term gains or losses. See instructions	51
52	Long-term gains on collectibles included in line 49	
53	Differences and adjustments.	53

RESIDENT AND NONRESIDENT RECONCILIATION

S corporations owned by a nonresident shareholder(s) and with income derived from business activities in another state, and which activities provide that state with the power to levy an income tax or a franchise tax, complete Schedule F, Income Apportionment, and then lines 54–57.

following Schedule S lines.	e nonresident shareholder portion of the amount	
a. Line 31		
b. Line 34		
c. Line 37	X V	
d. Line 40	, ⁰ , 1	
e. Line 41		
f. Line 42		
g. Line 43		
h. Line 44	XV	<u><u></u></u>
i. Line 45		54i
j. Line 46	י גר	
Q.0.4		
I. Line 48	0,0	
m. Line 49	6	
	<u>~</u> 5	
o. Line 51		
p. Line 52	0	
	S	



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55	Nonresident taxable income. Multiply the amounts from lines 54a through 54q by the apportionment percentage on Schedule F, line 5.		
	a. Line 54a times apportionment percentage	55a	
	b. Line 54b times apportionment percentage	55ł	
	c. Line 54c times apportionment percentage	550	
	d. Line 54d times apportionment percentage		. 55d
	e. Line 54e times apportionment percentage		. 55e
	f. Line 54f times apportionment percentage		. 55f
	g. Line 54g times apportionment percentage		. 55g
	h. Line 54h times apportionment percentage	0	55h
	i. Line 54i times apportionment percentage		. 55i
	j. Line 54j times apportionment percentage	55j	
	k. Line 54k times apportionment percentage		. 55k
	I. Line 54I times apportionment percentage	551	
	m. Line 54m times apportionment percentage	55m	
	n. Line 54n times apportionment percentage.	55r	
	o. Line 540 times apportionment percentage.	550	
	p. Line 54p times apportionment percentage.	2.5	. 55p
	q. Line 54q times apportionment percentage.	550	
	P'air		
	9.0		
	NO.		
	25		
	Paper Paper And 21 See TIRS 16-9 and 21		
	Se		



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2021 SCHEDULE S, PAGE 5

)RP0	IRATION NAME		FEDERAL IDENTIFICATION NUMBER	2
6	Resident shareholder value. Enter the resident shareholder portion of the amounts from the following Schedule S lines.			
	a. Line 31	56		
	b. Line 34	56	_{Sb}	
	c. Line 37	56	oc	
	d. Line 40		56d	
	e. Line 41		56e	
	f. Line 42		56f	
	g. Line 43	0.	56g	
	h. Line 44			
	i. Line 45		56i	ST.
	j. Line 46	56		
	k. Line 47		56k	
	I. Line 48	56		
	m. Line 49	56m		
	n. Line 50	56		
	o. Line 51	56		
	p. Line 52		56p	
	q . Line 53	56	ad the second seco	
	Paper and			
	Pro allo			
	NO			
	RS			
	q. Line 53			
	5			



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2021 SCHEDULE S, PAGE 6

57	Apportioned Massachusetts total. Add the amounts from lines 55a through 55q to the corresponding amounts from lines 56a through 56q.					
	a. Line 55a plus line 56a.	57a				
	b. Line 55b plus line 56b	57b				
	c. Line 55c plus line 56c					
	d. Line 55d plus line 56d		57d			
	e. Line 55e plus line 56e.		57e			
	f. Line 55f plus line 56f		57f			
	g. Line 55g plus line 56g		57g			
	h. Line 55h plus line 56h		57h			
	i. Line 55i plus line 56i	<u>.</u>	57i			
	j. Line 55j plus line 56j	57j				
	k. Line 55k plus line 56k.		57k		10V	
	I. Line 55I plus line 56I	571				
	m. Line 55m plus line 56m.	57m		KO,		
	n. Line 55n plus line 56n					
	o. Line 550 plus line 560	570	<u>S</u> re			
		2	57p			
	p. Line 55p plus line 56p q. Line 55q plus line 56q	057q				
		•				
	280					
	6.0.					
	Papel Papel And 21. See TIRS 16.9 and 21.					
	25					
	5					



2021 SCHEDULE S, PAGE 7

CORPORATION NAME

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	Raching additional page(s) to include additional taxpayers. NAME OF SHAREHOLDER (last, first)
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