## **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 <a href="https://www.mass.gov/info-details/dor-e-filing-and-payment-requirements">https://www.mass.gov/info-details/dor-e-filing-and-payment-requirements</a> for further information about our electronic filing and payment requirements.



## Schedule U-ST Member's Separate Computation of Tax

2022

Massachusetts

Department of

Revenue

| <u> </u>                                       |  |  |                |          |  |
|--|--|--|----------------|----------|--|
|  | year 2022 or taxable period beginning  | 2022 and ending  |                |          |  |
| Member's name                                  |  | Federal Identification number  | Member's       | PBA code |  |
| <u> </u>                                       |  | <b>•</b>   |                |          |  |
| Principal address                              |  | City/Town  | State          | Zip      |  |
| Tax type:                                      |  | Check if applicable  |                |          |  |
| ☐ Financial institution ☐ Business corporation |  | ☐ Insurance mutual holding company   |                |          |  |
| Check if applicable                            |  | Check if applicable  |                |          |  |
| ☐ Classified ma                                | nufacturer ☐ R&D ☐ RIC ☐ Public REIT   | ☐ Sec. 38 mfg. ☐ Mutual fund service   |                |          |  |
| Name of principa                               | Il reporting corporation   | Federal Identification number  |                |          |  |
| <b>•</b>                                       |  | <b>&gt;</b>  |                |          |  |
| 1 Check if m                                   | nember is incorporated within Massachusetts  |  |                |          |  |
| 2 Check if ta                                  | 2 Check if taxpayer is claiming exemption from the income measure of the excise (e.g., pursuant to P.L. 86-272 or otherwise) |  |                |          |  |
| 3 Check if th                                  | Check if this is a final return  |  |                |          |  |
| 4 Check if m                                   | nember is an S corporation   | <b>&gt;</b> .  |                |          |  |
| 5 Check if a                                   | n S corporation and unitary group's receipts were less than  | \$6 million □  |                |          |  |
|  | n S corporation and unitary group's receipts were \$6 million  | ~~/  |                |          |  |
|  | nember has a fiscal year that is different from the group tax y  |  | _              |          |  |
|  | number of Massachusetts employees  |  | ▶8             |          |  |
|  | number of worldwide employees  |  | ▶ 9            |          |  |
|  | total assets per tax year ending books   |  |                |          |  |
|  |  |  |                |          |  |
|  | Massachusetts apportioned share of combined section 123  | and the second s |                | ~        |  |
|  | tion 1231 gain or loss (from Schedule U-MTI, line 29)  |  |                | 1        |  |
|  | ines 11 and 12. If a loss, enter 0   |  |                | (0)      |  |
|  | section 1231 losses not recaptured from prior years (enter   |  |                |          |  |
|  | ne 14 from line 13. If a loss, enter 0   |  |                |          |  |
|  | Massachusetts apportioned share of combined capital gain   |  |                |          |  |
|  | ital gain or loss (from Schedule U-MTI, line 28)   |  |                |          |  |
|  | section 1231 gains treated as ordinary gains. Enter the sma  |  |                |          |  |
|  | net Massachusetts section 1231 loss. Enter as a negative if  |  | *              |          |  |
|  | Massachusetts apportioned share of combined income other   |  |                |          |  |
|  | other Massachusetts income or loss (from Schedule U-MTI,   |  | ▶ 22           |          |  |
|  | tion income subject to entity level taxation, if included above  |  |                |          |  |
|  | ines 18 through 23   |  |                |          |  |
|  | own NOL deduction from current year income   |  | <b>&gt;</b> 05 |          |  |
|  | ne 25 from line 24   |  |                |          |  |
|  | deduction of shared NOL from current year income   |  |                |          |  |
|  | taxable income or loss. Subtract line 27 from line 26  |  |                |          |  |
|  | tax rate (enter as a decimal). See instructions for rates appli  |  |                |          |  |
|  | easure of excise. Multiply line 28 by line 29. If a loss, enter 0  |  |                |          |  |
|  | tangible property percentage (business corporations only)  |  |                |          |  |
|  |  |  |                |          |  |
|  | taxable Massachusetts tangible property, if applicable   |  |                |          |  |
|  | taxable net worth, if applicable   |  |                |          |  |
|  | f months in member's taxable year  |  |                |          |  |
|  |  |  |                |          |  |
|  | es due including recapture and installment sales   |  | <b>I</b>       |          |  |
|  | s due before credits. See instructions   |  | <b>I</b>       |          |  |
|  | own credits taken (from Schedule U-IC, line 11)  |  |                |          |  |
|  | other corporations applied to excise (from Schedule U-IC, lir  |  |                |          |  |
|  | total credits against excise. Combine lines 38 and 39  |  |                |          |  |
|  | net tax liability. Subtract line 40 from line 37   |  |                |          |  |
|  | ugh entity withholding (from Schedule U-IC, line 13)   |  |                |          |  |
| 43 Member's                                    | refundable credits (from Credit Manager Schedule, sections   | 3 2 and 4)   | 43             |          |  |