## **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.



## Massachusetts Department of Revenue Form 121A Urban Redevelopment Excise Return

2023

Massachusetts General Laws, Chapter 121A, section 10, a	as amended for the	e calendar year 2023.		
Name of taxpayer		·	Federal Identification number	er
Street address				
City/Town	State	Zip	Phone number	
Present location of principle office in Massachusetts				
Name of project	DOR Project	Identification number		
Project address				
City/Town	State	Zip	Phone number	
Fill in if:			O,	
O Amended return (see "Amended Return" in instructions)	O Final return	Amended return	lue to IRS BBA Partnership Aud	t
Fill in if:				
O Initial return O Name change O Address change	9			
1 Fill in if:		0,		SAC C
O Corporation O Individual O Trust O Partners	· · · · · ·	ee instructions)		
2 Date of charter or organization (mm/dd/yyyy)	3 Date of pro	oject approval (mm/dd/yyy	y) <b>4</b> Date of project compl	etion (mm/dd/yyyy)
5 Taxpayer's books are in the care of	Title			401
6 Fill in if the federal government has changed your taxable If filled in, report changes by filing an amended return for			yet been reported to Massachu	setts.
7 Fill in if any governmental unit has made any payments to payments actually made by such tenant.			entity which are in addition to s	uch C
Enter total amount of these governmental payments			7	
			40,	
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Q.o.,			•	
		and		
		9		
	1	<b>5</b>		
	125	o and r		
<b>Declaration</b> Under penalties of perjury, I declare that to the best of my			enclosures are true, correct an	d complete.
Signature of appropriate corporate officer (see instructions)	Phone number			Date
Signature of paid preparer	PTIN/ Employer Iden	tification number	Address	Date



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Federal Identification number Name of taxpayer Computation of excise. Use whole dollar method. **1** Multiply line 1a by .05 (5%)..... 2a Fair cash value of owned and leased real and tangible personal property exempt from local taxation as of January 1, 2024, as certified by assessors..... **3** Total. Add lines 1 and 2..... 4 Assessed valuation of line 2a property for last three years it was subject to local taxation (less abatements). January 1, January 1, 4b January 1, 40 Three-year total. Add lines 4a through 4c..... 5 Three-year average assessed valuation. Divide line 4d by three . . . 6 Enter line 5 or line 2a, whichever is smaller. 7 Minimum excise. Fiscal year 2024 local tax rate (see instructions). . . . . per \$1,000 x line 6 9 Voluntary contribution for endangered wildlife conservation. . 10 Excise due plus voluntary contribution. Add lines 8 and 9 12 Excess payment to be refunded. Subtract line 10 from line 11. 13 Balance due. Subtract line 11 from line 10 See LIRs See Lines **16** Total payment due at time of filing. Add lines 13 through 15 . . . . . . .