

Massachusetts Department of Revenue

2024

Form 3K-1 Partners Wassachusetts Informatio	Tax year beginning Tax year ending
Calendar year filers enter 01–01–2024 and 12–31–2024 below; fiscal year filers enter appropriate date	es MMDDYYYY MMDDYYYY
NAME OF PARTNER	TAXPAYER IDENTIFICATION NUMBER
ADDRESS CITY/TOWN/POST OFFICE	STATE ZIP + 4
NAME OF PARTNERSHIP	FEDERAL IDENTIFICATION NUMBER
ADDRESS CITY/TOWN/POST OFFICE	STATE ZIP + 4
A. Type of partner (fill in one only): Individual resident Individual nonresident S corporation Partnership or other PTE IRA Corporation Ch 62 A1. Fill in if partner is a nonresident of Massachusetts (see instructions)	exempt organization Ch 63 exempt organizationTIN:
Enter entity type of DE partner: Enter status of DE partner.	
B1. Type of partner: General partner or LLC member—manager Limited partner or othe C. Type of form submission: Final Amended return	er member B2. Partner status: Domestic Foreign
D. Fill in if there was a sale, transfer or liquidation of any part of this partnership interest during the tax	
E. Fill in if the partnership participated in one or more installment sales transactions	
following Internal Revenue Code (IRC) provisions (fill in all that apply): $\hfill \square$ IRC \S 453A $\hfill \square$ IRC \S 453A $\hfill \square$	IRC § 453(i)(2)(B)
F. Fill in if partner contributed property with built-in gain (loss) If filled in provide partner's st Beginning \$ Ending \$	
PARTNER'S DISTRIBUTIVE SHARE	▼ IF A LOSS, MARK AN X IN BOX
1 Massachusetts ordinary income or loss (from Form 3, line 20)	1
2 Guaranteed payments to partners (deductible and capitalized; from U.S. Form 1065, Schedule K)	2
3 Separately stated deductions	3
4 Combine lines 1 through 3	
5 a. Taxes due to another jurisdiction (full-year residents and part-year residents only)	
	0.0
b. Total other credits (from "Credit Section")	
6 Credit recapture (see instructions)	
7 Net income or loss from rental real estate activity (from Form 3, line 23)	
8 Net income or loss from other rental activity (from Form 3, line 26)	
9 Interest from U.S. obligations (from Form 3, line 28).	9
10 Interest (5.0%) from Massachusetts banks (from Form 3, line 29)	10
11 Other interest and dividend income (from Form 3, line 30)	11
12 Non-Massachusetts state and municipal bond interest (from Form 3, line 31)	
13 Royalty income (from Form 3, line 32)	



2024 SCHEDULE 3K-1, PAGE 2

NAME	OF PARTNER		TAX	(PAYER IDENTIFICA	ATION NUMBER		
14	Short-term capital gains (from Form 3, line 33)	14	1			0	0
	Short-term capital losses (from Form 3, line 34)	15				0	0
16	Gain on the sale, exchange, or involuntary conversion of property used in a trade or business held for one year or less (from Form 3, line 35)	16	6			0	0
17	Loss on the sale, exchange, or involuntary conversion of property used in a trade or business held for one year or less (from Form 3, line 36)	17				0	0
18	Long-term capital gain or loss (from Form 3, line 37)					0	0
19	Net gain or loss under IRC § 1231 (from Form 3, line 38)	19				0	
20	Long-term gains on collectibles and pre-1996 installment sales (from Form 3, line 39)	20)			0	0
21	Differences and adjustments (from Form 3, line 40)	21				0	0
	UPPER TIER ENTITY/CORPORATE PARTNER INFORMATION						
22	State and municipal bond interest not included in U.S. net income		2			0	U
23	Foreign, state or local income, franchise, excise or capital stock taxes deducted from U.S. net income	23	3			0	0
24	Other adjustments, if any	24				0	0
OF.	RECONCILIATION OF PARTNER'S CAPITAL ACCOUNT					0	N
	Balance at beginning of year					0	
26	Massachusetts net income for year	26					
27	Entire net income for year.	27				0	0
28	Capital contributions	28	3			0	0
29	Withdrawals	29)			0	0
30	Balance at end of year. Add lines 25, 27 and 28 and subtract line 29	30				0	0
	PARTNER'S SHARE OF PROFIT, LOSS AND CAPITAL						
31	Percentage of profit		Ending	31			
32	Percentage of loss		Ending	32			
33	Percentage of capital		Ending	33			
34	Non-recourse liabilities	nding 34	1 _			0	0
35	Qualified non-recourse financingEr	nding 35	5			0	0
36	Recourse liabilities	ndina 36	3			0	0



2024 SCHEDU	ILE 3K-1	, PAG	E 3				
NAME OF PARTNER			'ER IDENTIFI	CATION NUN	/IBER		
PASS-THROUGH ENTITY PAYMENT AND CREDIT INFORMATION							
Declaration election code: Withholding Exempt PTE Insurance company Non-profit Composite Non-profit							
37 Withholding amount.	37					0	0
38 Payments made in a composite filing.	38					0	0
39 Credit for amounts withheld by lower-tier entity							
Payer identification number	39					0	0
40 Payments made with a composite filing by lower-tier entity (informational only)	40					0	0
PARTNER'S SHARE OF CHAPTER 63D REFUNDABLE CREDIT							
Reporting of aggregate entity information: The electing pass-through entity should report its total qualification all resident or nonresident partners having qualified taxable income subject to the MGL ch 63D entity					ount de	rived	
If the partner is a trust, fill in if the trust is a pass-through entity							
41 Total qualified income subject to 5.0% entity-level tax						C	n
a. Total of ordinary income or loss, interest, and dividend income	41a					0	
b. Net gain or loss from the sale of capital assets	41b					0	0
c. Total income subject to 5.0% entity-level tax	41c					0	0
d. 100% of entity-level tax reported and paid by pass-through entity	41d					0	0
e. Partner's refundable credit	41e					0	0



2024 SCHEDULE 3K-1, PAGE 4

NAME OF PARTNER TAXPAYER IDENTIFICATION NUMBER **CREDIT SECTION** Economic Development Incentive Program ... Certificate number Brownfields Credit (see instructions) Certificate number 0 0 Low-Income Housing Credit Certificate number 0 0 Historic Rehabilitation Credit Certificate number 0 0 Film Incentive Credit (see instructions) Certificate number . . . 0 0 Medical Device Credit Certificate number . . . 0 0 Farming and Fisheries Credit..... 0 0 Certified Housing Development Credit..... Certificate number 0 0 0 0 Veterans Hire Credit Certificate number 0 0 Low-Income Housing Donation Credit. Certificate number 0 0 Dairy Credit Certificate number . 0 0 Conservation Credit Certificate number . 0 0 Community Investment Credit Certificate number 0 0 Angel Investor Credit Certificate number . . . 0 0 Apprentice Credit Certificate number . . . 0 0 Vacant Storefront Credit Certificate number 0 0 Cranberry Bog Credit Certificate number . . . 0 0 Offshore Wind Facility Capital Investment Credit. 0 0 Offshore Wind Jobs Credit..... 0 0 National Guard Hiring Credit Certificate number . . . 0 0 Disability Employment Credit..... 0 0 Training Tax Credit Certificate number 0 0 TOTAL OTHER CREDITS. Enter this amount on line 5b.