

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.



Name of corporation

Federal identification number

- 5** Total Massachusetts Post Apportionment NOL available. See instructions **5**
- 6** Total Massachusetts NOL used **6**
- 7** Total NOL shared with other members **7**
- 8** Total remaining NOL not used or shared. Subtract lines 6 and 7 from line 5 **8**
- 9** Total NOL expired (if applicable) **9**
- 10** Total remaining NOL carryover available for future years (subtract line 9 total from line 8 total and enter here) **10**

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