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.



Schedule U-IC Member's Individual Credits

2024
Massachusetts
Department of
Revenue

For calendar year 2024 or taxable period beginning	2024 and ending
Member's name	Federal Identification number
Tax type:	End date of group's tax year
○ Financial institution ○ Business corporation	
Name of principal reporting corporation	Federal Identification number
1 Member's total excise used for determining the credit limitation	(from this member's Schedule U-ST, line 37) 1
Credits Subject to 50% Limitation (See instruc	tions)
 Total of this member's BRWFLD, EDIPCR, EOACC, INVTAX, V Total of other members' BRWFLD, EDIPCR, EOACC, INVTAX, Total BRWFLD, EDIPCR, EOACC, INVTAX, VACSTR and VAN Combine lines 2 and 3	VACSTR and VANPOL credits used by this member 3
Massachusetts Research Credit	
5 Total of this member's section 38M credits used against its owr	n excise
6 Total of section 38M credits of other members used by this mem7 Total of all section 38M credits used by this member. Combine	
Other Credits	
8 Total of this member's other credits being used against its own	excise
9 Total of other credits of other members being used by this men	nber
10 Total of other credits used by this member against excise. Com	bine lines 8 and 9
Summary	
 11 Total of member's own credits being used against excise. Coml 12 Credits from other members used against this corporation's exc 13 Pass-through entity withholding. Payer identification number 	cise Combine lines 3, 6 and 9 12
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