

# 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.



Schedule SK-1 Shareholder's Massachusetts Information. Complete one Schedule SK-1 for each shareholder. 2025

NAME OF SHAREHOLDER

TAXPAYER IDENTIFICATION NUMBER

ADDRESS

CITY/TOWN/POST OFFICE

STATE

ZIP+4

NAME OF S CORPORATION

FEDERAL IDENTIFICATION NUMBER (FID)

ADDRESS

CITY/TOWN/POST OFFICE

STATE

ZIP+4

A. Type of shareholder (fill in **one** only): ☐ Individual resident ☐ Individual nonresident ☐ Resident trust or estate  
☐ Nonresident trust or estate ☐ Bank ☐ Ch 62 Exempt Organization ☐ Ch 63 Exempt Organization

A1. Fill in if the shareholder is a nonresident of Massachusetts (see instructions). ☐

A2. If shareholder is a Disregarded Entity (DE)(see instructions), enter DE shareholder's name: \_\_\_\_\_ TIN: \_\_\_\_\_  
Enter entity type of DE shareholder: \_\_\_\_\_

B. Fill in if ☐ Final ☐ Amended

C. Fill in if there was a sale, transfer or liquidation of any part of this shareholder interest during the tax year. ☐

D. Fill in if the S Corporation participated in one or more installment sales transactions. ☐  
If filled in, indicate whether information has been communicated to the shareholder to calculate an addition to Massachusetts tax under MGL ch 62C, § 32A based on the following Internal Revenue Code (IRC) provisions (fill in all that apply): ☐ IRC § 453A ☐ IRC § 453(l)(2)(B)

SHAREHOLDER'S DISTRIBUTIVE SHARE		▼ If a loss, mark an X in box at left
1	Massachusetts ordinary income or loss (from Schedule S, line 31)	1
2	Separately stated deductions	2
3	Add lines 1 and 2	3
4	a. Taxes due to another jurisdiction (full-year residents and part-year residents only)	4a
	b. Total other credits (from "Credit Section")	4b
5	Adjusted Massachusetts net income or loss from rental real estate activity(ies) (from Schedule S, line 34)	5
6	Adjusted Massachusetts net income or loss from other rental real estate activity(ies) (from Schedule S, line 37)	6
7	Interest from U.S. obligations (from Schedule S, line 39)	7
8	Interest (5.0%) from Massachusetts banks (from Schedule S, line 40)	8
9	Other interest and dividend income (from Schedule S, line 41)	9
10	Non-Massachusetts state and municipal bond interest (from Schedule S, line 42)	10
11	Royalty income (from Schedule S, line 43)	11
12	Other income (from Schedule S, line 44)	12
13	Short-term capital gains (from Schedule S, line 45)	13
14	Short-term capital losses (from Schedule S, line 46)	14
15	Gain on the sale, exchange or involuntary conversion of property used in a trade or business held for one year or less (from Schedule S, line 47)	15



TAXPAYER IDENTIFICATION NUMBER

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2025 SCHEDULE SK-1,  
PAGE 2**SHAREHOLDER'S DISTRIBUTIVE SHARE** (cont'd)

- 16** Loss on the sale, exchange or involuntary conversion of property used in a trade or business held for one year or less (from Schedule S, line 48) ..... 16 ☒

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- 17** Net long-term capital gain or loss (from Schedule S, line 49) ..... 17 ☒

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- 18** Net gain or loss under Schedule 1231 (from Schedule S, line 50) ..... 18 ☒

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- 19** Other long-term gains and losses (from Schedule S, line 51) ..... 19 ☒

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- 20** Long-term gains on collectibles (from Schedule S, line 52) ..... 20 

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- 21** Differences and adjustments (from Schedule S, line 53) ..... 21 ☒

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- 22** Property distributions made to shareholder (from U.S. Form 1120S, Schedule K-1, line 16d) ..... 22 ☒

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**SHAREHOLDER'S BASIS INFORMATION**

- 23** a. Enter date of federal basis (12-31-1985 or later) ..... 23a 

M	M	D	D	Y	Y	Y	Y
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- b. Number of shares owned ..... 23b 

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- c. Shareholder's percentage of stock ownership ..... 23c 

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- d. Dollar value of basis as of the date in line 23a ..... 23d 

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- 24** Massachusetts basis at beginning of tax year
- a. Stock ..... 24a ☒

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- b. Indebtedness ..... 24b ☒

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- 25** Net Massachusetts adjustments
- a. Stock ..... 25a ☒

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- b. Indebtedness ..... 25b ☒

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- 26** Net federal adjustments
- a. Stock ..... 26a ☒

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- b. Indebtedness ..... 26b ☒

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- 27** Massachusetts basis at end of tax year
- a. Stock (add lines 24a and 25a) ..... 27a ☒

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- b. Indebtedness (add lines 24b and 25b) ..... 27b ☒

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See TIRS 16-9 and 21-9 for more information.



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2025 SCHEDULE SK-1,  
PAGE 3**PASS-THROUGH ENTITY PAYMENT AND CREDIT INFORMATION**Declaration election code: ☐ Withholding ☐ Composite ☐ Member self-file ☐ Exempt PTE ☐ Non-profit

- 28** Withholding amount ..... 28 

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- 29** Estimated payments ..... 29 

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- 30** Credit for amounts withheld by lower-tier entity(ies)
- Payer Identification number 

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 ..... 30 

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- 31** Credit for amounts of estimated payments made by lower-tier entity(ies)
- Payer Identification number 

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 ..... 31 

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**SHAREHOLDER'S SHARE OF CHAPTER 63D REFUNDABLE CREDIT**

**Reporting of aggregate entity information:** The electing pass-through entity should report its total qualified income as an aggregate amount derived from all resident or nonresident shareholders having qualified taxable income subject to the MGL ch 63D entity-level tax. See instructions.

If the shareholder is a trust, fill in if the trust is a pass-through entity ☐

- 32 Total qualified income subject to 5.0% entity-level tax**
- a.** Total of ordinary income or loss, interest, and dividend income ..... 32a 

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- b.** Net gain or loss from the sale of capital assets ..... 32b 

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- c.** Total income subject to 5.0% entity-level tax ..... 32c 

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- d.** 100% of entity-level tax reported and paid by pass-through entity ..... 32d 

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- e.** Shareholder's refundable credit ..... 32e 

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NAME OF SHAREHOLDER

TAXPAYER IDENTIFICATION NUMBER

## CREDIT SECTION

Lead Paint credit

## Economic Opportunity Area

Economic Development Incentive Program . . . Certificate number . . . . .  
(credits prior to November 20, 2024)

Economic Development Incentive Program . . . Certificate number . . . . .  
(credits authorized on or after November 20, 2024)

Brownfields credit (see instructions) . . . . . Certificate number . . . . .

Low-Income Housing credit . . . . . Certificate number . . . . .

Historic Rehabilitation credit ..... Certificate number .....

Film Incentive credit (see instructions). . . . . Certificate number . . . . .

Medical Device credit.....Certificate number .....

## Ch 63D Refundable credit

Certified Housing Development credit ..... Certificate number .....

Life Sciences credit

Veterans Hire credit ..... Certificate number

Low-Income Housing Donation credit . . . . . Certificate number

Dairy credit ..... Certificate number

Conservation credit ..... Certificate number

Community Investment credit. . . . . Certificate number

Angel Investor credit ..... Certificate number

Apprentice credit ..... Certificate number

Vacant Storefront credit ..... Certificate number

Cranberry Bog credit ..... Certificate number

Offshore Wind Facility Capital Investment

## Offshore Wind Jobs

National Guard Hiring ..... Certificate number

## Disability Employment

E-File Only:		Paper Returns will not be accepted.		See TIRS 16-9 and 21-9 for more information	
.....	Certificate number				
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ons).....	Certificate number				
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.....	Certificate number				

NAME OF SHAREHOLDER

TAXPAYER IDENTIFICATION NUMBER

### CREDIT SECTION (continued)

Training Tax credit ..... Certificate number .....

Live Theater credit ..... Certificate number .....

Climatetech Tax Incentive credit.

Massachusetts Homeownership credit . . . . . Certificate number . . . . .

Commercial Conversion credit.....Certificate number .....

**TOTAL OTHER CREDITS.** Enter this amount on line 4b.

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