2014

Massachusetts Department of Revenue

Form 63 FI
Financial Institution Excise Return

For calendar year 2014 or taxable period beginning **2014 and ending**

Name of corporation ►	Federal Identification number ►	State or country of incorporation	
Principal address	City/Town	State	Zip
Principal Massachusetts address	City/Town	State	Zip

Federal business code ►	Name of treasurer	Date of incorporation or charter ►	First date of business in Massachusetts ►
Name of common parent corporation	FID number of parent corporation ►	Most recent year audited by IRS ►	Have the adjustments been reported to Mass.? ☐ Yes ☐ No

U.S. return filed:
► ☐ 1120 ☐ 1120-REIT ☐ 1120S ☐ Other:

Is the corporation participating in the filing of a U.S. consolidated return?
► ☐ Yes ☐ No

Is the taxpayer an S corporation?
► ☐ Yes ☐ No

Is the corporation participating in the filing of a Massachusetts unitary return?
► ☐ Yes ☐ No

Corporation (check one only):
► ☐ New ☐ Terminated ☐ Has predecessor ☐ Has successor

Alternate apportionment requested?
► ☐ Yes ☐ No

Is this return being filed by FDIC?
► ☐ Yes ☐ No

If predecessor or successor: Name of corporation	Federal Identification number ►	State or country of incorporation	
Principal address	City/Town	State	Zip

Excise Tax Calculation. See instructions if part of a Massachusetts unitary group.

Use whole dollar method

1	Income taxable in Massachusetts (from Schedule A, line 18) ► 1	
2	Financial institutions that are not S corporations, multiply line 1 by 9% (.09). S corporations, see instructions ► 2	
3	S corporations, enter total receipts (from Schedule S, line 17) ► 3	
4	If taxpayer is an S corporation and line 3 is $6 million or more but less than $9 million, multiply line 1 by 2.53% (.0253) ► 4	
5	If taxpayer is an S corporation and line 3 is $9 million or more, multiply line 1 by 3.8% (.038) ► 5	
6	Credit recapture (enclose Schedule H-2) and/or additional tax on installment sales. See instructions ► 6	
7	Excise due before credits. Add line 2, 4 or 5, whichever applies, to line 6 ► 7	
8	Economic Opportunity Area Credit (enclose Schedule EOAC) ► 8	
9	Economic Development Incentive Program Credit. Certificate number ► _____ ► 9	
10	Low-Income Housing Credit. Building Identification number ► _____ ► 10	
11	Historic Rehabilitation Credit. Certificate number ► _____ ► 11	
12	Film Incentive Credit. Certificate number ► _____ ► 12	
13	Medical Device Credit. Certificate number ► _____ ► 13	
14	Brownfields Credit. Certificate number ► _____ ► 14	
15	Employer Wellness Credit. Certificate number ► _____ ► 15	
16	Certified Housing Development Credit. Certificate number ► _____ ► 16	
17	Life Science Company Credit ► 17	
18	Total credits. Add lines 8 through 17. ► 18	
19	Excise after credits. Subtract line 18 from line 7 19	
20	Minimum excise (cannot be prorated; unitary filers, see instructions) ► 20	
21	Excise due before voluntary contribution (line 19 or line 20, whichever is greater) ► 21	
22	Voluntary contribution for endangered wildlife conservation ► 22	
23	Excise due plus voluntary contribution. Add lines 21 and 22. ► 23	

Under penalties of perjury, I declare that to the best of my knowledge and belief, this return and enclosures are true, correct and complete.

Signature of appropriate officer	Date	Social Security number	Telephone number
Signature of paid preparer	Date	Employer ID number	Address

The Privacy Act Notice is available upon request. If you are signing as an authorized delegate of the appropriate officer, check here ☐ and enclose Massachusetts Form M-2848, Power of Attorney. Mail to: **Massachusetts Department of Revenue, PO Box 7052, Boston, MA 02204.**

Refund or Tax Due

24	2013 overpayment applied to 2014 estimated tax ▸ **24**	
25	2014 estimated tax payments (do not include amount in line 24) ▸ **25**	
26	Payments made with extension ▸ **26**	
27	Pass-through entity withholding. Payer Identification number ▸ _____ ▸ **27**	
28	Refundable Film Credit ▸ **28**	
29	Refundable Dairy Credit. Certificate number ▸ _____ ▸ **29**	
30	Refundable Life Science Credit ▸ **30**	
31	Refundable Economic Development Incentive Program Credit. ▸ **31**	
32	Refundable Conservation Land Credit. Certificate number ▸ _____ ▸ **32**	
33	Refundable Community Investment Credit. Certificate number ▸ _____ ▸ **33**	
34	Total tax payments. Add lines 24 through 33. **34**	
35	Amount overpaid. If line 23 is smaller than line 34, subtract line 23 from line 34 **35**	
36	Amount overpaid to be credited to 2015 estimated tax ▸ **36**	
37	Amount overpaid to be refunded. Subtract line 36 from line 35 ▸ **37**	
38	Balance due. If line 34 is smaller than line 23, subtract line 34 from line 23 **38**	
39	M-2220 penalty ▸ **39**	
40	Late file/pay penalties ▸ **40**	
41	Total penalties. Add lines 39 and 40 **41**	
42	Interest on unpaid balance ▸ **42**	
43	Total payment due at time of filing. Add lines 38, 41 and 42. Make remittance payable to: **Commonwealth of Massachusetts** ▸ **43**	

Disclosure Schedule

1	Enter the amount claimed as a deduction for contributions to bad debt reserve from the corporation's federal return for the taxable year ▸ **1**	
2	Enter the amount of bad debts that actually went bad during the taxable year ▸ **2**	
3	Enter the amount of capital loss claimed federally that was treated as an ordinary loss, per IRC sec. 582(c). ▸ **3**	
4	Enter the total amount of capital gains claimed on U.S. Form 1120 or 1120S. ▸ **4**	
5	Enter the amount of total income as reported on U.S. Form 1120, line 11 or 1120S, line 6 ▸ **5**	

Schedule A. Taxable Income

1	Gross receipts or sales (from U.S. Form 1120, line 1c) ▸ **1**	
2	Net income (from U.S. Form 1120, line 28) ▸ **2**	
3	State and municipal bond interest not included in federal net income (total from Schedule B, col. d). ▸ **3**	
4	Foreign, state or local income, franchise, excise or capital stock taxes deducted from federal net income ▸ **4**	
5	Portion of net capital loss carryover used to reduce capital gain on U.S. Schedule D ▸ **5**	
6	Section 168(k) "bonus" depreciation adjustment ▸ **6**	
7	Other income not included in line 2. ▸ **7**	
8	Section 31I and 31J intangible and interest expense add back. ▸ **8**	
9	Federal production activity add back. ▸ **9**	
10	Other adjustments (enclose schedule) ▸ **10**	
11	Adjusted income. Add lines 2 through 10. If a loss, enter "0" **11**	
12	Abandoned Building Renovation deduction. Total cost $ × .10 = ▸ **12**	
13	Dividends deduction (from Schedule D, line 5) ▸ **13**	
14	Exception(s) to the add back of interest and/or intangible expenses (enclose schedule) ▸ **14**	
15	Total deductions. Add lines 12 through 14 **15**	
16	Income subject to apportionment. Subtract line 15 from line 11. If loss, enter "0" ▸ **16**	
17	Income apportionment percentage (from Schedule E, line 5 or 100%, whichever applies) ▸ **17**	
18	Income taxable in Massachusetts. Multiply line 16 by line 17. If a loss, enter "0." Enter result here and in line 1 of return ▸ **18**	

Schedule B. Wholly Tax-Exempt Interest

a. Security	b. Rate	c. Maturity	d. Interest received	e. Amortization	f. Net interest
Enter col. d total on Schedule A, line 3					

Schedule C. Business Locations Outside Massachusetts

Complete this schedule only if the corporation has income from business activities which is taxable both in Massachusetts and in any other states.

Location (city and state)	Business activity conducted at location	Number of locations	Registered to do business in state?	Files returns in state?

Schedule D. Dividends Deduction

Beginning January 1, 1999, 95% of dividends received from or on account of the ownership of any class of stock, if the financial institution owns 15% or more of the voting stock of the institution paying the dividend, will be allowed as a deduction to net income. Enclose schedule showing payers, amounts and percent of voting stock owned by class of stock.

1	Total dividends (from U.S. Form 1120, Schedule C, line 19)	**1**
2	Dividends, if less than 15% of voting stock owned	
	a. On common stock	**2a**
	b. On preferred stock	**2b**
3	Total taxable dividends. Add lines 2a and 2b	**3**
4	Dividends eligible for the deduction. Subtract line 3 from line 1	**4**
5	Dividends deduction. Multiply line 4 by .95. Enter here and in Schedule A, line 12	**5**

Schedule E. Income Apportionment

Apportionment Factors

		Massachusetts	Worldwide	Percentage
1	**Receipts**			
a.	Receipts from lease, sublease or rental of real property **1a**	►		
b.	Receipts from lease, sublease or rental of tangible property (other than transportation property) **1b**	►		
c.	Receipts from lease, sublease or rental of transportation property **1c**	►		
d.	Interest (including fees and penalties) received on loans secured by real property **1d**	►		
e.	Interest (including fees and penalties) received on loans not secured by real property **1e**	►		
f.	Net gain on sale of loans secured by real property **1f**	►		
g.	Net gain on sale of loans not secured by real property **1g**	►		
h.	Interest (including fees & penalties) on credit card receivables **1h**	►	►	
i.	Net gains on sales of credit card receivables (but not less than "0") **1i**	►	►	
J.	Credit card issuer's reimbursement fees **1j**	►	►	
k.	Receipts from merchant discount **1k**	►		
l.	Loan servicing fees from loans secured by real property **1l**	►		
m.	Loan servicing fees from loans not secured by real property **1m**	►		
n.	Receipts from performance of other services **1n**	►		
o.	Interest, dividends and net gains (but not less than "0") from investment and/or trading assets and activities **1o**	►		
	Method used for this item: ► ☐ average value method ☐ gross income method			
p.	Any other "receipts" included in factor but not listed above **1p**	►		
	Describe _____			
q.	**Totals.** Add lines 1a through 1p for each column **1q**		►	
r.	Receipts apportionment percentage. Divide total of col. A by total of col. B **1r**			►
2	**Property**			
a.	Average value of real property rented from another (capitalized at eight times gross rents during taxable year) **2a**	►		
b.	Average value of tangible property (other than transportation property) (capitalized at eight times gross rents during taxable year) **2b**	►		
c.	Average value of transportation property (capitalized at eight times gross rents during taxable year) **2c**	►		
d.	Has alternative valuation method been used for rented property? ► ☐ Yes ☐ No **Note:** Prior written approval from the Commissioner is required for use of an alternative method.			
e.	Average value of real property owned (including capital leases) **2e**	►		
f.	Tangible property (other than transportation property) **2f**	►		
g.	Transportation property **2g**	►		
h.	Average value of loans (see statute) **2h**	►		
i.	Average value of credit card receivables (see statute) **2i**	►	►	
j.	Number of times per year averaging used for determining value of all property owned **2j**			►
k.	**Totals.** Add lines 2a through 2i for each column **2k**		►	
l.	Property apportionment percentage. Divide total of col. A by total of col. B **2l**			►
3	**Payroll**			
a.	**Total** **3a**	►	►	
b.	Payroll apportionment percentage. Divide total of col. A by total of col. B. **3b**			►
4	**Apportionment percentage.** Add total of col. C, lines 1r, 2l and 3b **4**			►
5	**Massachusetts apportionment percentage.** Divide line 4 by 3. Enter here and in Schedule A, line 16 **5**			►

An exact copy of all pages of U.S. Form 1120, 1120S, 1120-REIT or other federal return along with any supporting schedules and/or forms substantiating the Massachusetts excise must be enclosed with this return. If filing U.S. Form 1120S, complete and enclose a pro forma U.S. Form 1120. Any changes or amendments to any U.S. amount must be explained in detail. Any return filed without the copy of such U.S. information enclosed is an incomplete return and is subject to assessment penalties.