



Be sure to complete and enclose pages 1-5 of Schedule D-IS.

FIRST NAME \_\_\_\_\_ M.I. \_\_\_\_\_ LAST NAME \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_

**Note:** Complete Schedule D-IS, Installment Sales, if you are reporting any capital gains on installment sales occurring between January 1, 1996 through December 31, 2002. If you are required to file Schedule D-IS, you must include any capital gains or losses otherwise reportable on Schedule D. Also, be sure to enclose U.S. Form 6252, Installment Sale Income, for each installment sale.

**Schedule D-IS Long-Term Capital Gains and Losses Excluding Collectibles 2013**

Type of return filed. Fill in applicable oval:  Form 1  Form 1-NR/PY  Form 2  Form 3M

**Part 1. Long-Term Capital Gains and Losses, Excluding Collectibles**

For lines 1 through 6, 8 and 10, enter the amounts from the sale, exchange or involuntary conversion of Massachusetts capital assets.

▼ If showing a loss, mark an X in box at left

<b>1</b>	Enter amounts included in U.S. Sch. D, lines 8a and 8b, col. h . . . . .	1	<input checked="" type="checkbox"/>																	
<b>2</b>	Enter amounts included in U.S. Sch. D, line 9, col. h . . . . .	2	<input checked="" type="checkbox"/>																	
<b>3</b>	Enter amounts included in U.S. Sch. D, line 10, col. h . . . . .	3	<input checked="" type="checkbox"/>																	
<b>4</b>	Enter amounts included in U.S. Sch. D, line 11, col. h . . . . .	4	<input checked="" type="checkbox"/>																	
<b>5</b>	Enter amounts included in U.S. Sch. D, line 12, col. h . . . . .	5	<input checked="" type="checkbox"/>																	
<b>6</b>	Enter amounts included in U.S. Sch. D, line 13, col. h. If U.S. Schedule D not filed, enter the amount from U.S. Form 1040, line 13 or U.S. Form 1040A, line 10. . . . .	6																		
<b>7</b>	Massachusetts long-term capital gains and losses included in U.S. Form 4797, Part II (not included in lines 1 through 6). See instructions. . . . .	7	<input checked="" type="checkbox"/>																	
<b>8</b>	Carryover losses from prior years . . . . .	8	<input checked="" type="checkbox"/>																	
<b>9</b>	Combine lines 1 through 8. . . . .	9	<input checked="" type="checkbox"/>																	
<b>10</b>	Differences, if any. <b>See instructions</b> . . . . .	10	<input checked="" type="checkbox"/>																	
<b>11</b>	Adjusted capital gains and losses. <b>See instructions</b> . . . . .	11	<input checked="" type="checkbox"/>																	
<b>12</b>	Long-term gains on collectibles and pre-1996 installment sales. See instructions. Also enter amount in Schedule B, Part 2, line 11 . . . . .	12																		
<b>13</b>	Long-term capital gain on installment sales from January 1, 1996 through December 31, 2002. <b>See instructions</b> . . . . .	13																		
<b>14</b>	Subtotal. Subtract the total of lines 12 and 13 from line 11. <b>See instructions</b> . . . . .	14	<input checked="" type="checkbox"/>																	
<b>15</b>	Long-term capital losses applied against long-term capital gains. <b>See instructions</b> . . . . .	15																		
<b>16</b>	Subtotal. Combine line 14 and line 15. <b>See instructions</b> . . . . .	16	<input checked="" type="checkbox"/>																	
<b>17</b>	Capital losses applied against capital gains. <b>See instructions</b> . . . . .	17																		
<b>18</b>	Subtotal. If line 16 is greater than "0," subtract line 17 from line 16. If line 16 is less than "0," combine lines 16 and 17. If line 18 is a loss, see instructions . . . . .	18	<input checked="" type="checkbox"/>																	
<b>19</b>	Long-term capital losses applied against interest and dividends. <b>See instructions</b> . . . . .	19																		
<b>20</b>	Subtotal. Combine line 18 and line 19. See instructions . . . . .	20	<input checked="" type="checkbox"/>																	
<b>21</b>	Allowable deductions from your trade or business (from Schedule C-2). <b>See instructions</b> . . . . .	21																		
<b>22</b>	Subtotal. Subtract line 21 from line 20. Not less than "0" . . . . .	22																		
<b>23</b>	Excess exemptions (only if single, head of household or married filing jointly). <b>See instructions</b> . . . . .	23																		
<b>24</b>	Taxable long-term capital gains. Subtract line 23 from line 22. Not less than "0." Enter result here and on Schedule D-IS, Part 3, line 24, col. 1. <b>See instructions</b> . . . . .	24																		



SOCIAL SECURITY NUMBER

Grid for Social Security Number

Part 2. Long-Term Capital Gains and Losses On Installment Sales from January 1, 1996 Through December 31, 2002

For lines 1 and 2, enter in the appropriate column amounts from the sale, of long-term installment sales from January 1, 1996 through December 31, 2002.

A. Held more than one year but not more than two years

B. Held more than two years but not more than three years

Main table with 9 rows and 3 columns for data entry. Includes instructions for losses and a grid for line 8.

BE SURE TO COMPLETE SCHEDULE D-IS, PAGES 3, 4 AND 5.



FIRST NAME  M.I.  LAST NAME  SOCIAL SECURITY NUMBER

### Part 2. Long-Term Capital Gains and Losses On Installment Sales from January 1, 1996 Through December 31, 2002

For lines 1 and 2, enter in the appropriate column amounts from the sale, of long-term installment sales from January 1, 1996 through December 31, 2002.

#### C. Held more than three years but not more than four years

#### D. Held more than four years but not more than five years

<b>1</b>	Long-term gain on installment sale from January 1, 1996 through December 31, 2002 from line 13 . . . . . 1	<input type="text"/>	<input type="text"/>
<b>2</b>	Long-term capital losses applied against long-term installment sales. <b>See instructions</b> . . . . . 2	<input checked="" type="checkbox"/> <input type="text"/>	<input checked="" type="checkbox"/> <input type="text"/>
<b>3</b>	Subtotal. Combine line 1 and line 2. <b>See instructions</b> . . . . . 3	<input type="text"/>	<input type="text"/>
<b>4</b>	Short-term capital losses applied against long-term installment sales. <b>See instructions</b> . . . . . 4	<input type="text"/>	<input type="text"/>
<b>5</b>	Subtotal. subtract line 4 from line 3. . . . . 5	<input type="text"/>	<input type="text"/>
<b>6</b>	Allowable deductions from your trade or business (from Schedule C-2). <b>See instructions</b> . . . . . 6	<input type="text"/>	<input type="text"/>
<b>7</b>	Subtotal. Subtract line 6 from line 5. Not less than "0" . . . 7	<input type="text"/>	<input type="text"/>
<b>8</b>	Excess exemptions only if single, head of household or married filing jointly. <b>See instructions</b> . . . . . 8	<input type="text"/>	<input type="text"/>
<b>9</b>	Taxable long-term capital gains. Subtract line 8 from line 7. Not less than "0." Enter result here and on Schedule D-IS, Part 3, line 24, col. 1. <b>See instructions</b> . . . . . 9	<input type="text"/>	<input type="text"/>

**BE SURE TO COMPLETE SCHEDULE D-IS, PAGES 4 (ON OTHER SIDE) AND 5.**



SOCIAL SECURITY NUMBER

Grid for Social Security Number

Part 2. Long-Term Capital Gains and Losses On Installment Sales from January 1, 1996 Through December 31, 2002

For lines 1 and 2, enter in the appropriate column amounts from the sale, of long-term installment sales from January 1, 1996 through December 31, 2002.

E. Held more than five years but not more than six years

F. Held more than six years

Main table with 9 rows and 2 columns of input boxes for capital gains and losses.

BE SURE TO COMPLETE SCHEDULE D-IS, PAGE 5.



FIRST NAME  M.I.  LAST NAME

SOCIAL SECURITY NUMBER

### Part 3. Tax on Long-Term Capital Gains

**24**

Enter in col. 1 the amount from Schedule D-IS, Part 1, line 24. Multiply by .0525. Enter result in col. 2.

**Note:** If choosing the optional 5.85% tax rate, multiply line 24 by .0585

**A.** Enter in col. 1 the amount from Schedule D-IS, Part 2, line 9, col. A. Multiply by .05. Enter result in col. 2.

**B.** Enter in col. 1 the amount from Schedule D-IS, Part 2, line 9, col. B. Multiply by .04. Enter result in col. 2.

**C.** Enter in col. 1 the amount from Schedule D-IS, Part 2, line 9, col. C. Multiply by .03. Enter result in col. 2.

**D.** Enter in col. 1 the amount from Schedule D-IS, Part 2, line 9, col. D. Multiply by .02. Enter result in col. 2.

**E.** Enter in col. 1 the amount from Schedule D-IS, Part 2, line 9, col. E. Multiply by .01. Enter result in col. 2.

**F.** Enter in col. 1 the amount from Schedule D-IS, Part 2, line 9, col. F.

col. 1

col. 2

× .0525

× .05

× .04

× .03

× .02

× .01

**25**

Total tax on long-term capital gains. Add lines 24, 24A, 24B, 24C, 24D and 24E of col. 2. Enter result here and on Form 1, line 24; Form 1-NR/PY, line 28; or Form 3M, line 7. Form 2 filers, see instructions

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Available losses for carryover. Enter the amount from Schedule D-IS, Part 1, line 20, only if it is a loss