



PRINT IN BLACK INK

FOR PRIVACY ACT NOTICE, SEE INSTRUCTIONS.

Calendar year filers enter 01-01-2016 and 12-31-2016 below. Fiscal year filers enter appropriate dates. Complete one Schedule 3K-1 for each partner.

Tax year beginning > [M][M][D][D][Y][Y][Y][Y] Tax year ending > [M][M][D][D][Y][Y][Y][Y]

Schedule 3K-1 Partner's Massachusetts Information 2016

NAME OF PARTNER _____ TAXPAYER IDENTIFICATION NUMBER _____

ADDRESS _____ CITY/TOWN/POST OFFICE _____ STATE _____ ZIP + 4 _____

NAME OF PARTNERSHIP _____ FEDERAL IDENTIFICATION NUMBER (FID) _____

ADDRESS _____ CITY/TOWN/POST OFFICE _____ STATE _____ ZIP + 4 _____

- A. Type of entity (fill in **one** only):** Individual resident Individual nonresident Trust or estate S corporation
 Partnership or other PTE IRA Disregarded entity Exempt organization Corporation
- B. Type of partner:** Limited General
- C. Type of form submission:** Final Amended return
- D. Fill in if there was a sale, transfer or liquidation of any part of this partnership interest during the tax year**
- E. Fill in if the partnership participated in one or more installment sales transactions**
- If Yes, indicate whether information has been communicated to the partner to calculate an addition to Massachusetts tax under M.G.L., ch. 62C, sec. 32A based on the following Internal Revenue Code (IRC) provisions (fill in all that apply): IRC 453A IRC 453(l)(2)(B)

| PARTNER'S DISTRIBUTIVE SHARE | | ▼ If showing a loss, mark an X in box at left | |
|------------------------------|--|---|----|
| 1 | Massachusetts ordinary income or loss (from Form 3, line 20) 1 | <input checked="" type="checkbox"/> | 00 |
| 2 | Guaranteed payments to partners (deductible and capitalized) (from U.S. Form 1065, Schedule K) . . . 2 | | 00 |
| 3 | Separately stated deductions 3 | | 00 |
| 4 | Combine lines 1 through 3. 4 | <input checked="" type="checkbox"/> | 00 |
| 5 | Credits available: | | 00 |
| | a. Taxes due to another jurisdiction (full-year residents and part-year residents only) 5a | | 00 |
| | b. Lead Paint credit 5b | | 00 |
| | c. <input type="checkbox"/> Economic Opportunity Area <input type="checkbox"/> Economic Development Incentive Program 5c | | 00 |
| | d. Brownfields credit 5d | | 00 |
| | e. Low-Income Housing credit. 5e | | 00 |
| | f. Historic Rehabilitation credit. 5f | | 00 |
| | g. Film Incentive credit. 5g | | 00 |
| | h. Medical Device credit. 5h | | 00 |
| | i. Employer Wellness Program credit. 5i | | 00 |
| | j. Farming and Fisheries credit. 5j | | 00 |
| | k. Certified Housing Development credit 5k | | 00 |
| | l. Life Sciences credit 5l | | 00 |

BE SURE TO CONTINUE SCHEDULE 3K-1 ON OTHER SIDE



TAXPAYER IDENTIFICATION NUMBER

Empty boxes for Taxpayer Identification Number

| | | | | |
|--|----|-------------------------------------|---|---|
| m. Refundable Film credit | 5m | | 0 | 0 |
| n. Refundable Dairy credit | 5n | | 0 | 0 |
| o. Refundable Conservation credit | 5o | | 0 | 0 |
| p. Refundable Community Investment credit | 5p | | 0 | 0 |
| q. Total credits | 5q | | 0 | 0 |
| 6 Net income or loss from rental real estate activity(ies) (from Form 3, line 23) | 6 | <input checked="" type="checkbox"/> | 0 | 0 |
| 7 Net income or loss from other rental activity(ies) (from Form 3, line 26) | 7 | <input checked="" type="checkbox"/> | 0 | 0 |
| 8 Interest from U.S. obligations (from Form 3, line 28) | 8 | | 0 | 0 |
| 9 Interest (5.15%) from Massachusetts banks (from Form 3, line 29) | 9 | | 0 | 0 |
| 10 Other interest and dividend income (from Form 3, line 30) | 10 | | 0 | 0 |
| 11 Non-Massachusetts state and municipal bond interest (from Form 3, line 31) | 11 | | 0 | 0 |
| 12 Royalty income (from Form 3, line 32) | 12 | | 0 | 0 |
| 13 Short-term capital gains (from Form 3, line 33) | 13 | | 0 | 0 |
| 14 Short-term capital losses (from Form 3, line 34) | 14 | <input checked="" type="checkbox"/> | 0 | 0 |
| 15 Gain on the sale, exchange, or involuntary conversion of property used in a trade or business held for one year or less (from Form 3, line 35) | 15 | | 0 | 0 |
| 16 Loss on the sale, exchange, or involuntary conversion of property used in a trade or business held for one year or less (from Form 3, line 36) | 16 | <input checked="" type="checkbox"/> | 0 | 0 |
| 17 Long-term capital gain or loss (from Form 3, line 37) | 17 | <input checked="" type="checkbox"/> | 0 | 0 |
| 18 Net gain or loss under Section 1231 (from Form 3, line 38) | 18 | <input checked="" type="checkbox"/> | 0 | 0 |
| 19 Long-term gains on collectibles and pre-1996 installment sales (from Form 3, line 39) | 19 | | 0 | 0 |
| 20 Differences and adjustments (from Form 3, line 40) | 20 | <input checked="" type="checkbox"/> | 0 | 0 |
| CORPORATE PARTNER INFORMATION | | | | |
| 21 State and municipal bond interest not included in U.S. net income | 21 | | 0 | 0 |
| 22 Foreign, state or local income, franchise, excise or capital stock taxes deducted from U.S. net income | 22 | | 0 | 0 |
| 23 Other adjustments, if any | 23 | <input checked="" type="checkbox"/> | 0 | 0 |



TAXPAYER IDENTIFICATION NUMBER

Input field for Taxpayer Identification Number

RECONCILIATION OF PARTNER'S CAPITAL ACCOUNT

Table with 3 columns: Line number, Description, and Amount. Rows 24-29 include: Balance at beginning of year, Massachusetts net income for year, Entire net income for year, Capital contributions, Withdrawals, and Balance at end of year.

PARTNER'S SHARE OF PROFIT, LOSS AND CAPITAL

Table with 3 columns: Line number, Description, and Amount. Rows 30-35 include: Percentage of profit/loss/capital (Beginning/Ending), Non-recourse liabilities, Qualified non-recourse financing, and Recourse liabilities.

PASS-THROUGH ENTITY PAYMENT AND CREDIT INFORMATION

Declaration election code: Withholding, Composite, Member self-file, Exempt PTE, Insurance company, Non-profit, Exempt corporate limited partner

Table with 3 columns: Line number, Description, and Amount. Rows 36-39 include: Withholding amount, Payments made in a composite filing, Credit for amounts withheld by lower-tier entity(ies) (with Payer Identification number), and Payments made with a composite filing by lower-tier entity(ies).