



Massachusetts Department of Revenue
Form 355SC
Security Corporation Excise Return

2017

For calendar year 2017 or taxable period beginning

and ending

An exact copy of U.S. Forms 1120 or 1120-RIC, including all applicable schedules and forms required to substantiate the Massachusetts excise, must be made available to the Department of Revenue upon request. Any changes or amendments to any U.S. amount must be explained in detail.

Name of corporation	U.S. Principal Business Code	Federal Identification number
▶		▶

Principal business address

City/Town	State	Zip	Phone number
-----------	-------	-----	--------------

Principal business address in Massachusetts

City/Town	State	Zip	Phone number
-----------	-------	-----	--------------

Fill in if:

☐ Amended return (see "Amended Return" in instructions) ☐ Federal amendment ☐ Federal audit ☐ Final return

1 Fill in if corporation is incorporated within Massachusetts

▶ ☐

2 Date of charter (mm/dd/yyyy)

▶

3a Fill in if Class 1 security corporation

▶ ☐

3b Fill in if Class 2 security corporation

▶ ☐

4 Date corporation first classified as security corporation (mm/dd/yyyy)

5 Date business began in Mass. (mm/dd/yyyy)

6 State or country of incorporation

▶

7 Average number of employees in Massachusetts

▶

8 Fill in if taxpayer disclosure statement included

▶ ☐

9a Most recent year audited by IRS (mm/dd/yyyy)

▶

9b Fill in if adjustments have been reported to Massachusetts

▶ ☐

10 Corporation's books are in the care of

10b Title

11 Corporation (check one only)

▶ ☐ New ☐ Terminated ☐ Has predecessor ☐ Has successor

12 Fill in if entity continues to qualify as a security corporation. If Yes, enclose statement explaining changes in corporate activity since last qualified.

▶ ☐

13a Fill in if corporation is participating in the filing of a U.S.

13b Federal Identification number of parent

consolidated return ▶ ☐

14 U.S. form(s) and schedule(s) filed for this tax year

▶ ☐ 1120 ☐ 1120-RIC ☐ 851 ☐ 5471 ☐ 1120S ☐ 1120-REIT

Declaration

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 (see instructions)	Date	Social Security number	Title
---	------	------------------------	-------

Signature of paid preparer	Date	Employer Identification number	Address
----------------------------	------	--------------------------------	---------

If you are signing as an authorized delegate of the appropriate corporate officer, check here and enclose Massachusetts Form M-2848, Power of Attorney. The Privacy Act Notice is available upon request. Mail to: **Massachusetts Department of Revenue, PO Box 7067, Boston, MA 02204.**



Name of corporation

U.S. Principal Business Code

Federal Identification number

Computation of excise. Use whole dollar method.

1	Total U.S. income (from U.S. Form 1120 or appropriate form)	▶ 1	
2	State and municipal bond interest not included in line 1	▶ 2	
3	Adjustments to income (enclose schedule; see instructions)	▶ 3	
4	Massachusetts gross income. Add lines 1 through 3	4	
5	Class 1 excise, if applicable (line 4)		× .0033
5		5	
6	Class 2 excise, if applicable (line 4)		× .0132
6		6	
7	Excise before credits (line 5 or 6, whichever is applicable)	7	
8	Total Credits (From Credit Manager Schedule)	▶ 8	
9	Excise after credits. Subtract line 8 from line 7	9	
10	Minimum excise (cannot be prorated)	10	456
11	Excise due before voluntary contribution (line 9 or 10, whichever is larger)	11	
12	Voluntary contribution for endangered wildlife conservation	▶ 12	
13	Excise due plus voluntary contribution. Add lines 11 and 12	▶ 13	
14	2016 overpayment applied to 2017 estimated tax	▶ 14	
15	2017 estimated tax payments (do not include amount in line 14)	▶ 15	
16	Payments made with extension	▶ 16	
17	Payment with original return (use only if amending a return)	17	
18	Amount overpaid. Subtract line 13 from total of lines 14 through 17	18	
19	Amount of line 18 to be credited to 2018 estimated tax	▶ 19	
20	Amount of line 18 to be refunded. Subtract line 19 from line 18	▶ 20	
21	Balance due. Subtract total of lines 14 through 17 from line 13	21	
a	M-2220 penalty	21a	
b	Other penalties	21b	
22	Total penalty. Add lines 21a and 21b	22	
23	Interest on unpaid balance	▶ 23	
24	Total payment due at time of filing. Add lines 21 through 23. Make remittance payable to Commonwealth of Massachusetts	▶ 24	



Name of corporation

U.S. Principal Business Code

Federal Identification number

Schedule A**Assets**

		— Balance sheet as of —	
		a. Start of tax year	b. End of tax year
1	Cash	1	
2	Federal and state government obligations	2	
3	Other current assets (enclose schedule)	3	
4	Other investments (enclose schedule)	4	
5	Buildings and other fixed depreciable assets (enclose schedule)	5	
6	Accumulated depreciation of fixed depreciable assets	6	
7	Net value of depreciable assets. Subtract line 6 from line 5	7	
8	Land (net of any amortization)	8	
9	Intangible assets (amortizable only)	9	
10	Accumulated amortization of intangible assets	10	
11	Net value of intangible assets. Subtract line 10 from line 9	11	
12	Other assets (enclose schedule)	12	
13	Total assets. Add lines 1 through 4, 7, 8, 11 and 12	13	

Liabilities and capital

		a. Start of tax year	b. End of tax year
14	Accounts payable	14	
15	Mortgages, notes, bonds payable in less than one year	15	
16	Other current liabilities (enclose schedule)	16	
17	Mortgages, notes, bonds payable in one year or more	17	
18	Other liabilities (enclose schedule)	18	
19	Preferred capital stock	19	
20	Common capital stock	20	
21	Paid-in or capital surplus	21	
22	Appropriated retained earnings (enclose schedule)	22	
23	Unappropriated retained earnings	23	
24	Total liabilities and capital before treasury stock deduction. Add lines 14 through 23	24	
25	Cost of treasury stock	25	
26	Total liabilities and capital. Subtract line 25 from line 24	26	

Ownership information**1** Fill in if at any time during taxable year more than 50% of the voting stock was:**a** Of another corporation owned by your corporation ☐ If Yes, enclose an ownership schedule (see instructions).**b** Of your corporation owned by any single entity ☐ If Yes, enclose an ownership schedule (see instructions).**Note:** For rules of attribution, see Section 267(c) of Internal Revenue Code.**2** Fill in if at any time during taxable year:**a** Any amount was owed by your corporation ☐ If Yes, enter amount **2a** **b** Any amount was owed to your corporation ☐ If Yes, enter amount **2b** **Note:** Include loans, accounts receivable and accounts payable.