FIRST NAME | M.I. | LAST NAME | SOCIAL SECURITY NUMBER

Schedule X Other Income. Enclose with Form 1 or Form 1-NR/PY.

2024

1	Taxable alimony received (from US return; full-and part-year residents only.) See instructions.	1	0 0
2	Taxable IRA/Keogh and Roth IRA conversion distributions (from worksheet)	2	0 0
3	**Other gambling winnings** (sources other than Massachusetts state lottery). **Not less than 0**. **Note:** Certain gambling losses are deductible under Massachusetts law. See Schedule Y, line 17. **Do not** report Massachusetts state lottery winnings here; instead, report them on Form 1, line 8b or Form 1-NR/PY, line 10b.	3	0 0
4	Fees and other 5.0% income. See instructions. **Not less than 0**	4	0 0
5	PFML taxable distributions. See instructions	5	0 0
6	Excess business loss adjustment. See instructions.	6	0 0
7	Total other 5.0% income. Add lines 1 through 6. **Not less than 0**. Enter here and on Form 1, line 9 or Form 1-NR/PY, line 11.	7	0 0

DO NOT FILE.
DRAFT AS OF SEPTEMBER 27, 2024.
SUBJECT TO CHANGE.
DO NOT FILE.