

## Schedule U-M Member's Income and Expenses

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Massachusetts
Department of
Revenue

For calendar year 2024 or taxable period beginning		2024 and ending				
Member's name		Federal identification number		Tax year	beginning	Ending
Check if non-U.S. corporation Check if t	reaty-based income exclusion	Tax type		Taxable r	member	
0 0	,	Financial institution	O Business corporation		○ No ○ Non-income n	neasure only
Name of principal reporting corporation		Federal identification nun	· · · · · · · · · · · · · · · · · · ·	Group el		
Name of principal reporting corporation		rederal identification fluit	libei		ted group O Worldwide	○ Neither
Figures shown are taken from (check no more than one):						
O Pre-consolidation separate company O Separate U.S.	. 1120 as filed O Pro forma,		forma, other U.S. return fi		U.S. return filed O	Eliminations/adjustments
	a. Unadjusted federal amount	b. Fiscalization adjustment	c. Combined reporting adjustments	d. Excluded income	e. Separately stated taxable income	f. Adjusted total
1 Net sales	(),					
2 Cost of goods sold	1		7			
3 Gross profit						
4 Dividends						
5 Interest income			· X			
6 Gross rents	<u> </u>		J'			
7 Gross royalties		(A)				
8 Capital gains net income		CV V~		<b>•</b>		
9 Net gain or (loss) from Form 4797	1,	7/		/ ,*		
10 Other income						
11 Total income						
12 Officer's compensation	5					
13 Salaries and wages	D 0					
14 Repairs and maintenance						
15 Bad debts			N			
16 Rents	N S					
17 Taxes and licenses						
18 Interest expense						
19 Charitable contributions		•				
20 Depreciation						
21 Depletion						
22 Advertising						
23 Pension and profit sharing						
24 Employee benefit programs						
25 Energy efficient commercial buildings deduction (from Fo	rm 7205)					
26 Other deductions						
27 Total deductions						
28 Net income before NOL and special deductions						