06 07 08 09 10 11 12 13 14 15 16 17 18 19 20 2				
				· · · · · · · · · · · ·
0000 5		ARFA RE	ESERVED	1
2023 Form 2				
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	u Incomo Tax Roturn	FUR 2-D	BARCODI	=
Widssachusells Fluucial				
Year beginning XXXXXXXX	K Ending XXXXXXXX			
NAMEOFESTATEO	<u>RTRUSTXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX</u>	XXX ESTTRIDNOXX		
	<pre></pre>			
MATI TNGADDRES		NAA DOSTOFFTCFXXXXXX	ST ZIP+FOU	RX
INCAREOFXXXXX	XXXXXXXXXXXX CTTYTOWN		ST ZIP+FOU	
FOREIGNSTATEX	XXXXXXXXXX FOREIGNC	DUNTRYXXXXXXXXXX		
	er XXXXXXXXXXX Date entity cre			
Select applicable items:	X Initial return X Change	e in trust's name X	Nonresident beneficiar	
X Decedent's estate	X Amended return X Change		Resident estate or trus	
X Simple trust		Partnership Audit X Change in fidu		
X Complex trust	Amended return due to federal cha	ange X Change in fiduciary	/'s address 🛛 🔨	Enclosing Schedule DRE
	X Einel vetuur		· · · · · · · · · · · · · · · · · · ·	-
X Bankruptcy estate - ch 7	X Final return		X	Fiduciary Schedule TDS
X Bankruptcy estate - ch 11	1		X	Fiduciary Schedule TDS Enclosing Schedule FCI
X Bankruptcy estate - ch 11 X Guardianship/conservato	1		X	Fiduciary Schedule TDS
X Bankruptcy estate - ch 11	I rship		X	Fiduciary Schedule TDS Enclosing Schedule FCI
X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust	I rship		X	Fiduciary Schedule TDS Enclosing Schedule FCI
X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N	t rship Massachusetts		X	Fiduciary Schedule TDS Enclosing Schedule FCI
X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees wo	I rship Massachusetts rldwide			Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees woo Annual Voluntary Election	t rship Massachusetts	t the entity level pursuant to MGL ch 63	X X X D (this election is irrev	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees wo Annual Voluntary Election Total amount paid	I rship Massachusetts rldwide	t the entity level pursuant to MGL ch 63	X X X D (this election is irrev	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust Qualified settlement fund X ESBT Number of employees in N Number of employees woo Annual Voluntary Election Total amount paid Part B Income	t rship Massachusetts rldwide - Pass-through entity has elected to pay tax at	t the entity level pursuant to MGL ch 63	X X X BD (this election is irrev	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust Qualified settlement fund X ESBT Number of employees in N Number of employees wo Annual Voluntary Election Total amount paid Part B Income 1. Wages, salaries, tips and	t rship Massachusetts rldwide - Pass-through entity has elected to pay tax at other employee compensation	t the entity level pursuant to MGL ch 63	D (this election is irrev	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
 X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees woo Annual Voluntary Election Total amount paid Part B Income 1. Wages, salaries, tips and 2. Taxable pensions and and 	t rship Massachusetts rldwide - Pass-through entity has elected to pay tax at other employee compensation nuities	t the entity level pursuant to MGL ch 63	X X X BD (this election is irrev	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
 X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees woil Annual Voluntary Election Total amount paid Part B Income 1. Wages, salaries, tips and 2. Taxable pensions and ani 	I rship Massachusetts rldwide - Pass-through entity has elected to pay tax at other employee compensation nuities rm income or loss	t the entity level pursuant to MGL ch 63	D (this election is irrev	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
 X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees won Annual Voluntary Election Total amount paid Part B Income 1. Wages, salaries, tips and 2. Taxable pensions and ann 3. Business/profession or fa 4. Rental, royalty and REMI 	I rship Massachusetts rldwide - Pass-through entity has elected to pay tax at other employee compensation nuities rm income or loss	t the entity level pursuant to MGL ch 63	D (this election is irrev 1 2 3 -	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
 X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees won Annual Voluntary Election Total amount paid Part B Income 1. Wages, salaries, tips and 2. Taxable pensions and anni 3. Business/profession or fa 4. Rental, royalty and REMI 5. Total Part B 5.0% interest 6. Other Part B 5.0% incom 	I Irship Massachusetts rldwide - Pass-through entity has elected to pay tax at other employee compensation nuities Irm income or loss C income or loss C income or loss t from Massachusetts banks e		D (this election is irrev 1 2 3 4 5 6	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
 X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees wood annual Voluntary Election Total amount paid Part B Income 1. Wages, salaries, tips and 2. Taxable pensions and annual 3. Business/profession or fa 4. Rental, royalty and REMI 5. Total Part B 5.0% interest 6. Other Part B 5.0% incom SIGN HERE. Under penalties of 	t rship Massachusetts rldwide - Pass-through entity has elected to pay tax at other employee compensation nuities rrm income or loss C income or loss C income or loss t from Massachusetts banks e f perjury, I declare that to the best of my know	wledge and belief this return and enclo	ED (this election is irrev 1 2 3 4 5 6 - - - - - - - - - - - - -	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
 X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees won Annual Voluntary Election Total amount paid Part B Income 1. Wages, salaries, tips and 2. Taxable pensions and anni 3. Business/profession or fa 4. Rental, royalty and REMI 5. Total Part B 5.0% interest 6. Other Part B 5.0% incom 	t rship Massachusetts rldwide - Pass-through entity has elected to pay tax at other employee compensation nuities rm income or loss C income or loss C income or loss t from Massachusetts banks e f perjury, I declare that to the best of my know Date Print		ED (this election is irrev 1 2 3 4 5 6 - - - - - - - - - - - - -	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
 X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees won Annual Voluntary Election Total amount paid Part B Income 1. Wages, salaries, tips and 2. Taxable pensions and ann 3. Business/profession or fa 4. Rental, royalty and REMI 5. Total Part B 5.0% interest 6. Other Part B 5.0% incom SIGN HERE. Under penalties of Signature of fiduciary 	t rship Massachusetts rldwide - Pass-through entity has elected to pay tax at other employee compensation nuities Irm income or loss C income or loss C income or loss t from Massachusetts banks e f perjury, I declare that to the best of my know Date Print J XXXXXXXX	wledge and belief this return and enclo paid preparer's name	D (this election is irrev 1 2 3 4 5 6 - - - - - - - - - - - - -	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
 X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees wou Annual Voluntary Election Total amount paid Part B Income 1. Wages, salaries, tips and 2. Taxable pensions and anu 3. Business/profession or fa 4. Rental, royalty and REMI 5. Total Part B 5.0% interest 6. Other Part B 5.0% incom SIGN HERE. Under penalties of Signature of fiduciary 	t rship Massachusetts rldwide - Pass-through entity has elected to pay tax at other employee compensation nuities Irm income or loss C income or loss C income or loss t from Massachusetts banks e f perjury, I declare that to the best of my know Date Print J XXXXXXXX	wledge and belief this return and enclo	D (this election is irrev 1 2 3 4 5 6 - - - - - - - - - - - - -	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
 X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees word Annual Voluntary Election Total amount paid Part B Income 1. Wages, salaries, tips and 2. Taxable pensions and anni 3. Business/profession or fa 4. Rental, royalty and REMI 5. Total Part B 5.0% interest 6. Other Part B 5.0% incom Signature of fiduciary Title 	I rship Massachusetts rldwide - Pass-through entity has elected to pay tax at other employee compensation nuities Irm income or loss C income or loss C income or loss C income or loss t from Massachusetts banks e f perjury, I declare that to the best of my know Date Print J XXXXXXXX Paid p	wledge and belief this return and enclo paid preparer's name preparer's phone	D (this election is irrev 1 2 3 4 5 6 - - - - - - - - - - - - -	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
 X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees won Annual Voluntary Election Total amount paid Part B Income 1. Wages, salaries, tips and 2. Taxable pensions and ann 3. Business/profession or fa 4. Rental, royalty and REMI 5. Total Part B 5.0% interest 6. Other Part B 5.0% incom Signature of fiduciary Title 	I rship vlassachusetts rldwide - Pass-through entity has elected to pay tax at other employee compensation nuities irm income or loss C income or loss C income or loss t from Massachusetts banks e f perjury, I declare that to the best of my know Date Print	wledge and belief this return and enclo paid preparer's name preparer's phone here? X Yes	D (this election is irrev 1 2 3 4 5 6 - - - - - - - - - - - - -	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
 X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees won Annual Voluntary Election Total amount paid Part B Income 1. Wages, salaries, tips and 2. Taxable pensions and ann 3. Business/profession or fa 4. Rental, royalty and REMI 5. Total Part B 5.0% interest 6. Other Part B 5.0% incom Signature of fiduciary Title 	I rship vlassachusetts rldwide - Pass-through entity has elected to pay tax at other employee compensation nuities irm income or loss C income or loss C income or loss t from Massachusetts banks e f perjury, I declare that to the best of my know Date Print	wledge and belief this return and enclo paid preparer's name preparer's phone	D (this election is irrev 1 2 3 4 5 6 - - - - - - - - - - - - -	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
 X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees won Annual Voluntary Election Total amount paid Part B Income 1. Wages, salaries, tips and 2. Taxable pensions and anni 3. Business/profession or fa 4. Rental, royalty and REMI 5. Total Part B 5.0% interest 6. Other Part B 5.0% incom SIGN HERE. Under penalties of Signature of fiduciary Title 	I rship vlassachusetts rldwide - Pass-through entity has elected to pay tax at other employee compensation nuities irm income or loss C income or loss C income or loss t from Massachusetts banks e f perjury, I declare that to the best of my know Date Print	wledge and belief this return and enclo paid preparer's name preparer's phone here? X Yes	D (this election is irrev 1 2 3 4 5 6 5 5 6 5 5 6 5 7 8 7 9 1 2 3 - 4 - 5 6 - 5 7 8 7 7 7 7 7 7 7 7 7 7 7 7 7	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
 X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees won Annual Voluntary Election Total amount paid Part B Income 1. Wages, salaries, tips and 2. Taxable pensions and ann 3. Business/profession or fa 4. Rental, royalty and REMI 5. Total Part B 5.0% interest 6. Other Part B 5.0% incom SIGN HERE. Under penalties of Signature of fiduciary Title May the Department of Revenue Name of designated tax matters 	1 rship Vlassachusetts rldwide - Pass-through entity has elected to pay tax at other employee compensation nuities rm income or loss C income or loss C income or loss t from Massachusetts banks e f perjury, I declare that to the best of my know Date Print j XXXXXXXX Paid p e discuss this return with the preparer shown Paid p	Wedge and belief this return and enclopaid preparer's name preparer's phone here? X Yes preparer's signature Identifying number of tax	D (this election is irrev 1 2 3 4 5 6 - 5 6 - 5 6 - 5 6 - 5 6 - 5 6 - 5 6 - 5 6 - 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 5 6 - 7 5 5 6 - 7 5 5 6 - 7 5 5 6 - 7 5 5 6 - 7 5 5 6 - 7 5 7 7 7 7 7 7 7 7 7 7 7 7 7	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
 X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees won Annual Voluntary Election Total amount paid Part B Income 1. Wages, salaries, tips and 2. Taxable pensions and and 3. Business/profession or fa 4. Rental, royalty and REMI 5. Total Part B 5.0% interest 6. Other Part B 5.0% incom SIGN HERE. Under penalties of Signature of fiduciary Title May the Department of Revenue 	I rship vlassachusetts rldwide - Pass-through entity has elected to pay tax at other employee compensation nuities irm income or loss C income or loss C income or loss f perjury, I declare that to the best of my know Date Print j XXXXXXXX Paid p e discuss this return with the preparer shown Paid p	wledge and belief this return and enclo paid preparer's name preparer's phone here? X Yes preparer's signature Identifying number of tax	D (this election is irrev 1 2 3 4 5 6 - 5 6 - 5 6 - 5 6 - 5 6 - 5 6 - 5 6 - 5 6 - 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 5 6 - 7 5 5 6 - 7 5 5 6 - 7 5 5 6 - 7 5 5 6 - 7 5 5 6 - 7 5 7 7 7 7 7 7 7 7 7 7 7 7 7	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
 X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees won Annual Voluntary Election Total amount paid Part B Income 1. Wages, salaries, tips and 2. Taxable pensions and ann 3. Business/profession or fa 4. Rental, royalty and REMI 5. Total Part B 5.0% interest 6. Other Part B 5.0% incom SIGN HERE. Under penalties of Signature of fiduciary Title May the Department of Revenue Name of designated tax matters 	I rship vlassachusetts rldwide - Pass-through entity has elected to pay tax at other employee compensation nuities irm income or loss C income or loss C income or loss f perjury, I declare that to the best of my know Date Print j XXXXXXXX Paid p e discuss this return with the preparer shown Paid p	Wedge and belief this return and enclopaid preparer's name preparer's phone here? X Yes preparer's signature Identifying number of tax	D (this election is irrev 1 2 3 4 5 6 - 5 6 - 5 6 - 5 6 - 5 6 - 5 6 - 5 6 - 5 6 - 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 6 - 5 5 5 6 - 7 5 5 6 - 7 5 5 6 - 7 5 5 6 - 7 5 5 6 - 7 5 5 6 - 7 5 7 7 7 7 7 7 7 7 7 7 7 7 7	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit
 X Bankruptcy estate - ch 11 X Guardianship/conservato X Qualified funeral trust X Qualified settlement fund X ESBT Number of employees in N Number of employees won Annual Voluntary Election Total amount paid Part B Income 1. Wages, salaries, tips and 2. Taxable pensions and anni 3. Business/profession or fa 4. Rental, royalty and REMI 5. Total Part B 5.0% interest 6. Other Part B 5.0% incom SIGN HERE. Under penalties of Signature of fiduciary Title May the Department of Revenue Name of designated tax matters 	I rship vlassachusetts rldwide - Pass-through entity has elected to pay tax at other employee compensation nuities irm income or loss C income or loss C income or loss f perjury, I declare that to the best of my know Date Print j XXXXXXXX Paid p e discuss this return with the preparer shown Paid p	wledge and belief this return and enclo paid preparer's name preparer's phone here? X Yes preparer's signature Identifying number of tax	D (this election is irrev 1 2 3 4 5 6 - 5 5 5 6 - 5 5 5 5 5 6 - 5 5 5 5 5 5 5 5 5 5 5 5 5	Fiduciary Schedule TDS Enclosing Schedule FCI Member of lower-tier entit

	7 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65					
	AREA RESERVE	-D				
2023 Form 2, pg. 2	, py. z					
XXXXXXXXXXXXX	FOR 2-D BARCO	DE				
Massachusetts Fiduciary Income Tax Return NAMEOFESTATEORTRUSTXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	TRIDNOXX					
7. Total Part B 5.0% income. Add lines 1 through 6	7	-XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				
8. Deductions allowed decedents	8	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				
9. Total Part B 5.0% income less deductions allowed decedents. Subtract line 8 from	line 7 9	-XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				
10. Income distribution deduction	10	XXXXXXXXXXXXX				
11. Part B 5.0% income taxable to fiduciary. Subtract line 10 from line 9. Not less than	"0" 11	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				
12. Nonresident/charitable deduction. Not less than "0."	12	XXXXXXXXXXXXXXX				
13. Net Part B 5.0% income taxable to fiduciary. Subtract line 12 from line 11. Not less		XXXXXXXXXXXXXX				
Part A Interest and Dividend Income						
14. Part A 5.0% interest and dividend income	14	XXXXXXXXXXXXX				
15. Part A 5.0% common trust fund interest and dividend income	15	XXXXXXXXXXXXX				
 Total Part A 5.0% interest and dividend income. Add lines 14 and 15 	16	XXXXXXXXXXXXX				
17. Income distribution deduction	10	XXXXXXXXXXXXX				
 18. Part A 5.0% interest and dividend income taxable to fiduciary. Subtract line 17 from 						
 Part A 5.0% Interest and dividend income taxable to inductary. Subtract line 17 from Nonresident/charitable deduction. Not less than "0." 	19					
20. Net Part A 5.0% interest and dividend income taxable to fiduciary. Subtract line 19	20 21					
21. Net Part A and Part B 5.0% income taxable to fiduciary. Add lines 13 and 20		XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				
22. Tax	22					
Dart A 9 5% and 12% Capital Gains						
Part A 8.5% and 12% Capital Gains		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
23. Taxable Part A 8.5% and 12% capital gains. Not less than "0"	23					
24. Part A 8.5% short-term common trust fund capital gains	24					
25. Total Part A 8.5% and 12% capital gains. Add lines 23 and 24	25					
26. Income distribution deduction	26					
27. Part A 8.5% and 12% capital gains taxable to fiduciary. Subtract line 26 from line 2						
28. Nonresident/charitable deduction. Not less than "0"	28					
29. Net Part A 8.5% and 12% capital gain income taxable to fiduciary. Subtract line 28	from line 27. Not less than "0" 29	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				
Fill in if reporting long-term gains on collectibles						
30. Tax on Part A capital gains. Multiply line 29 by .085	30	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				
Part C 5.0% Capital Gains						
31. Part C 5.0% long-term capital gains Not less than "0." If filing Schedule D-IS, Instal	ment Sales, fill in X 31	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				
32. Part C 5.0% long-term common trust fund capital gains	32	XXXXXXXXXXXXX				
33. Total Part C 5.0% long-term capital gains. Add lines 31 and 32	33	XXXXXXXXXXXXX				
34. Income distribution deduction	34	XXXXXXXXXXXXX				
	<pre><pre><pre><pre><pre><pre><pre><pre></pre></pre></pre></pre></pre></pre></pre></pre>	XXXXXXXXX				

06 07 08 0	9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47	48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 6	8 64 65 66	67 68 69 70 71	72 73 74 7	5 76 77 78 79
ļ						
•						
20)23 Form 2, pg. 3	AREA RESER	VE	D		
X	023 Form 2, pg. 3	FOR 2-D BARC)F		
		I OH Z D DAHO				
Ma	ssachusetts Fiduciary Income Tax Return					
,						
	MEOFESTATEORTRUSTXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	TRTDNOXX				
11/		ΠΩΠΟΛΛ				
05			0.5	хххх	vvvv	/ / / / /
35. 36.	Part C 5.0% long-term capital gains taxable to fiduciary. Subtract line 34 from line 33	. Not less than "0"	35		$\langle \langle \rangle \rangle \langle \rangle$	XXXXX
36.	Nonresident/charitable deduction. Not less than "0."		36		≎≎≎∢	シ≎≎≎≎
37.	Net Part C 5.0% long-term capital gain income taxable to fiduciary. Subtract line 36 f	rom line 35. Not less than "0"	37			<u>}</u>
38. 39.	Tax on Part C 5.0% long-term capital gains.		38		XXXX	
39.	Credit recapture (from Credit Recapture Schedule)		39			
40.	Additional tax on installment sale		40	XXXX	~~~/	
41.	TOTAL INCOME TAX.					
	a. Income tax. Add lines 22, 30, 38, 39, and 40 41a	XXXXXXXXXXXX				
	b. 4% Surtax. (from Schedule 4% Surtax, line 7) 41b	XXXXXXXXXXXX		VVVV	vvvv	
	c. Total tax. Add lines 41a and 41b		41			
42.	Credit for income taxes due to other jurisdictions (enclose Schedule OJC)		42			
43.	Other credits (from Credit Manager Schedule)		43	XXXX		
44.	Total credits. Add lines 42 and 43		44	XXXX		
45.	Credits passed through to beneficiaries on Schedules 2K-1		45	XXXX		
46.	Credits remaining with fiduciary. Subtract line 45 from line 44		46	XXXX		
47.	Tax after credits. Subtract line 46 from line 41		47	XXXX	XXX)	(XXXX
48.	Amended Return Only. Overpayment from original return. Not less than 0		48	XXXX	ΧΧΧλ	(XXXX
49.	Tax after credits and overpayment from original return. Add lines 47 and 48		49		ΧΧΧ	
50.	Massachusetts income tax withheld		50	XXXX		
51.	2022 overpayment applied to your 2023 estimated tax		51	XXXX	ΧΧΧλ	XXXX
52.	2023 Massachusetts estimated tax payments		52	XXXX	ΧΧΧλ	XXXX
53.	Payments made with extension		53	XXXX	ΧΧΧλ	(XXXX
54.	Amended Return Only. Payment with original return		54	XXXX	ΧΧΧ	(XXXX
55.	Refundable credits (from Credit Manager Schedule)		55	XXXX	ΧΧΧ	(XXXX
56.	Refundable Child and Family Tax Credit		56	XXXX	ΧΧΧ	(XXXX
57.	Total tax payments. Add lines 50 through 56		57	XXXX	ΧΧΧ	XXXX
58.	Overpayment Subtract line 49 from line 57		58	XXXX	ΧΧΧ	(XXXX
59.	Amount of overpayment you want applied to your 2024 estimated taxes		59	XXXX	χχχ	(XXXX
60.	Amount of your refund. Subtract line 59 from line 58		60	XXXX	XXX)	XXXX
61.	Tax due. Subtract line 57 from line 49. Pay online at www.mass.gov/dor/payonline		61	XXXX	XXXX	XXXX
	Interest XXXXXXX Penalty XXXXXXX M-2210F amt. XX	XXXXXX X EX enclose				
		Form M-2210F				
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	vvv	vvvvv	vvv	
		xxxxxxxxxxxxxxxx	~~~	~~^X	٨٨٨	