



CORPORATION NAME

FEDERAL IDENTIFICATION NUMBER

Schedule S S Corporation Distributive Income

2023

CLASSIFICATION INFORMATION

Table with 17 rows for classification information (lines 1-17) including Gross receipts or sales, Net gain, and various income types, with corresponding input boxes.

S CORPORATION INFORMATION

Table with 5 rows for S Corporation information (lines 18-23) including S-election effective date, Accounting method, and Annual Voluntary Election, with corresponding input boxes.



FEDERAL IDENTIFICATION NUMBER

Empty boxes for Federal Identification Number

S CORPORATION INCOME

▼ If a loss, mark an X in box at left

Form with lines 24 through 48, including descriptions of income and loss items, and corresponding input boxes for amounts and adjustments.



CORPORATION NAME

Grid for Corporation Name

FEDERAL IDENTIFICATION NUMBER

Grid for Federal Identification Number

S CORPORATION INCOME (cont'd)

Table with 4 columns: Line number, Description, Line number, and Input grid. Rows 49-53.

RESIDENT AND NONRESIDENT RECONCILIATION

S corporations owned by a nonresident shareholder(s) and with income derived from business activities in another state, and which activities provide that state with the power to levy an income tax or a franchise tax, complete Schedule F, Income Apportionment, and then lines 54-57.

Table with 4 columns: Line number, Description, Line number, and Input grid. Rows 54-54q.



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Grid for Federal Identification Number

55 Nonresident taxable income. Multiply the amounts from lines 54a through 54q by the apportionment percentage on Schedule F, line 5.

Table with 2 columns: Description (a. Line 54a times apportionment percentage, etc.) and Amount (55a, 55b, etc.). Includes input boxes for each row.



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56 Resident shareholder value. Enter the resident shareholder portion of the amounts from the following Schedule S lines.

Table with 3 columns: Line description (a-q), Line number (56a-56q), and Input grid. Includes checkboxes for lines 56a, 56j, 56l, 56m, 56n, 56o, 56p, and 56q.



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57 Apportioned Massachusetts total. Add the amounts from lines 55a through 55q to the corresponding amounts from lines 56a through 56q.

Form with 17 rows (a-q) for reporting apportioned Massachusetts total. Each row includes a description, a line number, a checkbox, and a grid for numerical entry.



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SHAREHOLDER INFORMATION

List all resident, nonresident and other shareholders. Fill in if attaching additional page(s) to include additional taxpayers.

Table with columns: SOCIAL SECURITY OR FEDERAL IDENTIFICATION NUMBER, RESIDENT, NON-RESIDENT, OTHER, NAME OF SHAREHOLDER (last, first). Contains 20 rows of empty grid cells for data entry.