

Address

Form AA-1 Application for Section 42 Method of Apportionement

nev. 3/23
Massachusetts
Department of
Revenue

For calendar year or taxable period beginning	and er	nding	
Registration			
Business code number (from U.S. return)	Federal identification n	number	
Name of corporation			
Present address of principal office			
Present location of principal office in Massachusetts			
Pursuant to MGL ch 63, § 42 and 830 CMR 63.42.1 the cor apportionment. An applicant seeking permission to use an amethod. See 830 CMR 63.42.1. An application will not be coaccount valid extensions.	alternative apportionment method must fire	st file a return and pay the tax using the statutory	
A taxpayer seeking to use an apportionment method that it example, a section 38 manufacturer, as defined in MGL ch 6 factor method under MGL ch 63, \S 38(I)(2).	•		
· · · · · · · · · · · · · · · · · · ·	cation before the expiration of nine months from the date of filing, the application is deemed ee in writing to extend the time for decision on the application.		
Enclose With This Application Form: A statement of the reasons, supported by detailed facts, wh not reasonably adapted to approximate its Massachusetts in Massachusetts using statutory apportionment does not fairly	ncome. The applicant must show by clear	and cogent evi dence that the income attributed to	
A detailed description of the sought after proposed alternation applicant must provide a written explanation of the proposed nature and relation to the overall result reached. The Comm	d alternative method, attaching sufficient d	documentation to justify the figures used, their origin,	
Sign Here Under penalties of perjury, I declare that I have examine and belief, it is true, correct and complete. Type or print name of responsible corporate officer	ed this application including accompan	ying materials, and to the best of my knowledge	
Signature of responsible corporate officer	Title	Date	
Type or print paid preparer's name			
Individual or firm signature of preparer	Address	Date	
Authorized representatives or employees of the corporation with this application: Such person must submit a properly converse of authorized person			

Note: This application must be submitted with the return. Taxpayers filing an electronic return may submit the Form AA-1 electronically with the return filing and electronic payment. For more information on electronic filing and payment requirements see TIR 21-9. Make check or money order payable to the **Commonwealth of Massachusetts**. Send the application and return to: **Massachusetts Department of Revenue, Rulings and Regulations Bureau, PO Box 9566, Boston, MA 02114.**