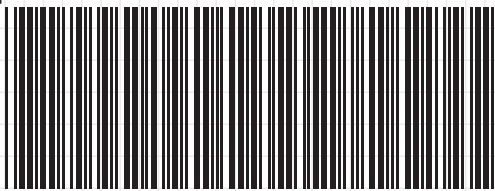


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2024 Form 3
XXXXXXXXXXXXXX

Massachusetts Partnership Return of Income

Year beginning XXXXXXXX Ending XXXXXXXX

PARTNERSHIPNAMEXXXXXXXXXXXXXXXXX FEDERALIDNO
PRINCIPALBUSINESSADDRESS CITYTOWNPOSTOFFICEXXXXXX ST ZIP+FOURX
CAREOFNAMEXXXXXXXXXXXXXXXXXXXXX
CAREOFADDRESSXXXXXXXXXXXXX CITYTOWNPOSTOFFICEXXXXXX ST ZIP+FOURX

- A. Principal business activity XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
- B. Principal product or service XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
- C. Business code number XXXXXX D. Date business started MMDDYYYY E. Total assets XXXXXXXXXXXXXXX
- F. Reason for filing: Initial return Final return Name change
- Amended return Federal amendment Amended return due to IRS BBA Audit Federal BBA Audit Assessment in current year
- Enclosing Schedule DRE Enclosing Schedule FCI Enclosing Schedule TDS Common-trust fund
- G. Accounting method: Cash Accrual Other
- H. Number of Schedules 3K-1 enclosed XXXXXXX
- I. Fill in if you are a member of a lower-tier entity X
- J. Fill in if this partnership is an investment partnership as defined in the Pass-Through Entity Withholding Reg., 830 CMR 62B.2.2(2) X
- K. Fill in if this partnership elected out of the federal centralized partnership audit regime this tax year X
- L. Number of employees in Massachusetts XXXXXXXXXXXXXXX
- M. Number of employees worldwide XXXXXXXXXXXXXXX
- N. Annual Voluntary Election: Fill in if pass-through entity has elected to pay tax at the entity level pursuant to MGL ch 63D
Total amount paid XXXXXXXXXXXXXXX
- O. Fill in if this partnership: Aggregated activities for IRC sec. 465 at-risk purposes Grouped activities for IRC sec. 469 passive activity purposes
- P. Fill in if at any time during the current tax year the partnership received a digital asset (or financial interest in a digital asset) as a reward, award, or payment for property or services X
- Q. Fill in if at any time during the current tax year the partnership sold, exchanged, or otherwise disposed of a digital asset (or financial interest in a digital asset) X

DECLARATION: Under penalties of perjury, I declare that to the best of my knowledge and belief this return and enclosures are true, correct and complete.

Signature of general partner Date XXXXXXXX Print paid preparer's name XXXXXXXXXXXXXXXXXXXXXXX Paid preparer's PTIN XXXXXXXXXXXXXXX

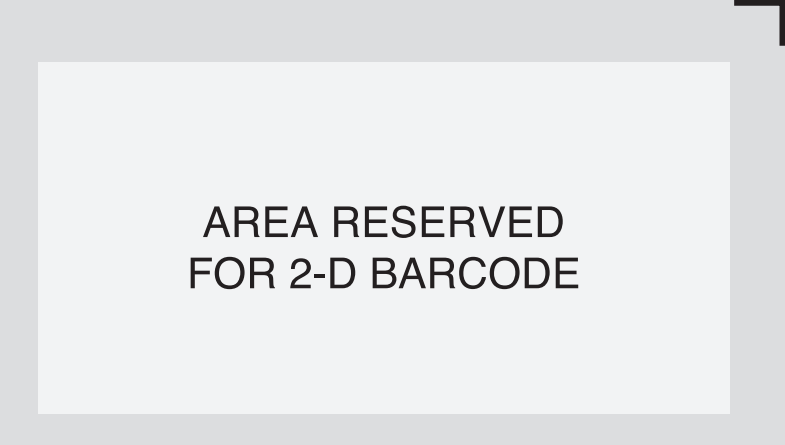
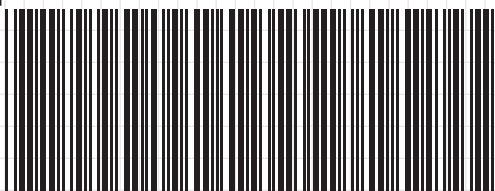
Title Paid preparer's phone XXXXXXXXXXXXXXX Paid preparer's EIN XXXXXXXXXXXXXXX

May the Department of Revenue discuss this return with the preparer shown here? Yes
Paid preparer's signature Date XXXXXXXX Check if self-employed

Name of designated tax matters partner Identifying number of tax matters partner
XXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXX

PRIVACY ACT NOTICE AVAILABLE UPON REQUEST

XXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX



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Massachusetts Partnership Return of Income

FEDERALIDNUM

Part 1. Massachusetts Information

- 1. Gross income 1 XXXXXXXXXXXXXXXX
- 2. Fill in if the partnership is engaged exclusively in buying, selling, dealing in or holding securities on its own behalf and not as a broker 2 X
- 3. Fill in if this partnership is organized as a limited liability company and treated as a partnership for federal income tax purposes 3 X
- 4. Fill in if this partnership is a publicly traded partnership as defined in IRC sec. 469(k)2 4 X
- 5. Fill in if there has been a sale, transfer or liquidation of a partnership interest during the period reported on this tax return 5 X
- 6. Income apportionment percentage 6 X . XXXXXXXX
- 7. Check if any partners in this partnership file as part of a nonresident composite income tax return If Yes, enter Federal Identification number under which the composite return is filed 7 X
XXXXXXXXXXXXXX
Number of partners included in composite return XXXX
- 8. Check if this partnership under audit by the IRS, or has it been audited in a prior year 8 X
- 9. Withholding amount 9 XXXXXXXXXXXXXXXX
- 10. Payments made with composite return 10 XXXXXXXXXXXXXXXX
- 11. Credit for amounts withheld by lower-tier entity(ies) 11 XXXXXXXXXXXXXXXX
- 12. Payments made with a composite filing by lower-tier entity(ies) 12 XXXXXXXXXXXXXXXX

Massachusetts Ordinary Income or Loss

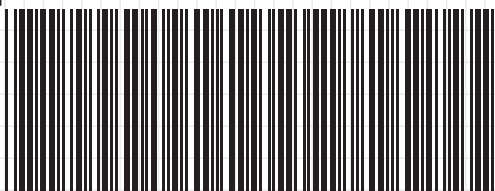
- 13. Ordinary income or loss from U.S. Form 1065, line 22 13 -XXXXXXXXXXXXXX
- 14. Other income or loss from U.S. Form 1065, Schedule K, line 11 14 -XXXXXXXXXXXXXX
- 15. State, local and foreign income and unincorporated business taxes or excises 15 XXXXXXXXXXXXXXXX
- 16. Subtotal. Add lines 13 through 15 16 -XXXXXXXXXXXXXX
- 17. Section 1231 gains or losses included in line 16 17 -XXXXXXXXXXXXXX
- 18. Subtotal 18 -XXXXXXXXXXXXXX
- 19. Adjustments, if any, to line 18. Enter the applicable line number from U.S. Form 1065 and the amount of the adjustment.
 - a. Line number XX Amount -XXXXXXXXXXXXXX
 - b. Line number XX Amount -XXXXXXXXXXXXXX
 Total adjustments 19 -XXXXXXXXXXXXXX
- 20. Massachusetts ordinary income or loss 20 -XXXXXXXXXXXXXX
- 21. Net income or loss from rental real estate activities from U.S. Form 1065, Schedule K, line 2 21 -XXXXXXXXXXXXXX
- 22. Adjustments, if any, to line 21. Enter the applicable line number from U.S. Form 8825 and the amount of the adjustment.
 - a. Line number XX Amount -XXXXXXXXXXXXXX
 - b. Line number XX Amount -XXXXXXXXXXXXXX
 Total adjustments 22 -XXXXXXXXXXXXXX
- 23. Adjusted Massachusetts net income or loss from rental real estate activities 23 -XXXXXXXXXXXXXX

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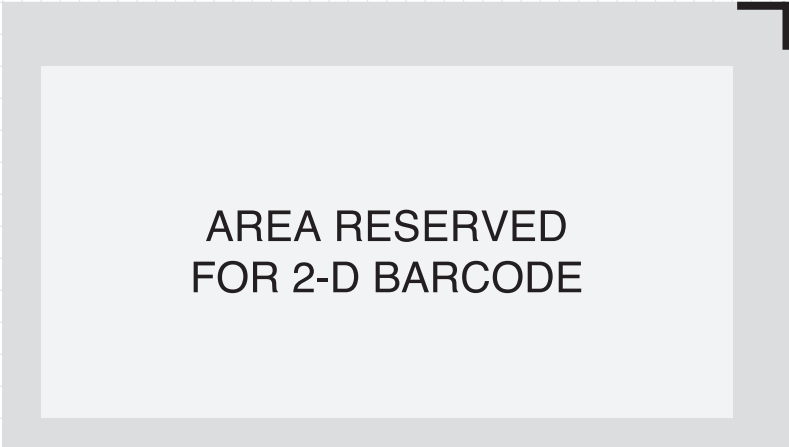
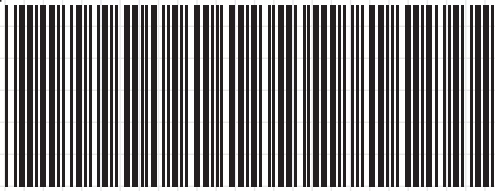
Massachusetts Partnership Return of Income

FEDERALIDNUM

24.	Net income or loss from other rental activities from U.S. Form 1065, Schedule K, line 3c	24	-XXXXXXXXXXXXXX
25.	Adjustments, if any, to line 24. Enter the applicable line number from U.S. Form 1065 and the amount of the adjustment.		
a.	Line number XX Amount -XXXXXXXXXXXXXX		
b.	Line number XX Amount -XXXXXXXXXXXXXX		
	Total adjustments	25	-XXXXXXXXXXXXXX
26.	Adjusted Massachusetts net income or loss from rental activities	26	-XXXXXXXXXXXXXX
27.	U.S. interest, dividend & royalty income, not including capital gains from U.S. Form 1065, Sch. K, lines 5, 6a & 7	27	XXXXXXXXXXXXXX
28.	Interest on U.S. debt obligations included in line 27	28	XXXXXXXXXXXXXX
29.	5.0% interest from Massachusetts banks included in line 27	29	XXXXXXXXXXXXXX
30.	Interest (other than Massachusetts bank interest) and dividend income included in line 27	30	XXXXXXXXXXXXXX
31.	Non-Massachusetts state and municipal bond interest	31	XXXXXXXXXXXXXX
32.	Royalty income included in line 27	32	XXXXXXXXXXXXXX
33.	Total short-term capital gains included in U.S. Form 1065, Schedule D, line 7	33	XXXXXXXXXXXXXX
34.	Total short-term capital losses included in U.S. Form 1065, Schedule D, line 7	34	-XXXXXXXXXXXXXX
35.	Gain on the sale, exchange or involuntary conversion of property used in a trade or business and held for one year or less from U.S. Form 4797	35	-XXXXXXXXXXXXXX
36.	Loss on the sale, exchange or involuntary conversion of property used in a trade or business and held for one year or less from U.S. Form 4797	36	-XXXXXXXXXXXXXX
37.	Net long-term capital gain or loss from U.S. Form 1065, Schedule K, line 9a	37	-XXXXXXXXXXXXXX
38.	Long-term section 1231 gains or losses not included in line 37	38	-XXXXXXXXXXXXXX
39.	Long-term gains on collectibles and pre-1996 installment sales included in line 37	39	-XXXXXXXXXXXXXX
40.	Adjustments, if any, to lines 33 through 39, including any gain or loss from Massachusetts fiduciaries. Enter the line number from U.S. Form 1065 that the adjustment applies to and enter the amount.		
a.	Line number XX Amount -XXXXXXXXXXXXXX		
a.	Line number XX Amount -XXXXXXXXXXXXXX		
	Total adjustments	40	-XXXXXXXXXXXXXX

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Massachusetts Partnership Return of Income

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PARTNERSHIPNAMEXXXXXXXXXXXXXXXXXXXX FEDERALIDNO

41. Income Apportionment Schedule

LOCATION	STATE	FACILITY TYPE	ACCEPTS ORDERS	REG. IN STATE	FILES IN STATE
CITYXXXXXXXXXXXXXXXXXXXX	XX	FACILITYTYPEXXXXXXXXXXXX	X	X	X
CITYXXXXXXXXXXXXXXXXXXXX	XX	FACILITYTYPEXXXXXXXXXXXX	X	X	X
CITYXXXXXXXXXXXXXXXXXXXX	XX	FACILITYTYPEXXXXXXXXXXXX	X	X	X
CITYXXXXXXXXXXXXXXXXXXXX	XX	FACILITYTYPEXXXXXXXXXXXX	X	X	X
CITYXXXXXXXXXXXXXXXXXXXX	XX	FACILITYTYPEXXXXXXXXXXXX	X	X	X
CITYXXXXXXXXXXXXXXXXXXXX	XX	FACILITYTYPEXXXXXXXXXXXX	X	X	X

Apportionment Factors

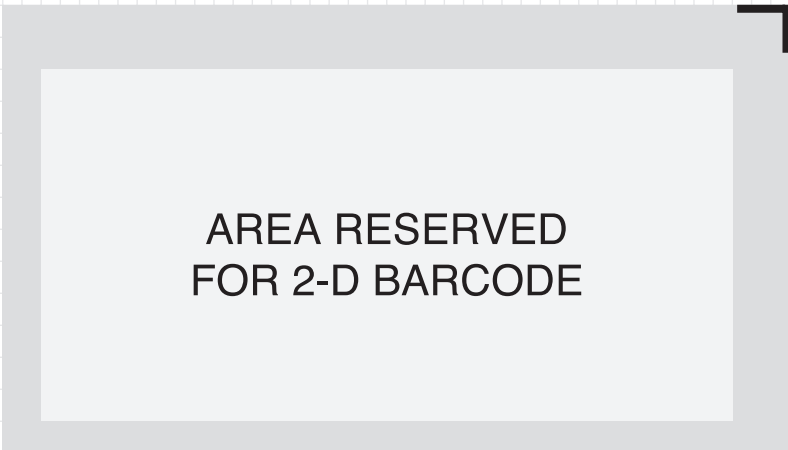
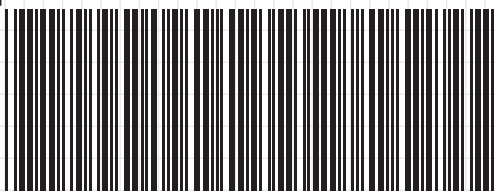
42. Tangible property					
a. Property owned	Massachusetts	XXXXXXXXXXXXXX		Worldwide	XXXXXXXXXXXXXX
b. Property rented	Massachusetts	XXXXXXXXXXXXXX		Worldwide	XXXXXXXXXXXXXX
c. Total property owned and rented	Massachusetts	XXXXXXXXXXXXXX		Worldwide	XXXXXXXXXXXXXX
d. Tangible property apportionment percentage			42d		X . XXXXXX
43. Payroll					
a. Total payroll	Massachusetts	XXXXXXXXXXXXXX		Worldwide	XXXXXXXXXXXXXX
b. Payroll apportionment percentage			43b		X . XXXXXX
44. Sales					
a. Tangible	Massachusetts	XXXXXXXXXXXXXX		Worldwide	XXXXXXXXXXXXXX
b. Services	Massachusetts	XXXXXXXXXXXXXX		Worldwide	XXXXXXXXXXXXXX
c. Rents and royalties	Massachusetts	XXXXXXXXXXXXXX		Worldwide	XXXXXXXXXXXXXX
d. Other sales factors	Massachusetts	XXXXXXXXXXXXXX		Worldwide	XXXXXXXXXXXXXX
e. Total sales factors	Massachusetts	XXXXXXXXXXXXXX		Worldwide	XXXXXXXXXXXXXX
f. Sales apportionment percentage			44f		X . XXXXXX
45. Apportionment percentage			45		X . XXXXXX
46. Massachusetts apportionment percentage			46		X . XXXXXX

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Massachusetts Partnership Return of Income

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Partnership Credits

47. Credits available

a. Taxes due to another jurisdiction (full-year and part-year residents only)

47a

XXXXXXXXXXXXXX

b. Other credits (from Schedule CMS)

47b

XXXXXXXXXXXXXX

48. Credit recapture (from Schedule CRS)

48

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Miscellaneous Federal Information

49. Gross receipts or sales (from Part 2, Federal Information, line 1a)

49

XXXXXXXXXXXXXX

50. Total income or loss (from Part 2, Federal Information, line 8)

50

-XXXXXXXXXXXXXX

51. Bad debts (from Part 2, Federal Information, line 12)

51

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52. Interest (from Part 2, Federal Information, line 15)

52

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53. Fill in if, during the tax year, the partnership had any debt that was cancelled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt

54. Investment interest expense (from Part 2, Federal Information, line 51b)

54

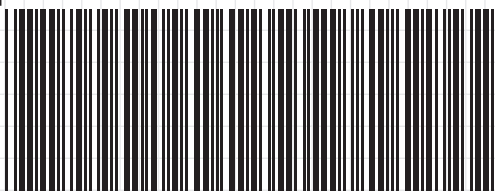
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Massachusetts Partnership Return of Income

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Part 2. Federal Information

Income. From U.S. Form 1065

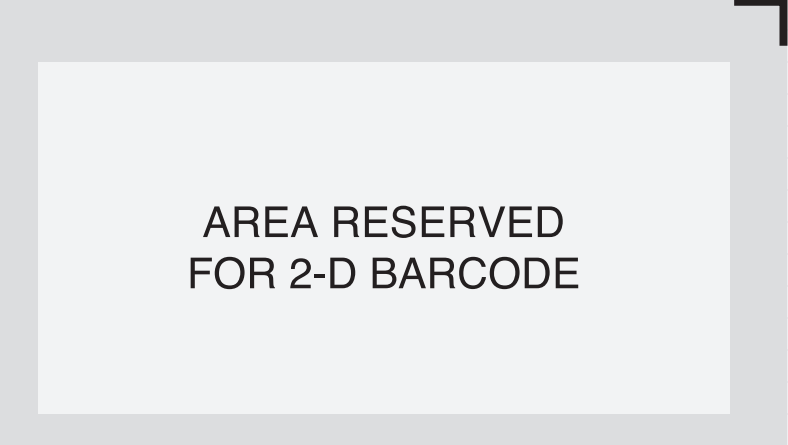
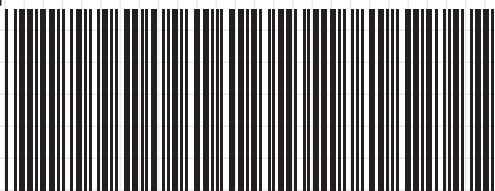
21	1a. Gross receipts or sales	1a	XXXXXXXXXXXXXX
22	b. Returns and allowances	1b	XXXXXXXXXXXXXX
23	c. Total. Subtract line 1b from line 1a	1c	-XXXXXXXXXXXXXX
24	2. Cost of goods sold (enclose U.S. 1125-A)	2	XXXXXXXXXXXXXX
25	3. Gross profit. Subtract line 2 from line 1c	3	-XXXXXXXXXXXXXX
26	4. Ordinary income or loss from other partnerships, estates and trusts (attach statement)	4	-XXXXXXXXXXXXXX
27	5. Net farm profit or loss (from U.S. Form 1040, Schedule F)	5	-XXXXXXXXXXXXXX
28	6. Net gain or loss (from U.S. Form 4797, Part II, I line 17; attach U.S. Form 4797)	6	-XXXXXXXXXXXXXX
29	7. Other income or loss (attach statement)	7	-XXXXXXXXXXXXXX
30	8. Total income or loss. Combine lines 3 through 7	8	-XXXXXXXXXXXXXX

Deductions. From U.S. Form 1065

32	9. Salaries and wages (other than to partners, less employment credits)	9	XXXXXXXXXXXXXX
33	10. Guaranteed payments to partners	10	XXXXXXXXXXXXXX
34	11. Repairs and maintenance	11	XXXXXXXXXXXXXX
35	12. Bad debts	12	XXXXXXXXXXXXXX
36	13. Rent	13	XXXXXXXXXXXXXX
37	14. Taxes and licenses	14	XXXXXXXXXXXXXX
38	15. Interest	15	XXXXXXXXXXXXXX
39	16a. Depreciation (from U.S. Form 4562)	16a	XXXXXXXXXXXXXX
40	b. Depreciation reported on U.S. Form 1125-A and elsewhere on return	16b	XXXXXXXXXXXXXX
41	c. Total. Subtract line 16b from line 16a	16c	XXXXXXXXXXXXXX
42	17. Depletion (do not deduct oil and gas depletion)	17	XXXXXXXXXXXXXX
43	18. Retirement plans, etc.	18	XXXXXXXXXXXXXX
44	19. Employee benefit programs	19	XXXXXXXXXXXXXX
45	20. Energy efficient commercial buildings deduction (enclose U.S. Form 7205)	20	XXXXXXXXXXXXXX
46	21. Other deductions (attach statement)	21	XXXXXXXXXXXXXX
47	22. Total deductions. Add lines 9 through 21 (do not include lines 16a and 16b)	22	XXXXXXXXXXXXXX
48	23. Ordinary business income or loss. Subtract line 22 from line 8	23	-XXXXXXXXXXXXXX

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Massachusetts Partnership Return of Income

FEDERALIDNUM

PARTNERSHIPNAMEXXXXXXXXXXXXXXXXXXXX FEDERALIDNO

Cost of Goods Sold. From U.S. Form 1125-A

24.	Inventory at beginning of year	24	XXXXXXXXXXXXXX
25.	Purchases less cost of items withdrawn for personal use	25	XXXXXXXXXXXXXX
26.	Cost of labor	26	XXXXXXXXXXXXXX
27.	Additional Section 263A costs (attach statement)	27	XXXXXXXXXXXXXX
28.	Other costs (attach statement)	28	XXXXXXXXXXXXXX
29.	Total. Add lines 24 through 28	29	XXXXXXXXXXXXXX
30.	Inventory at end of year	30	XXXXXXXXXXXXXX
31.	Cost of goods sold. Subtract line 30 from line 29	31	XXXXXXXXXXXXXX

Other Information. From U.S. Form 1065, Schedule B

32.	Type of entity filing this return (check one):	X	Domestic general partnership	X	Domestic limited partnership	X	Domestic limited liability company	X	Domestic limited liability partnership	X	Foreign partnership	X	REIT	X	Other	XXXXXXXXXXXXXXXXXXXXXX
33.	Fill in if at any time during the tax year, any partner in the partnership was a disregarded entity, a partnership (including an entity treated as a partnership), a trust, an S corporation, an estate (other than an estate of a deceased partner) or a nominee or similar person															X
34.	Fill in if this partnership is a publicly traded partnership as defined in Section 469(k)(2)															X
35.	Fill in if during the tax year, the partnership had any debt that was cancelled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt															X
36.	Fill in if the partnership is making, or had previously made (and not revoked), a Section 754 election															X
37.	Fill in if the partnership made for this tax year an optional basis adjustment under Section 743(b) or 734(b)															X
38.	Fill in if during the current or prior tax year, the partnership engaged in a like-kind exchange or distributed any property received in a like-kind exchange, or contributed such property to another entity (other than entities wholly-owned by the partnership throughout the tax year)															X

Partners' Distributive Share Items. From U.S. Form 1065, Schedule K

Income or Loss

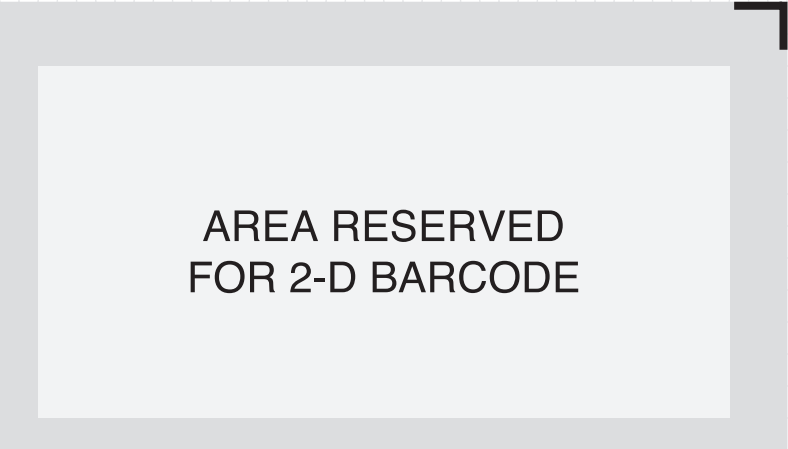
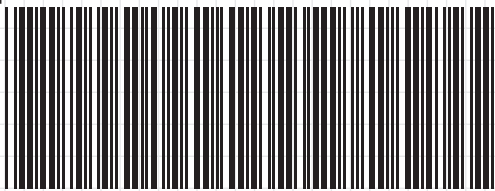
39.	Ordinary business income or loss	39	-XXXXXXXXXXXXXX
40.	Net rental real estate income or loss (from U.S. Form 8825)	40	-XXXXXXXXXXXXXX
41a.	Other gross rental income or loss	41a	-XXXXXXXXXXXXXX
41b.	Expenses from other rental activities (attach statement)	41b	XXXXXXXXXXXXXX
41c.	Other net rental income or loss. Subtract line 41b from line 41a	41c	-XXXXXXXXXXXXXX
42.	Guaranteed payments	42	XXXXXXXXXXXXXX
43.	Interest income	43	XXXXXXXXXXXXXX
44a.	Ordinary dividends	44a	XXXXXXXXXXXXXX
44b.	Qualified dividends	44b	XXXXXXXXXXXXXX
45.	Royalties	45	XXXXXXXXXXXXXX
46.	Net short-term capital gain or loss (from U.S. Form 1065, Schedule D)	46	-XXXXXXXXXXXXXX

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Massachusetts Partnership Return of Income

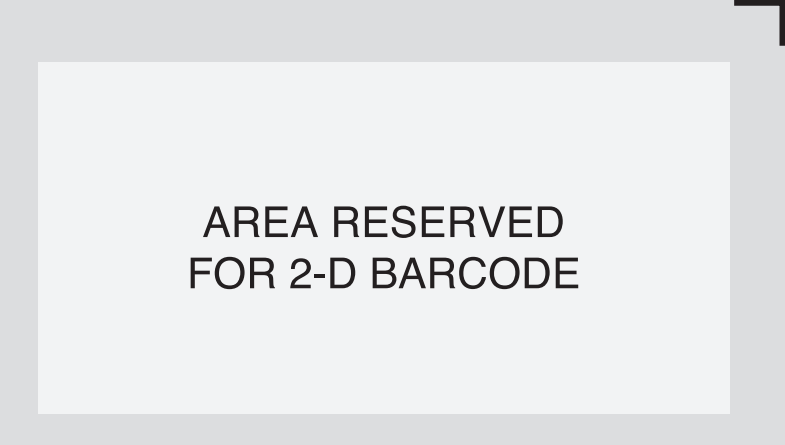
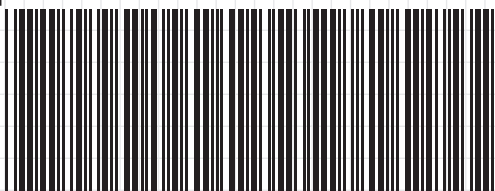
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AREA RESERVED
FOR 2-D BARCODE

47a.	Net long-term capital gain or loss (from U.S. Form 1065, Schedule D)						47a	-XXXXXXXXXXXXXX
b.	Collectibles (28%) gain or loss						47b	XXXXXXXXXXXXXX
c.	Unrecaptured Section 1250 gain (attach statement)						47c	XXXXXXXXXXXXXX
48.	Net Section 1231 gain or loss (from U.S. Form 4797)						48	-XXXXXXXXXXXXXX
49.	Other income or loss (see instructions). Type	XX					49	-XXXXXXXXXXXXXX
Deductions								
50.	Section 179 deduction (from U.S. Form 4562)						50	XXXXXXXXXXXXXX
51a.	Contributions						51a	XXXXXXXXXXXXXX
b.	Investment interest expense						51b	XXXXXXXXXXXXXX
c.	Section 59(e)(2) expenditures. Type	XX					51c	XXXXXXXXXXXXXX
d.	Other deductions (see instructions). Type	XX					51d	XXXXXXXXXXXXXX
Other Information								
52a.	Tax-exempt interest income						52a	XXXXXXXXXXXXXX
b.	Other tax-exempt income						52b	XXXXXXXXXXXXXX
c.	Nondeductible expenses						52c	XXXXXXXXXXXXXX
53a.	Distributions of cash and marketable securities						53a	XXXXXXXXXXXXXX
b.	Distributions of other property						53b	XXXXXXXXXXXXXX
54a.	Investment income						54a	XXXXXXXXXXXXXX
b.	Investment expenses						54b	XXXXXXXXXXXXXX
c.	Other items and amounts (attach statement)						54c	XXXXXXXXXXXXXX
Analysis of Net Income or Loss								
55.	Net income or loss. Combine U.S. Form 1065, Schedule K, lines 1 through 11. From the result, subtract the sum of U.S. Form 1065, Schedule K, lines 12 through 13e, and 21						55	-XXXXXXXXXXXXXX
56.	Analysis by partner type		Individual	Individual	Partnership	Exempt	Nominee/	
		Corporate	(active)	(passive)		organization	other	
a.	General partners	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX
b.	Limited partners	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

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Massachusetts Partnership Return of Income

FEDERALIDNUM

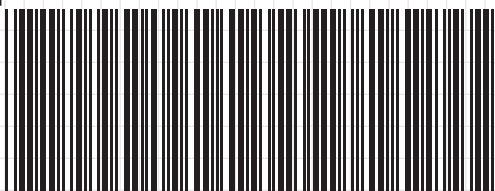
AREA RESERVED FOR 2-D BARCODE

Balance Sheets Per Books. From U.S. Form 1065, Schedule L

Assets	Beginning of tax year		End of tax year	
	a	b	c	d
57. Cash		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
58a. Trade notes and accounts receivable	XXXXXXXXXXXXXX		XXXXXXXXXXXXXX	
58b. Less allowance for bad debts	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX
59. Inventories		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
60. U.S. government obligations		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
61. Federally tax-exempt securities		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
62. Other current assets		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
63a. Loans to partners (or persons related to partners)		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
63b. Mortgage and real estate loans		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
64. Other investments		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
65a. Buildings and other depreciable assets	XXXXXXXXXXXXXX		XXXXXXXXXXXXXX	
65b. Less accumulated depreciation	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX
66a. Depletable assets	XXXXXXXXXXXXXX		XXXXXXXXXXXXXX	
66b. Less accumulated depletion	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX
67. Land (net of any amortization)		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
68a. Intangible assets (amortizable only)	XXXXXXXXXXXXXX		XXXXXXXXXXXXXX	
68b. Less accumulated amortization	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX
69. Other assets		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
70. Total assets		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
Liabilities and Capital	a	b	c	d
71. Accounts payable		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
72. Mortgages, notes, bonds payable in less than one year		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
73. Other current liabilities		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
74. All nonrecourse loans		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
75a. Loans from partners (or persons related to partners)		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
75b. Mortgages, notes, bonds payable in one year or more		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
76. Other liabilities		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
77. Partners' capital accounts		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX
78. Total liabilities and capital		XXXXXXXXXXXXXX		XXXXXXXXXXXXXX

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Massachusetts Partnership Return of Income

FEDERALIDNUM

AREA RESERVED FOR 2-D BARCODE

Reconciliation of Income or Loss Per Books With Income or Loss Per Return

From U.S. Form 1065, Schedule M-1. Note: If filing U.S. Form 1065, Schedule M-3, you still must complete this section.

Table with 3 columns: Line number, Description, and Value. Rows 79-87. Values are mostly green X's.

Analysis of Partners' Capital Accounts. From U.S. Form 1065, Schedule M-2

Table with 3 columns: Line number, Description, and Value. Rows 88-96. Values are mostly green X's.

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