

UPPER-TIER PASS-THROUGH ENTITY TAX CREDIT ALLOCATION



➤ Attach to Form N-20 or Form N-35

SCHPTEU_I 2023A 01 VID01

Check if: Supplement to Part II Only

Name as shown on tax return	Federal Employer I.D. No. (FEIN)
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Part I PTE TAX CREDIT RECEIVED FROM ELECTING PTE OR LOWER-TIER PTE INFORMATION

Electing PTE or Lower-Tier PTE Name	FEIN
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1. Total PTE tax credit amount received from the electing PTE or lower-tier PTE	1	
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Part II SCHEDULE OF QUALIFIED MEMBERS

1. Total number of your qualified members reported on this form	1	
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2. Total PTE tax credit amount for all qualified members reported on this form	2	
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A	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit	A	
B	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit	B	
C	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit	C	
D	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit	D	
E	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit	E	
F	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit	F	
G	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit	G	
H	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit	H	



SCHPTEU_I 2023A 02 VID01

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Part II SCHEDULE OF QUALIFIED MEMBERS - continued

I	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit.....	I	
J	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit.....	J	
K	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit.....	K	
L	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit.....	L	
M	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit.....	M	
N	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit.....	N	
O	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit.....	O	
P	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit.....	P	
Q	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit.....	Q	
R	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit.....	R	
S	Qualified Member Name	<input type="checkbox"/> FEIN	
		<input type="checkbox"/> SSN	
	Distributive share of the PTE tax credit.....	S	