FIRST NAME M.I. LAST NAME

SOCIAL SECURITY NUMBER									

You, or your spouse if married filing jointly, must be at least 65 years of age before January 1, 2018 to qualify for this credit. Also, you must file as single, married filing jointly or head of household to qualify for this credit. If married filing separately, you do not qualify for this credit.

Sch	hedule CB Circuit Breaker Credit. Enclose with Form 1 o	r Form 1-NR/PY. Do not cut or se	parate these schedules.	2017
		T OFFICE/FOREIGN COUNTRY	STATE ZIP + 4	
1	Note: If you moved during the year, see reverse. Renter (if you received ar		bsidy, or you rent from	l
2		nuary 1, 2017. If over \$747,00	00,	
	INCOME CALCULATION			
3	Massachusetts adjusted gross income (from line 20 of Schedule CB, I	ine 3 worksheet on reverse)	3	00
4	Total Social Security benefits (see instructions)		4	00
5	Pensions/annuities/IRA/Keogh distributions not taxed on your Massa	chusetts tax return	5	00
6	Miscellaneous income, including cash public assistance		6	00
7	Massachusetts total income. Add lines 3 through 6			00
8				00
9	Qualifying income. Subtract line 8 from line 7	ngle ," and line 9 is greater tha	an \$57,000 ; or you are	
	CREDIT CALCULATION. If you filled in "Homeowner" in line 1, complete	lines 10–17; if "Renter," skip to	line 18.	
10	Real estate taxes paid in calendar year 2017 for your principal residen	ce (see instructions)	10	00
11	Adjustments to real estate taxes (from line 4 of Schedule CB, line 11 v	vorksheet on reverse)	11	00
12	Subtract line 11 from line 10		12	00
13	Enter 50% (.50) of water and sewer use charges paid in 2017		13	00
14	Add lines 12 and 13		14	00
15	Income threshold. Multiply line 9 by 10% (.10)			00
16	Subtract line 15 from line 14. If line 15 is equal to or greater than line	14, you do not qualify for this	credit 16	00
17	Enter the lesser of line 16 or \$1,080 here and on Form 1, line 43 or Fo	orm 1-NR/PY, line 47	▶ 17	00
18			÷ 4 = 18	00
10	Landlord's name and address			0 0
19				00
20	Subtract line 19 from line 18. If line 19 is equal to or greater than line	18, you do not qualify for this	s credit 20	, , , , , , , , , , , , , , , , , , , ,
21	Enter the lesser of line 20 or \$1,080 here and on Form 1, line 43 or Fo	orm 1-NR/PY, line 47	▶ 21	00

Schedule CB Worksheets

Schedule CB, Line 3 — Massachusetts Income Worksheet

Part 1. Complete only if you only have 5.1% income reported on Form 1, line 10 or Form 1-NR/PY, line 12 or partnership, trust or S corporation income not reported on Form 1 or Form 1-NR/PY. Otherwise, enter "0" on line 6 and go to Part 2.

1. Enter your total 5.1% income from Form 1, line 10 or Form 1-NR/PY, line 12. Not less than "0"*
2. Enter the total of Schedule Y, lines 1 through 10 and line 18
3. Subtract line 2 from line 1. Not less than "0"
4. Enter total Massachusetts bank interest or the interest exemption amount, whichever is smaller, from Form 1, line 5a or line 5b or Form 1-NR/PY, line 7a or line 7b
5. Enter any income from a partnership, trust or S corporation not reported on Form 1 or Form 1-NR/PY
Note: If Form 1, line 10 or Form 1-NR/PY, line 12 is a loss, do not complete line 4 above. Instead, combine Form 1, line 10 or Form 1-NR/PY, line 12 with the smaller amount of total Massachusetts bank interest or the interest exemption amount. Enter the result in line 4 above, unless the result is a loss. If the result is a loss, enter "0."
6. Add lines 3 through 5

Part 2. Complete only if you have interest income (including tax-exempt interest) other than from Massachusetts banks, dividend income, short-term capital gains, long-term gains on collectibles and installment sales. Otherwise, enter "0" on line 11 and go to Part 3.

7. Enter the amount from Schedule B, line 9. If there is no entry
in Schedule B, line 9, enter the amount from Form 1, line 20
or Form 1-NR/PY, line 24
8. Enter the amount from Schedule B, line 6
9. Add lines 7 and 8
10. Enter the amount from Schedule B, line 15
11. Add lines 9 and 10

Part 3. Complete only if you have long-term capital gains or capital gain distributions. Otherwise, enter "0" on line 18 and go to Part 4.

12. Enter any gains (not including any losses) included in U.S. Schedule D,
lines 8a and 8b, col. h
13. Enter any gains (not including any losses) included in U.S. Schedule D,
line 9, col. h
14. Enter any gains (not including any losses) included in U.S. Schedule D,
line 10, col. h
15. Enter any gains (not including any losses) included in U.S. Schedule D,
line 11, col. h
16. Enter any gains (not including any losses) included in U.S. Schedule D,
line 12, col. h
17. Enter any gains included in U.S. Schedule D, line 13, col. h. If U.S.
Schedule D not filed, enter the amount from U.S. Form 1040, line 13 or
1040A, line 10
18. Add lines 12 through 17

Part 4. Massachusetts adjusted gross income.

19. Part-year residents, enter any income earned while a nonresident not included in lines 1 through 18 above. Not less than "0"....

20. Add lines 6, 11, 18 and 19. Enter the result here and on Schedule CB, line 3....

*Add back any Abandoned Building Renovation deduction claimed on Schedule(s) C and/or E.

Schedule CB, Line 11 — Adjustments to Real Estate Taxes Paid Worksheet

1. Enter the amount of any real estate tax abatement, including senior work program, or exemption received in 2017. Do not exclude amounts if they were already reflected on your tax bill and you did not pay them	
2. Enter any interest amount paid due to late real estate tax payments in 2017	
3. Enter the amount of any betterment or special assessment paid in 2017.	
4. Add lines 1 through 3. Enter result here and on Schedule CB, line 11	

Note: If you moved during the year you may have to complete separate computations for each residence that would qualify for the credit. On Schedule CB you should complete separate computations for each residence for lines 10 through 14 and/or line 18. The income threshold (line 15 or 19) should be subtracted from the total of these computations to determine if you qualify for the credit.