



Name:  
Federal  
Identification  
No.:

[Redacted Name and Federal Identification Number fields]

\*20941P3\*

Period Covered: 01 01 2020 - 12 31 2020

**List of Exempt Members - File with Form 941P- ME**

	13. Partner/Shareholder Name (Last, First, MI.)	14. Social Security Number (EIN if other than an individual)	15. Check Here if EIN	16. Distributive Share %	17. Participating in Composite Return
a.				. %	
b.				. %	
c.				. %	
d.				. %	
e.				. %	
f.				. %	
g.				. %	
h.				. %	
i.				. %	
j.				. %	
k.				. %	
l.				. %	
m.				. %	
n.				. %	
o.				. %	
p.				. %	
q.				. %	
r.				. %	