

**James Associates
401 Highland Ave
Somerville, MA 02144
(617) 625-4939
jamesassociates@verizon.net**

May 12, 2021

AJ EAGLE HILL, LLC
200 FALCON ST., UNIT 2
BOSTON, MA 02128

Dear Client,

We have prepared and enclosed your 2020 Form 1065, U.S. Return of Partnership Income for AJ EAGLE HILL, LLC for the tax year ending December 31, 2020.

The return was prepared from information furnished to us. Please review to ensure there are no omissions or misstatements of material facts.

Your 2020 Form 1065, U.S. Return of Partnership Income for AJ EAGLE HILL, LLC will be electronically filed.

No payment is due with this return.

Enclosed is the 2020 Form 3, Partnership Return of Income for AJ EAGLE HILL, LLC .

Your 2020 Form 3, Partnership Return of Income for AJ EAGLE HILL, LLC will be electronically filed.

No payment is due with this return.

We appreciate this opportunity to serve you. If you have any questions, please contact us.

Sincerely,

CHARLES SAPOCHETTI

Form 1065		U.S. Return of Partnership Income		OMB No. 1545-0123	
Department of the Treasury Internal Revenue Service		For calendar year 2020, or tax year beginning _____, 2020, ending _____, 20_____.		2020	
		Go to www.irs.gov/Form1065 for instructions and the latest information.			
A Principal business activity RENTAL REAL ESTATE		Name of partnership AJ EAGLE HILL, LLC		D Employer identification number 81-3022477	
B Principal product or service RESIDENTIAL PROPERTY		Number, street, and room or suite no. If a P.O. box, see instructions. 200 FALCON ST., UNIT 2		E Date business started 06/22/2016	
C Business code number 531110		City or town, state or province, country, and ZIP or foreign postal code BOSTON MA 02128		F Total assets (see instructions) \$ 819,352.	
G Check applicable boxes: (1) <input type="checkbox"/> Initial return (2) <input type="checkbox"/> Final return (3) <input type="checkbox"/> Name change (4) <input type="checkbox"/> Address change (5) <input type="checkbox"/> Amended return					
H Check accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) _____					
I Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year _____ 2					
J Check if Schedules C and M-3 are attached _____ <input type="checkbox"/>					
K Check if partnership: (1) <input type="checkbox"/> Aggregated activities for section 465 at-risk purposes (2) <input type="checkbox"/> Grouped activities for section 469 passive activity purposes					
Caution: Include only trade or business income and expenses on lines 1a through 22 below. See instructions for more information.					
Income	1a Gross receipts or sales		1a		
	b Returns and allowances		1b		
	c Balance. Subtract line 1b from line 1a			1c	
	2 Cost of goods sold (attach Form 1125-A)			2	
	3 Gross profit. Subtract line 2 from line 1c			3	
	4 Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)			4	
	5 Net farm profit (loss) (attach Schedule F (Form 1040))			5	
	6 Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)			6	
Deductions (see instructions for limitations)	7 Other income (loss) (attach statement)			7	
	8 Total income (loss). Combine lines 3 through 7			8	
	9 Salaries and wages (other than to partners) (less employment credits)			9	
	10 Guaranteed payments to partners			10	
	11 Repairs and maintenance			11	
	12 Bad debts			12	
	13 Rent			13	
	14 Taxes and licenses			14	
	15 Interest (see instructions)			15	
	16a Depreciation (if required, attach Form 4562)		16a		
	b Less depreciation reported on Form 1125-A and elsewhere on return		16b		16c
Tax and Payment	17 Depletion (Do not deduct oil and gas depletion.)			17	
	18 Retirement plans, etc.			18	
	19 Employee benefit programs			19	
	20 Other deductions (attach statement)			20	
	21 Total deductions. Add the amounts shown in the far right column for lines 9 through 20			21	
	22 Ordinary business income (loss). Subtract line 21 from line 8			22	
	23 Interest due under the look-back method for completed long-term contracts (attach Form 8697)			23	
	24 Interest due under the look-back method for income forecast method (attach Form 8866)			24	
	25 BBA AAR imputed underpayment (see instructions)			25	
	26 Other taxes (see instructions)			26	
27 Total balance due. Add lines 23 through 26			27		
28 Payment (see instructions)			28		
29 Amount owed. If line 28 is smaller than line 27, enter amount owed			29		
30 Overpayment. If line 28 is larger than line 27, enter overpayment			30	0.	
Sign Here		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than partner or limited liability company member) is based on all information of which preparer has any knowledge.			
		Signature of partner or limited liability company member _____		Date _____	
Paid Preparer Use Only		Print/Type preparer's name CHARLES SAPOCHETTI		Preparer's signature _____	
		Firm's name James Associates		Check <input type="checkbox"/> if self-employed	
		Firm's address 401 Highland Ave Somerville, MA 02144		PTIN P00546193	
				Firm's EIN 04-3122045	
				Phone no. (617) 625-4939	
For Paperwork Reduction Act Notice, see separate instructions.					
BAA					
Form 1065 (2020)					

Schedule B Other Information

1 What type of entity is filing this return? Check the applicable box:	Yes	No
a <input type="checkbox"/> Domestic general partnership		
b <input type="checkbox"/> Domestic limited partnership		
c <input checked="" type="checkbox"/> Domestic limited liability company		
d <input type="checkbox"/> Domestic limited liability partnership		
e <input type="checkbox"/> Foreign partnership		
f <input type="checkbox"/> Other r		
2 At the end of the tax year:		
a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If Yes , attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership		x
b Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If Yes , attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership	x	
3 At the end of the tax year, did the partnership:		
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If Yes , complete (i) through (iv) below		x
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If Yes , complete (i) through (v) below		x
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity
4 Does the partnership satisfy all four of the following conditions?	Yes	No
a The partnership's total receipts for the tax year were less than \$250,000.		
b The partnership's total assets at the end of the tax year were less than \$1 million.		
c Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.		
d The partnership is not filing and is not required to file Schedule M-3 If Yes , the partnership is not required to complete Schedules L, M-1, and M-2; item F on page 1 of Form 1065; or item L on Schedule K-1.	x	
5 Is this partnership a publicly traded partnership, as defined in section 469(k)(2)?		x
6 During the tax year, did the partnership have any debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?		x
7 Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?		x
8 At any time during calendar year 2020, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If Yes , enter the name of the foreign country r		x
9 At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If Yes , the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions		x
10a Is the partnership making, or had it previously made (and not revoked), a section 754 election? See instructions for details regarding a section 754 election.		x
b Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If Yes , attach a statement showing the computation and allocation of the basis adjustment. See instructions		x

Schedule B Other Information (continued)

	Yes	No
c Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If Yes , attach a statement showing the computation and allocation of the basis adjustment. See instructions		X
11 Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) <input type="checkbox"/>		
12 At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		X
13 If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect To Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See instructions r		
14 Does the partnership have any foreign partners? If Yes , enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership r		X
15 Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return r		
16a Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions		X
b If Yes , did you or will you file required Form(s) 1099?		
17 Enter the number of Forms 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations, attached to this return r		
18 Enter the number of partners that are foreign governments under section 892 r		
19 During the partnership's tax year, did the partnership make any payments that would require it to file Form 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)?		X
20 Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938		X
21 Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)?		X
22 During the tax year, did the partnership pay or accrue any interest or royalty for which one or more partners are not allowed a deduction under section 267A? See instructions		X
If Yes , enter the total amount of the disallowed deductions r \$		
23 Did the partnership have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions		X
24 Does the partnership satisfy one or more of the following? See instructions		X
a The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expense.		
b The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the partnership has business interest.		
c The partnership is a tax shelter (see instructions) and the partnership has business interest expense. If Yes , attach any, complete and attach Form 8990.		
25 Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions. If Yes , the partnership must complete Schedule B-2 (Form 1065). Enter the total from Schedule B-2, Part III, line 3 r		X
If No , complete Designation of Partnership Representative below.		

Designation of Partnership Representative (see instructions)

Enter below the information for the partnership representative (PR) for the tax year covered by this return.

Name of PR **r** FRASER R ALLAN

U.S. address of PR r 200 FALCON ST UNIT 2 EAST BOSTON MA 02128	U.S. phone number of PR r (978) 394-2481
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If the PR is an entity, name of the designated individual for the PR **r**

U.S. address of designated individual r	U.S. phone number of designated individual r
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26 Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund?		X
If Yes , enter the amount from Form 8996, line 16 r \$		
27 Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership r		
28 At any time during the tax year, were there any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8?		X
29 Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties constituting a trade or business of your partnership, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than 50% (for example, the partners held more than 50% of the stock of the foreign corporation)? If Yes , list the ownership percentage by vote and by value. See instructions.		
Percentage:	By Vote	By Value
		X

Schedule K Partners' Distributions		Distributive Share Items		Total amount	
Income (Loss)	1	Ordinary business income (loss) (page 1, line 22)		1	
	2	Net rental real estate income (loss) (attach Form 8825)		2	-10,411.
	3a	Other gross rental income (loss)	3a		
	b	Expenses from other rental activities (attach statement)	3b		
	c	Other net rental income (loss). Subtract line 3b from line 3a		3c	
	4	Guaranteed payments: a Services 4a b Capital 4b			
	c	Total. Add lines 4a and 4b		4c	
	5	Interest income		5	
	6	Dividends and dividend equivalents: a Ordinary dividends b Qualified dividends 6b c Dividend equivalents 6c			
	7	Royalties		7	
	8	Net short-term capital gain (loss) (attach Schedule D (Form 1065))		8	
Income (Loss)	9a	Net long-term capital gain (loss) (attach Schedule D (Form 1065))		9a	
	b	Collectibles (28%) gain (loss)	9b		
	c	Unrecaptured section 1250 gain (attach statement)	9c		
	10	Net section 1231 gain (loss) (attach Form 4797)		10	
	11	Other income (loss) (see instructions) Type r		11	
Deductions	12	Section 179 deduction (attach Form 4562)		12	
	13a	Contributions		13a	
	b	Investment interest expense		13b	
	c	Section 59(e)(2) expenditures: (1) Type r (2) Amount r		13c(2)	
	d	Other deductions (see instructions) Type r		13d	
Self-Employment	14a	Net earnings (loss) from self-employment		14a	
	b	Gross farming or fishing income		14b	
	c	Gross nonfarm income		14c	
Credits	15a	Low-income housing credit (section 42(j)(5))		15a	
	b	Low-income housing credit (other)		15b	
	c	Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)		15c	
	d	Other rental real estate credits (see instructions) Type r		15d	
	e	Other rental credits (see instructions) Type r		15e	
	f	Other credits (see instructions) Type r		15f	
Foreign Transactions	16a	Name of country or U.S. possession r			
	b	Gross income from all sources		16b	
	c	Gross income sourced at partner level		16c	
		Foreign gross income sourced at partnership level			
	d	Reserved for future use r e Foreign branch category r		16e	
	f	Passive category r g General category r h Other (attach statement) r		16h	
		Deductions allocated and apportioned at partner level			
	i	Interest expense r j Other r		16j	
		Deductions allocated and apportioned at partnership level to foreign source income			
	k	Reserved for future use r l Foreign branch category r		16l	
	m	Passive category r n General category r o Other (attach statement) r		16o	
	p	Total foreign taxes (check one): r Paid <input type="checkbox"/> Accrued <input type="checkbox"/>		16p	
q	Reduction in taxes available for credit (attach statement)		16q		
	r	Other foreign tax information (attach statement)			
Alternative Minimum Tax (AMT) Items	17a	Post-1986 depreciation adjustment		17a	1.
	b	Adjusted gain or loss		17b	
	c	Depletion (other than oil and gas)		17c	
	d	Oil, gas, and geothermal properties Gross income		17d	
	e	Oil, gas, and geothermal properties Deductions		17e	
	f	Other AMT items (attach statement)		17f	
Other Information	18a	Tax-exempt interest income		18a	
	b	Other tax-exempt income		18b	
	c	Nondeductible expenses		18c	
	19a	Distributions of cash and marketable securities		19a	
	b	Distributions of other property		19b	
	20a	Investment income		20a	
	b	Investment expenses		20b	
	c	Other items and amounts (attach statement) ** SEC 199A INFO: SEE STMT A			

Analysis of Net Income (Loss)

1 Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13d, and 16p						1	-10,411.
2 Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other	
a General partners							
b Limited partners		-10,411.					

Schedule L Balance Sheets per Books

		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		21,725.		19,915.
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities				
6	Other current assets (attach statement)				
7a	Loans to partners (or persons related to partners)				
b	Mortgage and real estate loans				
8	Other investments (attach statement)				
9a	Buildings and other depreciable assets	638,934.		638,934.	
b	Less accumulated depreciation	74,654.	564,280.	97,961.	540,973.
10a	Depletable assets				
b	Less accumulated depletion				
11	Land (net of any amortization)		252,150.		252,150.
12a	Intangible assets (amortizable only)	6,660.		6,660.	
b	Less accumulated amortization	74.	6,586.	346.	6,314.
13	Other assets (attach statement) Ln 13 Stmt		2,886.		0.
14	Total assets		847,627.		819,352.
Liabilities and Capital					
15	Accounts payable				
16	Mortgages, notes, bonds payable in less than 1 year				
17	Other current liabilities (attach statement)				
18	All nonrecourse loans				
19a	Loans from partners (or persons related to partners)				
b	Mortgages, notes, bonds payable in 1 year or more		1,050,322.		1,032,458.
20	Other liabilities (attach statement)				
21	Partners' capital accounts		-202,695.		-213,106.
22	Total liabilities and capital		847,627.		819,352.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return**Note:** The partnership may be required to file Schedule M-3. See instructions.

1	Net income (loss) per books	-10,411.	6	Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2	Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):		a	Tax-exempt interest \$	
3	Guaranteed payments (other than health insurance)		7	Deductions included on Schedule K, lines 1 through 13d, and 16p, not charged against book income this year (itemize):	
4	Expenses recorded on books this year not included on Schedule K, lines 1 through 13d, and 16p (itemize):		a	Depreciation \$	
a	Depreciation \$		8	Add lines 6 and 7	
b	Travel and entertainment \$		9	Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5	-10,411.
5	Add lines 1 through 4	-10,411.			

Schedule M-2 Analysis of Partners' Capital Accounts

1	Balance at beginning of year	-202,695.	6	Distributions: a Cash	
2	Capital contributed: a Cash		b	Property	
	b Property		7	Other decreases (itemize):	
3	Net income (loss) per books	-10,411.	8	Add lines 6 and 7	
4	Other increases (itemize):		9	Balance at end of year. Subtract line 8 from line 5	-213,106.
5	Add lines 1 through 4	-213,106.			

**Rental Real Estate Income and Expenses of a
Partnership or an S Corporation**

Attach to Form 1065 or Form 1120S.
Go to www.irs.gov/Form8825 for the latest information.

OMB No. 1545-0123

Name AJ EAGLE HILL, LLC	Employer identification number 81-3022477
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1	Show the type and address of each property. For each rental real estate property listed, report the number of days rented at fair rental value and days with personal use. See instructions. See page 2 to list additional properties.			
	Physical address of each property (street, city, state, ZIP code)	Type of property (see page 2 for list)	Fair Rental Days	Personal Use Days
A	254 SARATOGA STREET EAST BOSTON, MA 02128	2	365	0
B	154 FALCON STREET EAST BOSTON, MA 02128	2	365	0
C				
D				

		Properties							
		A		B		C		D	
2	Gross rents	2	60,875		29,300				
Rental Real Estate Expenses									
3	Advertising	3							
4	Auto and travel	4							
5	Cleaning and maintenance . .	5	25		25				
6	Commissions	6							
7	Insurance	7	5,780						
8	Legal and other professional fees	8	675		675				
9	Interest (see instructions) . .	9	25,250		15,112				
10	Repairs	10	3,725		9,560				
11	Taxes	11	7,145		2,944				
12	Utilities	12	2,067						
13	Wages and salaries	13							
14	Depreciation (see instructions)	14	14,611		8,696				
15	Other (list) ^r Amortization	15	117		155				
	LLC FEE		520						
	SUPPLIES				1,104				
	CONDO FEE				2,400				
16	Total expenses for each property. Add lines 3 through 15	16	59,915		40,671				
17	Income or (loss) from each property. Subtract line 16 from line 2	17	960		-11,371				
18a	Total gross rents. Add gross rents from line 2, columns A through H	18a					90,175		
18b	Total expenses. Add total expenses from line 16, columns A through H	18b					(100,586)		
19	Net gain (loss) from Form 4797, Part II, line 17, from the disposition of property from rental real estate activities	19							
20a	Net income (loss) from rental real estate activities from partnerships, estates, and trusts in which this partnership or S corporation is a partner or beneficiary (from Schedule K-1)	20a							
b	Identify below the partnerships, estates, or trusts from which net income (loss) is shown on line 20a. Attach a schedule if more space is needed.								
	(1) Name			(2) Employer identification number					
	_____			_____					
	_____			_____					
21	Net rental real estate income (loss). Combine lines 18a through 20a. Enter the result here and on: Form 1065 or 1120S , Schedule K, line 2	21					-10,411		

1	Show the type and address of each property. For each rental real estate property listed, report the number of days rented at fair rental value and days with personal use. See instructions.			
	Physical address of each property (street, city, state, ZIP code)	Type of property (see below for list)	Fair Rental Days	Personal Use Days
E				
F				
G				
H				

Rental Real Estate Income		Properties							
		E		F		G		H	
2	Gross rents	2							
Rental Real Estate Expenses									
3	Advertising	3							
4	Auto and travel	4							
5	Cleaning and maintenance	5							
6	Commissions	6							
7	Insurance	7							
8	Legal and other professional fees	8							
9	Interest (see instructions)	9							
10	Repairs	10							
11	Taxes	11							
12	Utilities	12							
13	Wages and salaries	13							
14	Depreciation (see instructions)	14							
15	Other (list) ^r	15							
16	Total expenses for each property. Add lines 3 through 15	16							
17	Income or (loss) from each property. Subtract line 16 from line 2	17							

Allowable Codes for Type of Property

- ☒ 1 Single Family Residence
☒ 2 Multi-Family Residence
☒ 3 Vacation or Short-Term Rental
☒ 4 Commercial
☒ 5 Land
☒ 6 Royalties
☒ 7 Self-Rental
☒ 8 Other (include description with the code on Form 8825 or on a separate statement)

☐ Final K-1☐ Amended K-1**Schedule K-1
(Form 1065)**Department of the Treasury
Internal Revenue Service

2020

For calendar year 2020, or tax year

beginning / / 2020 ending / / **Partner's Share of Income, Deductions,
Credits, etc.**

See separate instructions.

Part I Information About the Partnership**A** Partnership's employer identification number
81-3022477**B** Partnership's name, address, city, state, and ZIP code
AJ EAGLE HILL, LLC
200 FALCON ST., UNIT 2
BOSTON, MA 02128**C** IRS Center where partnership filed return KANSAS CITY, MO**D** ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)
010-76-5295**F** Name, address, city, state, and ZIP code for partner entered in E. See instructions.
JOHN JAMIESON
25 SOMERSET AVE #1
WINTHROP MA 02152**G** ☒ General partner or LLC member-manager ☐ Limited partner or other LLC member**H1** ☒ Domestic partner ☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:TIN Name **I1** What type of entity is this partner? INDIVIDUAL**I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital (see instructions):

Beginning

Ending

Profit 50.00000 % 50.00000 %Loss 50.00000 % 50.00000 %Capital 50.00000 % 50.00000 %Check if decrease is due to sale or exchange of partnership interest ☐**K** Partner's share of liabilities:

Beginning

Ending

Nonrecourse \$ \$Qualified nonrecourse
financing 525,161. \$ 516,229. \$Recourse \$ \$☐ Check this box if Item K includes liability amounts from lower tier partnerships.**L Partner's Capital Account Analysis**Beginning capital account \$ -93,476.Capital contributed during the year \$ Current year net income (loss) \$ -5,205.Other increase (decrease) (attach explanation) \$ Withdrawals & distributions \$ ()Ending capital account \$ -98,681.**M** Did the partner contribute property with a built-in gain or loss?☐ Yes ☒ No If "Yes," attach statement. See instructions.**N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)**Beginning \$ Ending \$ **Part III Partner's Share of Current Year Income,
Deductions, Credits, and Other Items**

1	Ordinary business income (loss)	15	Credits
2	Net rental real estate income (loss) -5,205.		
3	Other net rental income (loss)	16	Foreign transactions
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital		
4c	Total guaranteed payments		
5	Interest income		
6a	Ordinary dividends		
6b	Qualified dividends		
6c	Dividend equivalents	17	Alternative minimum tax (AMT) items
7	Royalties	A	0.
8	Net short-term capital gain (loss)		
9a	Net long-term capital gain (loss)	18	Tax-exempt income and nondeductible expenses
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain		
10	Net section 1231 gain (loss)		
11	Other income (loss)	19	Distributions
12	Section 179 deduction	20	Other information
13	Other deductions	Z * STMT	
14	Self-employment earnings (loss)		
21	<input type="checkbox"/> More than one activity for at-risk purposes*		
22	<input type="checkbox"/> More than one activity for passive activity purposes*		

For IRS Use Only

*See attached statement for additional information.

Additional information from your Schedule K-1: Partner's Share of Income, Deductions, Credits, etc. (JOHN JAMIESON)

Schedule K-1: Partner's Share of Income, Deductions, Credits, etc. (JOHN JAMIESON)

Supplemental Information

Continuation Statement

Description	Amount
Item L. Partner's Capital Account Analysis:	
Beginning capital account is on the Tax Basis	

Schedule K-1: Partner's Share of Income, Deductions, Credits, etc. (JOHN JAMIESON)

Form 8825 Rental Inc/Loss Details for Reporting Purposes

Continuation Statement

Description	Amount
BUILDING	
Property type: 2 Multi-Family Res	480.
BUILDING #2	
Property type: 2 Multi-Family Res	-5,685.
Total	-5,205.

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Partnership's name: AJ EAGLE HILL, LLC		Partnership's EIN: 81-3022477	
Partner's name: JOHN JAMIESON		Partner's identifying no: 010-76-5295	
Partner's share of:	BUILDING	BUILDING #2	
	<input type="checkbox"/> \$(\$	<input type="checkbox"/> \$(\$	<input type="checkbox"/> \$(\$
	<input type="checkbox"/> " x×äÖ×ÑäÖÖ	<input type="checkbox"/> " x×äÖ×ÑäÖÖ	<input type="checkbox"/> " x×äÖ×ÑäÖÖ
	<input type="checkbox"/> " ' (" "	<input type="checkbox"/> " ' (" "	<input type="checkbox"/> " ' (" "
QBI or qualified PTP items subject to partner-specific determinations:			
	# äÖüÑäe ÖaaüÖaa üÖSY Ö' üBaa Ä		
	&ÖpaNüüüÖSY Ö' üBaa Ä	480.	-5,685.
	&BeNüäe üÖSY Ö' üBaa Ä		
	' ÖÖHüB' "×NüB' üBaa Ä		
	# äÖÖaüÖSY Ö' üBaa Ä		
	' ÖÖHüB' ÖÖÖaÖaüBpÄ		
	# äÖÖaÖÖÖaÖaüBpÄ		
+ 'ç N×Öa			
) " £' BÖa ä NÜÖÖÖ a aBä ÖaäÄ		199,902.	119,565.
' ÖÖHüB' " ÖÖäÖÖpÖaÄ			

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Partnership's name:		Partnership's EIN:	
Partner's name:		Partner's identifying no:	
Partner's share of:			
	<input type="checkbox"/> \$(\$	<input type="checkbox"/> \$(\$	<input type="checkbox"/> \$(\$
	<input type="checkbox"/> " x×äÖ×ÑäÖÖ	<input type="checkbox"/> " x×äÖ×ÑäÖÖ	<input type="checkbox"/> " x×äÖ×ÑäÖÖ
	<input type="checkbox"/> " ' (" "	<input type="checkbox"/> " ' (" "	<input type="checkbox"/> " ' (" "
QBI or qualified PTP items subject to partner-specific determinations:			
	# äÖüÑäe ÖaaüÖaa üÖSY Ö' üBaa Ä		
	&ÖpaNüüüÖSY Ö' üBaa Ä		
	&BeNüäe üÖSY Ö' üBaa Ä		
	' ÖÖHüB' "×NüB' üBaa Ä		
	# äÖÖaüÖSY Ö' üBaa Ä		
	' ÖÖHüB' ÖÖÖaÖaüBpÄ		
	# äÖÖaÖÖÖaÖaüBpÄ Ä		
+ 'ç N×Öa			
) " £' BÖa ä NÜÖÖÖ a aBä ÖaäÄ			
' ÖÖHüB' " ÖÖäÖÖpÖaÄ			

☐ Final K-1☐ Amended K-1**Schedule K-1
(Form 1065)**Department of the Treasury
Internal Revenue Service

2020

For calendar year 2020, or tax year

beginning / / 2020 ending / / **Partner's Share of Income, Deductions,
Credits, etc.**

See separate instructions.

Part I Information About the Partnership**A** Partnership's employer identification number
81-3022477**B** Partnership's name, address, city, state, and ZIP code
AJ EAGLE HILL, LLC
200 FALCON ST., UNIT 2
BOSTON, MA 02128**C** IRS Center where partnership filed return KANSAS CITY, MO**D** ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)
020-94-1825**F** Name, address, city, state, and ZIP code for partner entered in E. See instructions.
FRASER R ALLAN
200 FALCON ST UNIT 2
EAST BOSTON MA 02128**G** ☒ General partner or LLC member-manager ☐ Limited partner or other LLC member**H1** ☒ Domestic partner ☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:TIN Name **I1** What type of entity is this partner? INDIVIDUAL**I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital (see instructions):

Beginning

Ending

Profit 50.00000 % 50.00000 %Loss 50.00000 % 50.00000 %Capital 50.00000 % 50.00000 %Check if decrease is due to sale or exchange of partnership interest ☐**K** Partner's share of liabilities:

Beginning

Ending

Nonrecourse \$ \$Qualified nonrecourse
financing 525,161. \$ 516,229. \$Recourse \$ \$☐ Check this box if Item K includes liability amounts from lower tier partnerships.**L Partner's Capital Account Analysis**Beginning capital account \$ -109,219.Capital contributed during the year \$ Current year net income (loss) \$ -5,206.Other increase (decrease) (attach explanation) \$ Withdrawals & distributions \$ ()Ending capital account \$ -114,425.**M** Did the partner contribute property with a built-in gain or loss?☐ Yes ☒ No If "Yes," attach statement. See instructions.**N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)**Beginning \$ Ending \$ **Part III Partner's Share of Current Year Income,
Deductions, Credits, and Other Items**

1	Ordinary business income (loss)	15	Credits
2	Net rental real estate income (loss) -5,206.		
3	Other net rental income (loss)	16	Foreign transactions
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital		
4c	Total guaranteed payments		
5	Interest income		
6a	Ordinary dividends		
6b	Qualified dividends		
6c	Dividend equivalents	17	Alternative minimum tax (AMT) items
7	Royalties	A	1.
8	Net short-term capital gain (loss)		
9a	Net long-term capital gain (loss)	18	Tax-exempt income and nondeductible expenses
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain		
10	Net section 1231 gain (loss)		
11	Other income (loss)	19	Distributions
12	Section 179 deduction	20	Other information
13	Other deductions	Z * STMT	
14	Self-employment earnings (loss)		

21 ☐ More than one activity for at-risk purposes*22 ☐ More than one activity for passive activity purposes*

*See attached statement for additional information.

For IRS Use Only

Additional information from your Schedule K-1: Partner's Share of Income, Deductions, Credits, etc. (FRASER R ALLAN)**Schedule K-1: Partner's Share of Income, Deductions, Credits, etc. (FRASER R ALLAN)****Supplemental Information****Continuation Statement**

Description	Amount
Item L. Partner's Capital Account Analysis:	
Beginning capital account is on the Tax Basis	

Schedule K-1: Partner's Share of Income, Deductions, Credits, etc. (FRASER R ALLAN)**Form 8825 Rental Inc/Loss Details for Reporting Purposes****Continuation Statement**

Description	Amount
BUILDING	
Property type: 2 Multi-Family Res	480.
BUILDING #2	
Property type: 2 Multi-Family Res	-5,686.
Total	-5,206.

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Partnership's name: AJ EAGLE HILL, LLC		Partnership's EIN: 81-3022477	
Partner's name: FRASER R ALLAN		Partner's identifying no: 020-94-1825	
Partner's share of:	BUILDING	BUILDING #2	
	<input type="checkbox"/> \$(\$	<input type="checkbox"/> \$(\$	<input type="checkbox"/> \$(\$
	<input type="checkbox"/> " ××äÖ×ÑäÖÖ	<input type="checkbox"/> " ××äÖ×ÑäÖÖ	<input type="checkbox"/> " ××äÖ×ÑäÖÖ
	<input type="checkbox"/> " ' (" "	<input type="checkbox"/> " ' (" "	<input type="checkbox"/> " ' (" "
QBI or qualified PTP items subject to partner-specific determinations:			
	# äÖüÑäe ÖaaüÖaa üÖSY Ö üBaa Ä		
	&ÖpauüüÖSY Ö üBaa Ä	480.	-5,686.
	&Beñüäe üÖSY Ö üBaa Ä		
	' ÖÖüüüü' ×Nüü' üBaa Ä		
	# äÖÖaüüÖSY Ö üBaa Ä		
	' ÖÖüüüü' ÖÖÖaÖüüüüü		
	# äÖÖaÖÖÖaÖüüüüü		
+ 'ç N×Öä			
) " £' BÖä ä NÜÖÖÖÖ a äBä Öäeä		199,902.	119,566.
' ÖÖüüüü' " ÖÖäÖÖÖÖÖ			

' aNäÖY Öpä'' %" £\$Ñää ääBä×Ö' päre &ÖäBäü×

Partnership's name:		Partnership's EIN:	
Partner's name:		Partner's identifying no:	
Partner's share of:			
	<input type="checkbox"/> \$(\$	<input type="checkbox"/> \$(\$	<input type="checkbox"/> \$(\$
	<input type="checkbox"/> " ××äÖ×ÑäÖÖ	<input type="checkbox"/> " ××äÖ×ÑäÖÖ	<input type="checkbox"/> " ××äÖ×ÑäÖÖ
	<input type="checkbox"/> " ' (" "	<input type="checkbox"/> " ' (" "	<input type="checkbox"/> " ' (" "
QBI or qualified PTP items subject to partner-specific determinations:			
	# äÖüÑäe ÖaaüÖaa üÖSY Ö üBaa Ä		
	&ÖpauüüÖSY Ö üBaa Ä		
	&Beñüäe üÖSY Ö üBaa Ä		
	' ÖÖüüüü' ×Nüü' üBaa Ä		
	# äÖÖaüüÖSY Ö üBaa Ä		
	' ÖÖüüüü' ÖÖÖaÖüüüüü		
	# äÖÖaÖÖÖaÖüüüüü		
+ 'ç N×Öä			
) " £' BÖä ä NÜÖÖÖÖ a äBä Öäeä			
' ÖÖüüüü' " ÖÖäÖÖÖÖÖ			

**SCHEDULE B-1
(Form 1065)**(Rev. August 2019)
Department of the Treasury
Internal Revenue Service**Information on Partners Owning 50% or
More of the Partnership**

r Attach to Form 1065.

r Go to www.irs.gov/Form1065 for the latest information.

OMB No. 1545-0123

Name of partnership

AJ EAGLE HILL, LLC

Employer identification number (EIN)

81-3022477

Part I **Entities Owning 50% or More of the Partnership** (Form 1065, Schedule B, Question 2a (Question 3a for 2009 through 2017))

Complete columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, tax-exempt organization, or any foreign government that owns, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership (see instructions).

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital

Part II **Individuals or Estates Owning 50% or More of the Partnership** (Form 1065, Schedule B, Question 2b (Question 3b for 2009 through 2017))

Complete columns (i) through (iv) below for any individual or estate that owns, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership (see instructions).

(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Maximum Percentage Owned in Profit, Loss, or Capital
FRASER ALLAN	020-94-1825	US	50.0000
JOHN JAMIESON	010-76-5295	US	50.0000

Department of the Treasury
Internal Revenue Service

ERO must obtain and retain completed Form 8879-PE.
Go to www.irs.gov/Form8879PE for the latest information.

2020

Name of partnership

AJ EAGLE HILL, LLC

Employer identification number

81-3022477

Part I Tax Return Information (Whole dollars only)

1	Gross receipts or sales less returns and allowances (Form 1065, line 1c)	1	
2	Gross profit (Form 1065, line 3)	2	
3	Ordinary business income (loss) (Form 1065, line 22)	3	
4	Net rental real estate income (loss) (Form 1065, Schedule K, line 2)	4	-10,411.
5	Other net rental income (loss) (Form 1065, Schedule K, line 3c)	5	

Part II Declaration and Signature Authorization of Partner or Member
(Be sure to get a copy of the partnership return.)

Under penalties of perjury, I declare that I am a partner or member of the above partnership and that I have examined a copy of the partnership's 2020 electronic return of partnership income and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of the partnership's electronic return of partnership income. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the partnership's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission and (b) the reason for any delay in processing the return. I have selected a personal identification number (PIN) as my signature for the partnership's electronic return of partnership income.

Partner or Member's PIN: check one box only

- ☐ I authorize _____ to enter my PIN

--	--	--	--	--

 as my signature
ERO firm name Don't enter all zeros
on the partnership's 2020 electronically filed return of partnership income.
- ☒ As a partner or member of the partnership, I will enter my PIN as my signature on the partnership's 2020 electronically filed return of partnership income.

Partner or member's signature

Title **PARTNER**

Date

Part III Certification and Authentication**ERO's EFIN/PIN.** Enter your six-digit EFIN followed by your five-digit self-selected PIN.

0	4	0	1	2	8	0	1	7	4	2
---	---	---	---	---	---	---	---	---	---	---

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return of partnership income for the partnership indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 3112**, IRS e-file Application and Participation, and **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

Date **05/12/2021**

ERO Must Retain This Form See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see instructions. **BAA**Form **8879-PE** (2020)

QuickZoom to Other Copy _____

Page 1

Partnership Special Allocation Information

(See tax help for more detail)

Note: Special allocation codes for QBI items below will default to codes used for similar item classes for regular tax purposes. To change the default behavior, you may select a different option on the Partnership Information Worksheet. ▶ _____

- ☒ Copy special allocation codes for items that are specially allocated on Schedule K (default).
☐ Remove default special allocations and allocate items according to profit, loss, or ownership % (based on selection made on the Partnership Information Worksheet).
☐ Remove default special allocations and leave these items blank on K-1 Stmt A (manual entry).

Partnership's Name: AJ EAGLE HILL, LLCPartnership's EIN: 81-3022477**BUILDING**
☐ PTP
☐ Aggregated
☐ SSTB
BUILDING #2
☐ PTP
☐ Aggregated
☐ SSTB

☐ PTP
☐ Aggregated
☐ SSTB

Partner's share of:

QBI or qualified PTP items subject to shareholder-specific determinations:

Special Allocation	S A			
Ordinary business inc (loss) .	_____	_____	_____	_____
Rental income (loss)	_____	960.	-11,371.	_____
Royalty income (loss)	_____	_____	_____	_____
Section 1231 gain (loss) . . .	_____	_____	_____	_____
Other income (loss)	_____	_____	_____	_____
Section 179 deduction	_____	_____	_____	_____
Other deductions	_____	_____	_____	_____
W-2 wages	_____	_____	_____	_____
UBIA of qualified property . . .	_____	399,804.	239,131.	_____
* See tax help for W2 wage or UBIA Special Allocations				
Section 199A dividends	_____	_____		

Partnership's Name: _____		Partnership's EIN: _____	
	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB
Partner's share of: QBI or qualified PTP items subject to shareholder-specific determinations:			
Special Allocation	S A		
Ordinary business inc (loss) .	_____	_____	_____
Rental income (loss)	_____	_____	_____
Royalty income (loss)	_____	_____	_____
Section 1231 gain (loss) . . .	_____	_____	_____
Other income (loss)	_____	_____	_____
Section 179 deduction	_____	_____	_____
Other deductions	_____	_____	_____
W-2 wages	_____	_____	_____
UBIA of qualified property . . .	_____	_____	_____
<i>* See tax help for W2 wage or UBIA Special Allocations</i>			
Section 199A dividends	_____	_____	

**Form 1065
Schedule L**

Other Assets

2020

Name		Employer ID Number
AJ EAGLE HILL, LLC		81-3022477
Other Current Assets:	Beginning of tax year	End of tax year
Total to Form 1065, Schedule L, line 6 ▶		
Other Investments:	Beginning of tax year	End of tax year
Total to Form 1065, Schedule L, line 8 ▶		
Other Assets:	Beginning of tax year	End of tax year
REAL ESTATE ESCROW ACCOUNTS	2,886.	0.
Total to Form 1065, Schedule L, line 13 ▶	2,886.	0.

199A Worksheet by Activity

2020

G Keep for your records

Partnership's name <u>AJ EAGLE HILL, LLC</u>		Partnership's EIN <u>81-3022477</u>	
Note: See 199A Summary for Special Allocation information QuickZoom to 199A Summary ▶ _____			
Aggregation Code: _____		Trade or Business: <u>BUILDING</u> EIN: <u>81-3022477</u>	
		Is this activity a qualified trade/business? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Specified Service Trade or Business? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
QBI or qualified PTP items subject to partner-specific determinations:			
1 a Ordinary business income (loss) 1 a b Adjustments b c Adjusted ordinary business income (loss) 1 c		1 c	
2 a Rental income (loss) 2 a b Adjustments b c Adjusted rental income (loss) 2 c	960.	2 c	960.
3 a Royalty income (loss) 3 a b Adjustments b c Adjusted royalty income (loss) 3 c		3 c	
4 a Section 1231 gain (loss) 4 a b Adjustments b c Adjusted section 1231 gain (loss) 4 c		4 c	
5 Other income (loss) 5		5	
6 a Section 179 deduction 6 a b Adjustments b c Adjusted section 179 deduction 6 c		6 c	
7 Other deductions 7		7	
8 a W-2 wages 8 a b Adjustments b c Adjusted W-2 Wages 8 c		8 c	
9 a UBIA of qualified property 9 a b Adjustments b c Adjusted UBIA of qualified property 9 c	399,804.	9 c	399,804.

Section 179 Carryover Detail for this Activity

	Section 179 Regular Tax	Section 179 QBI
Tentative Section 179 deduction from current year assets		
Part I: Prior Year Carryovers by Year and Category		
A Before 2018		0 .
B 2018		
C 2019		
Total prior year carryovers to this year		

	Section 179 Regular Tax	Section 179 QBI
Part II: 179 Deduction Allowed by Year and Category		
Total 179 deduction allowed for this activity in current year		
A Amount allowed from 2020		
B Amount allowed from before 2018		
C Amount allowed from 2018		
D Amount allowed from 2019		

	Section 179 Regular Tax	Section 179 QBI
Part III: Total Carryforward to 2021 by Year and Category		
A Carryforward from 2020		
B Carryforward from before 2018		
C Carryforward from 2018		
D Carryforward from 2019		
Total carryforward to next year		

199A Worksheet by Activity

2020

G Keep for your records

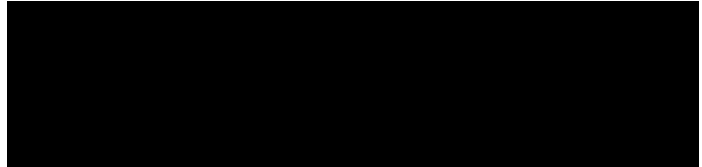
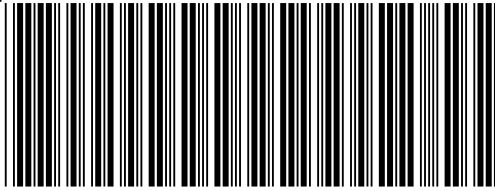
Partnership's name <u>AJ EAGLE HILL, LLC</u>		Partnership's EIN <u>81-3022477</u>	
Note: See 199A Summary for Special Allocation information			
QuickZoom to 199A Summary ▶ _____			
Aggregation Code: _____	Trade or Business: <u>BUILDING #2</u> EIN: <u>81-3022477</u>		
Is this activity a qualified trade/business? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Specified Service Trade or Business? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
QBI or qualified PTP items subject to partner-specific determinations:			
1 a Ordinary business income (loss)	1 a		
b Adjustments	b		
c Adjusted ordinary business income (loss)		1 c	
2 a Rental income (loss)	2 a	-11,371.	
b Adjustments	b		
c Adjusted rental income (loss)		2 c	-11,371.
3 a Royalty income (loss)	3 a		
b Adjustments	b		
c Adjusted royalty income (loss)		3 c	
4 a Section 1231 gain (loss)	4 a		
b Adjustments	b		
c Adjusted section 1231 gain (loss)		4 c	
5 Other income (loss)		5	
6 a Section 179 deduction	6 a		
b Adjustments	b		
c Adjusted section 179 deduction		6 c	
7 Other deductions		7	
8 a W-2 wages	8 a		
b Adjustments	b		
c Adjusted W-2 Wages		8 c	
9 a UBIA of qualified property	9 a	239,131.	
b Adjustments	b		
c Adjusted UBIA of qualified property		9 c	239,131.

Section 179 Carryover Detail for this Activity

	Section 179 Regular Tax	Section 179 QBI
Tentative Section 179 deduction from current year assets		
Part I: Prior Year Carryovers by Year and Category		
A Before 2018		0.
B 2018		
C 2019		
Total prior year carryovers to this year		

	Section 179 Regular Tax	Section 179 QBI
Part II: 179 Deduction Allowed by Year and Category		
Total 179 deduction allowed for this activity in current year		
A Amount allowed from 2020		
B Amount allowed from before 2018		
C Amount allowed from 2018		
D Amount allowed from 2019		

	Section 179 Regular Tax	Section 179 QBI
Part III: Total Carryforward to 2021 by Year and Category		
A Carryforward from 2020		
B Carryforward from before 2018		
C Carryforward from 2018		
D Carryforward from 2019		
Total carryforward to next year		



2020 Form 3

MA20007011030

Massachusetts Partnership Return of Income

Year beginning 01012020 Ending 12312020

AJ EAGLE HILL, LLC 813022477
200 FALCON ST., UNIT 2 BOSTON MA 02128

- A. Principal business activity RENTAL REAL ESTATE
B. Principal product or service RESIDENTIAL PROPERTY
C. Business code number 531110 D. Date business started 06222016 E. Total assets 819352
F. Fill in if amended return
G. Reason for filing: Amended return due to federal change Technical termination Filing Schedule TDS Initial return
Final return Name change Common-trust fund Enclosing Schedule FCI
H. Accounting method: ☒ Cash ☐ Accrual ☐ Other
I. Number of Schedules 3K-1 enclosed 2
J. Fill in if you are a member of a lower-tier entity
K. Fill in if this partnership is an investment partnership as defined in the Pass-Through Entity Withholding Reg., 830 CMR 62B.2.2(2)
L. Fill in if this partnership elected out of the federal centralized partnership audit regime this tax year

Part 1. Massachusetts Information

1. Gross income (from worksheet in instructions).
Note: If line 1 is \$50,000 or greater you must file this form electronically 1 90175
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
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
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
6. Income apportionment percentage 6 1.000000

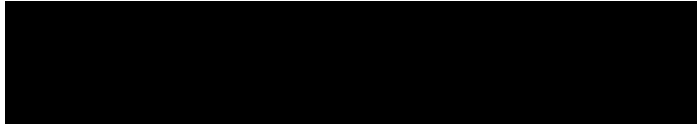
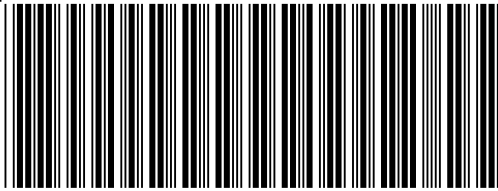
SIGN HERE. Under penalties of perjury, I declare that to the best of my knowledge and belief this return and enclosures are true, correct and complete.

Signature of appropriate officer	Date	Print paid preparer's name	Paid preparer's SSN or PTIN
	05122021	CHARLES SAPOCHETTI	P00546193
Title		Paid preparer's phone	Paid preparer's EIN
GENERAL PARTNER		6176254939	043122045

May the Department of Revenue discuss this return with the preparer shown here? Yes
Paid preparer's signature Date Check if self-employed
05122021

Name of designated tax matters partner	Identifying number of tax matters partner
FRASER R ALLAN	020941825

PRIVACY ACT NOTICE AVAILABLE UPON REQUEST



2020 Form 3, pg. 2

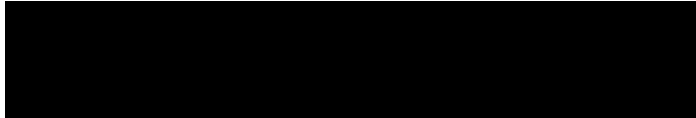
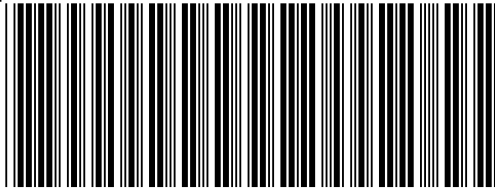
MA20007021030

Massachusetts Partnership Return of Income
813022477

7. Check if any partners in this partnership file as part of a nonresident composite income tax return 7
If Yes, enter Federal Identification number under which the composite return is filed
Number of partners included in composite return
8. Check if this partnership under audit by the IRS, or has it been audited in a prior year 8
9. Withholding amount 9
10. Payments made with composite return 10
11. Credit for amounts withheld by lower-tier entity(ies) 11
12. Payments made with a composite filing by lower-tier entity(ies) 12

Massachusetts Ordinary Income or Loss

13. Ordinary income or loss from U.S. Form 1065, line 22 13
14. Other income or loss from U.S. Form 1065, Schedule K, line 11 14
15. State, local and foreign income and unincorporated business taxes or excises 15
16. Subtotal. Add lines 13 through 15 16
17. Section 1231 gains or losses included in line 16 17
18. Subtotal 18
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 | Amount | |
| b. Line number | Amount | |
| | | Total adjustments 19 |
20. Massachusetts ordinary income or loss 20
21. Net income or loss from rental real estate activities from U.S. Form 1065, Schedule K, line 2 21 -10411
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 | 02 | Amount | -137 |
| b. Line number | | Amount | |
| | | | Total adjustments 22 |
23. Adjusted Massachusetts net income or loss from rental real estate activities 23 -10548
24. Net income or loss from other rental activities from U.S. Form 1065, Schedule K, line 3c 24
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 | Amount | |
| b. Line number | Amount | |
| | | Total adjustments 25 |
26. Adjusted Massachusetts net income or loss from rental activities 26



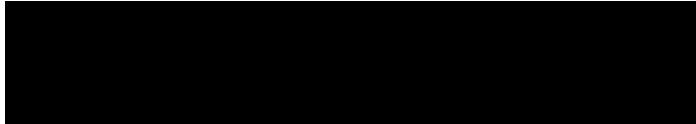
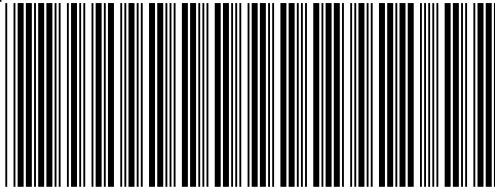
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Massachusetts Partnership Return of Income
813022477

27.	U.S. interest, dividend & royalty income, not including capital gains from U.S. Form 1065, Sch. K, lines 5, 6a & 7	27
28.	Interest on U.S. debt obligations included in line 27	28
29.	5.0% interest from Massachusetts banks included in line 27	29
30.	Interest (other than Massachusetts bank interest) and dividend income included in line 27	30
31.	Non-Massachusetts state and municipal bond interest	31
32.	Royalty income included in line 27	32
33.	Total short-term capital gains included in U.S. Form 1065, Schedule D, line 7	33
34.	Total short-term capital losses included in U.S. Form 1065, Schedule D, line 7	34
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
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
37.	Net long-term capital gain or loss from U.S. Form 1065, Schedule K, line 9a	37
38.	Long-term section 1231 gains or losses not included in line 37	38
39.	Long-term gains on collectibles and pre-1996 installment sales included in line 37	39
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 Amount	
	a. Line number Amount	

Total adjustments 40



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Massachusetts Partnership Return of Income
813022477

AJ EAGLE HILL, LLC

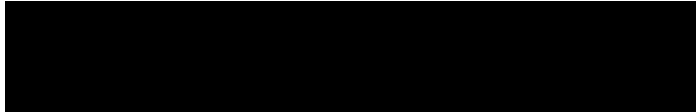
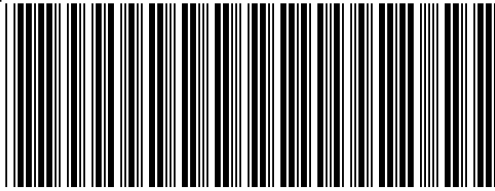
813022477

41. **Income Apportionment Schedule**
LOCATION STATE FACILITY TYPE

ACCEPTS REG. IN FILES IN
ORDERS STATE STATE

Apportionment Factors

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



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MA20007051030

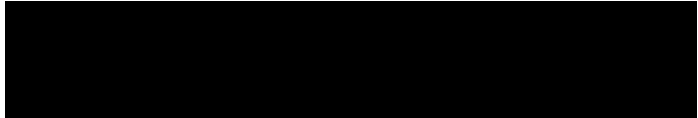
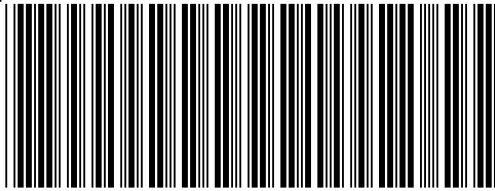
Massachusetts Partnership Return of Income
813022477

Partnership Credits

- | | |
|---|-----|
| 47. Credits available | |
| a. Taxes due to another jurisdiction (full-year and part-year residents only) | 47a |
| b. Other credits (from Schedule CMS) | 47b |
| 48. Credit recapture (from Schedule CRS) | 48 |

Miscellaneous Federal Information

- | | |
|--|----|
| 49. Gross receipts or sales (from Part 2, Federal Information, line 1a) | 49 |
| 50. Total income or loss (from Part 2, Federal Information, line 8) | 50 |
| 51. Bad debts (from Part 2, Federal Information, line 12) | 51 |
| 52. Interest (from Part 2, Federal Information, line 15) | 52 |
| 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 50b) | 54 |



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Massachusetts Partnership Return of Income
813022477

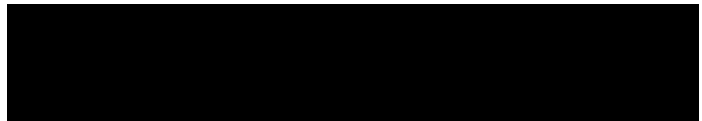
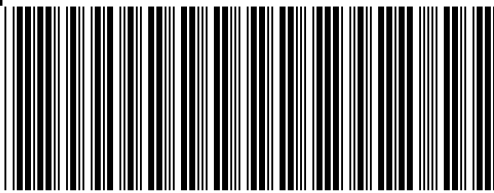
Part 2. Federal Information

Income. From U.S. Form 1065

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

Deductions. From U.S. Form 1065

9.	Salaries and wages (other than to partners, less employment credits)	9
10.	Guaranteed payments to partners	10
11.	Repairs and maintenance	11
12.	Bad debts	12
13.	Rent	13
14.	Taxes and licenses	14
15.	Interest	15
16a.	Depreciation (from U.S. Form 4562)	16a
b.	Depreciation reported on U.S. Form 1125-A and elsewhere on return	16b
c.	Total. Subtract line 16b from line 16a	16c
17.	Depletion (do not deduct oil and gas depletion)	17
18.	Retirement plans, etc.	18
19.	Employee benefit programs	19
20.	Other deductions (attach statement)	20
21.	Total deductions. Add lines 9 through 20 (do not include lines 16a and 16b)	21
22.	Ordinary business income or loss. Subtract line 21 from line 8	22



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Massachusetts Partnership Return of Income
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AJ EAGLE HILL, LLC

813022477

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

23. Inventory at beginning of year	23
24. Purchases less cost of items withdrawn for personal use	24
25. Cost of labor	25
26. Additional Section 263A costs (attach statement)	26
27. Other costs (attach statement)	27
28. Total. Add lines 23 through 27	28
29. Inventory at end of year	29
30. Cost of goods sold. Subtract line 29 from line 28	30

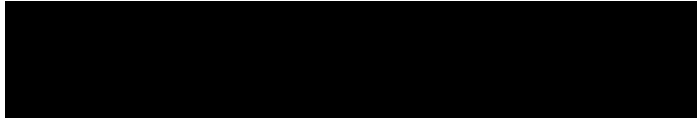
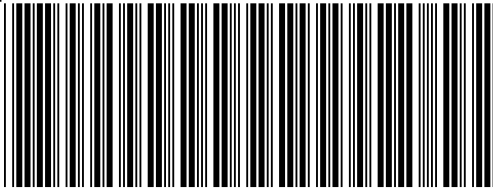
Other Information. From U.S. Form 1065, Schedule B

31. Type of entity filing this return (check one): Domestic general partnership Domestic limited partnership ☒ Domestic limited liability company Domestic limited liability partnership Foreign partnership REIT Other
32. 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
33. Fill in if this partnership is a publicly traded partnership as defined in Section 469(k)(2)
34. 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
35. Fill in if the partnership is making, or had previously made (and not revoked), a Section 754 election
36. Fill in if the partnership made for this tax year an optional basis adjustment under Section 743(b) or 734(b) Yes, attach a statement showing the computation and allocation of the basis adjustment.
37. 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)

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

Income or Loss

38. Ordinary business income or loss	38	
39. Net rental real estate income or loss (from U.S. Form 8825)	39	-10411
40a. Other gross rental income or loss	40a	
b. Expenses from other rental activities (attach statement)	40b	
c. Other net rental income or loss. Subtract line 40b from line 40a	40c	
41. Guaranteed payments	41	
42. Interest income	42	
43a. Ordinary dividends	43a	
b. Qualified dividends	43b	
44. Royalties	44	
45. Net short-term capital gain or loss (from U.S. Form 1065, Schedule D)	45	

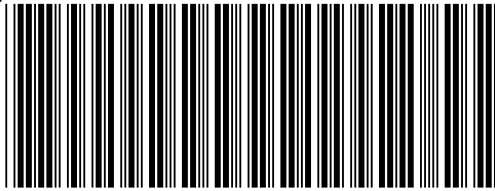


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MA20007081030

Massachusetts Partnership Return of Income
813022477

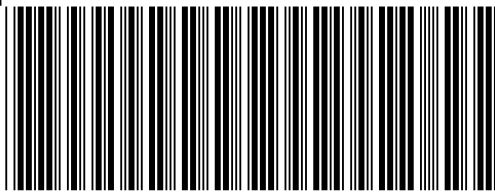
46a.	Net long-term capital gain or loss (from U.S. Form 1065, Schedule D)	46a					
b.	Collectibles (28%) gain or loss	46b					
c.	Unrecaptured Section 1250 gain (attach statement)	46c					
47.	Net Section 1231 gain or loss (from U.S. Form 4797)	47					
48.	Other income or loss (see instructions). Type	48					
Deductions							
49.	Section 179 deduction (from U.S. Form 4562)	49					
50a.	Contributions	50a					
b.	Investment interest expense	50b					
c.	Section 59(e)(2) expenditures. Type	50c					
d.	Other deductions (see instructions). Type	50d					
Other Information							
51a.	Tax-exempt interest income	51a					
b.	Other tax-exempt income	51b					
c.	Nondeductible expenses	51c					
52a.	Distributions of cash and marketable securities	52a					
b.	Distributions of other property	52b					
53a.	Investment income	53a					
b.	Investment expenses	53b					
c.	Other items and amounts (attach statement)	53c					
Analysis of Net Income or Loss							
54.	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 13d, and 16p					54	-10411
55.	Analysis by partner type	Corporate	Individual (active)	Individual (passive)	Partnership	Exempt organization	Nominee/ other
a.	General partners						
b.	Limited partners		-10411				

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Massachusetts Partnership Return of Income
813022477**Balance Sheets Per Books.** From U.S. Form 1065, Schedule L

Assets	Beginning of tax year		End of tax year	
	a	b	c	d
56. Cash		21725		19915
57a. Trade notes and accounts receivable				
57b. Less allowance for bad debts				
58. Inventories				
59. U.S. government obligations				
60. Federally tax-exempt securities				
61. Other current assets				
62a. Loans to partners (or persons related to partners)				
62b. Mortgage and real estate loans				
63. Other investments				
64a. Buildings and other depreciable assets	638934		638934	
64b. Less accumulated depreciation	74654	564280	97961	540973
65a. Depletable assets				
65b. Less accumulated depletion				
66. Land (net of any amortization)		252150		252150
67a. Intangible assets (amortizable only)	6660		6660	
67b. Less accumulated amortization	74	6586	346	6314
68. Other assets		2886		0
69. Total assets		847627		819352
Liabilities and Capital	a	b	c	d
70. Accounts payable				
71. Mortgages, notes, bonds payable in less than one year				
72. Other current liabilities				
73. All nonrecourse loans				
74a. Loans from partners (or persons related to partners)				
74b. Mortgages, notes, bonds payable in one year or more		1050322		1032458
75. Other liabilities				
76. Partners' capital accounts		-202695		-213106
77. Total liabilities and capital		847627		819352



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MA20007101030

Massachusetts Partnership Return of Income
813022477

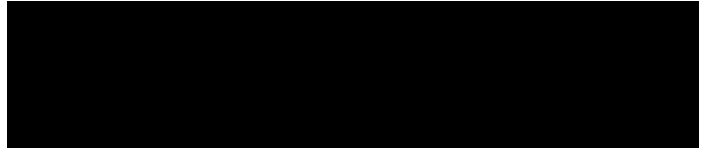
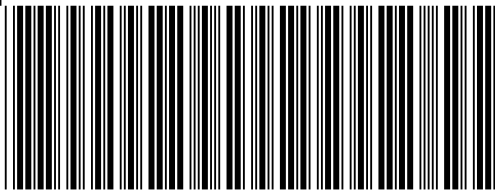
Reconciliation of Income or Loss Per Books With Income or Loss Per Return

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

78.	Net income or loss per books	78	-10411
79.	Income included in Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10 and 11, not recorded on books this year	79	
80.	Guaranteed payments (other than health insurance)	80	
81.	Expenses recorded on books this year not included in Schedule K, lines 1 through 13d and 16p	81	
81a.	Depreciation	81a	
81b.	Travel and entertainment	81b	
82.	Add lines 78 through 81 (do not include lines 81a and 81b)	82	-10411
83.	Income recorded on books this year not included in Schedule K, lines 1 through 11	83	
83a.	Federally tax-exempt interest	83a	
84.	Deductions included in Schedule K, lines 1 through 13d and 16p, not charged against book income this year	84	
84a.	Depreciation	84a	
85.	Add lines 83 and 84 (do not include lines 83a and 84a)	85	
86.	Income or loss	86	-10411

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

87.	Balance as of beginning of year	87	-202695
88a.	Capital contributed: cash	88a	
88b.	Capital contributed: property	88b	
89.	Net income or loss per books	89	-10411
90.	Other increases	90	
91.	Add lines 87 through 90	91	-213106
92a.	Distributions: cash	92a	
92b.	Distributions: property	92b	
93.	Other decreases	93	
94.	Add lines 92a, 92b and 93	94	
95.	Balance at end of year. Subtract line 94 from line 91	95	-213106



2020 Schedule 3K-1

MA203K1011030

Partnership Massachusetts Information

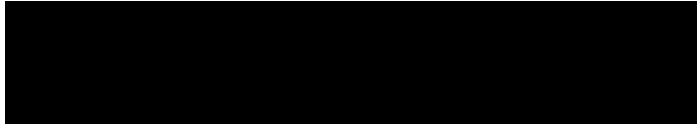
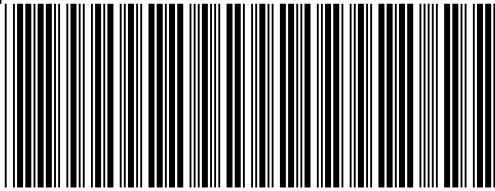
Year beginning 01012020 Ending 12312020

JOHN JAMIESON 010765295
25 SOMERSET AVE 1 WINTHROP MA 02152
AJ EAGLE HILL, LLC 813022477
200 FALCON ST UNIT 2 BOSTON MA 02128

- A. Type of entity ☒ Individual resident ☐ Individual nonresident ☐ Trust or estate
☐ S corporation ☐ Corporation ☐ Partnership or other PTE ☐ IRA ☐ Disregarded entity ☐ Exempt org
- B1. Type of partner ☒ General partner or LLC member/manager ☐ Limited partner or other member
- B2. Indicate partner status ☒ Domestic partner ☐ Foreign partner
- C. Type of form submission ☐ Final ☐ Amended return
- D. Fill in if there was a sale, transfer or liquidation of any part of this partnership interest during the tax year
- E. Fill in if the partnership participated in one or more installment sales transactions
- If Yes, indicate whether information has been communicated to the partner to calculate an addition to Massachusetts tax under M.G.L., ch. 62C, sec. 32A based on the following Internal Revenue Code (IRC) provisions (check all that apply) IRC 453A IRC 453(l)(2)(B)

Partnership Distributive Share

- | | |
|---|----|
| 1. Massachusetts ordinary income or loss | 1 |
| 2. Guaranteed payments to partners (deductible and capitalized) | 2 |
| 3. Separately stated deductions | 3 |
| 4. Combine lines 1 through 3 | 4 |
| 5. Credits available | |
| a. Taxes due to another jurisdiction (full-year and part-year residents only) | 5a |
| b. Lead Paint | 5b |
| c. Economic Opportunity Area | |
| Economic Development Incentive Program | 5c |
| d. Brownfields | 5d |
| e. Low-Income Housing | 5e |
| f. Historic Rehabilitation | 5f |
| g. Film Incentive | 5g |
| h. Medical Device | 5h |
| i. Employer Wellness Program | 5i |
| j. Farming and Fisheries | 5j |
| k. Certified Housing Development | 5k |
| l. Life Sciences | 5l |
| m. Veterans Hire | 5m |
| n. Low Income Housing Donation | 5n |



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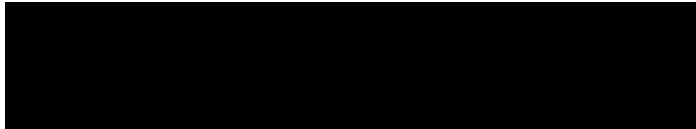
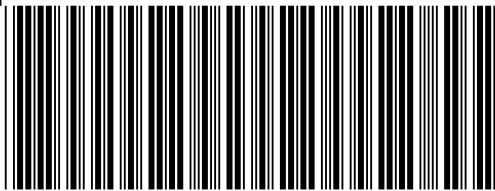
MA203K1021030

Partner Massachusetts Information
813022477

5.	o.	Refundable Film Credit	5o	
	p.	Refundable Dairy Credit	5p	
	q.	Refundable Conservation Tax Credit	5q	
	r.	Refundable Community Investment Tax Credit	5r	
	s.	Angel Investor Credit	5s	
	t.	Apprentice Credit	5t	
	u.	Vacant Storefront Credit	5u	
	v.	Total credits	5v	
6.		Credit recapture	6	
7.		Net income or loss from rental real estate activity	7	-5273
8.		Net income or loss from other rental activity	8	
9.		Interest from U.S. obligations	9	
10.		Interest (5.0%) from Massachusetts banks	10	
11.		Other interest and dividend income	11	
12.		Non-Massachusetts state and municipal bond interest	12	
13.		Royalty income	13	
14.		Short-term capital gains	14	
15.		Short-term capital losses	15	
16.		Gain on the sale, exchange or involuntary conversion of property used in a trade or business held for one year or less	16	
17.		Loss on the sale, exchange, or involuntary conversion of property used in a trade or business held for one year or less	17	
18.		Long-term capital gain or loss	18	
19.		Net gain or loss under Section 1231	19	
20.		Long-term gains on collectibles and pre-1996 installment sales	20	
21.		Differences and adjustments	21	

Corporate Partner Information

22.	State and municipal bond interest not included in U.S. net income	22
23.	Foreign, state or local income, franchise, excise or capital stock taxes deducted from U.S. net income	23
24.	Other adjustments, if any	24



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MA203K1031030

Partner's Massachusetts Information
813022477

Reconciliation of Partner's Capital Account

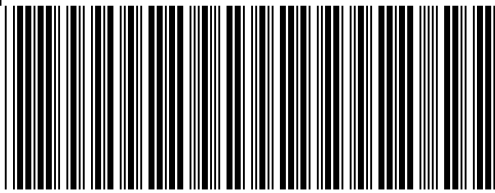
25. Balance at the beginning of the year	25	-93476
26. Massachusetts net income for the year	26	-5273
27. Entire net income for the year	27	-5205
28. Capital contributions	28	
29. Withdrawals	29	
30. Balance at end of year	30	-98681

Partner's Share of Profit, Loss and Capital

31. Percentage of profit	Beginning 0.50000	Ending 0.50000
32. Percentage of loss	Beginning 0.50000	Ending 0.50000
33. Percentage of capital	Beginning 0.50000	Ending 0.50000
34. Non-recourse liabilities	Ending	
35. Qualified non-recourse financing	Ending	516229
36. Recourse liabilities	Ending	

Pass-through Entity Payment and Credit Information

Declaration election code	Withholding	Composite	Member self-file	Exempt PTE	Insurance company
Non-profit	Exempt corporate limited partner				
37. Withholding amount					37
38. Payments made in a composite filing					38
39. Credit for amounts withheld by lower-tier entity(ies)					39
Payer ID number					
40. Payments made with a composite filing by lower-tier entity(ies)					40



2020 Schedule 3K-1

MA203K1011030

Partnership Massachusetts Information

Year beginning 01012020 Ending 12312020

FRASER R ALLAN 020941825
200 FALCON ST UNIT 2 EAST BOSTON MA 02128
AJ EAGLE HILL, LLC 813022477
200 FALCON ST UNIT 2 BOSTON MA 02128

A. Type of entity ☒ Individual resident ☐ Individual nonresident ☐ Trust or estate
☐ S corporation ☐ Corporation ☐ Partnership or other PTE ☐ IRA ☐ Disregarded entity ☐ Exempt org

B1. Type of partner ☒ General partner or LLC member/manager ☐ Limited partner or other member

B2. Indicate partner status ☒ Domestic partner ☐ Foreign partner

C. Type of form submission ☐ Final ☐ Amended return

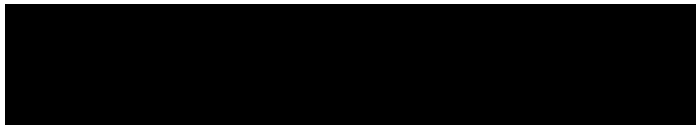
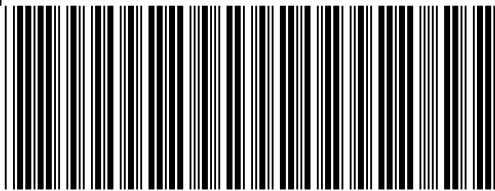
D. Fill in if there was a sale, transfer or liquidation of any part of this partnership interest during the tax year

E. Fill in if the partnership participated in one or more installment sales transactions

If Yes, indicate whether information has been communicated to the partner to calculate an addition to Massachusetts tax under M.G.L., ch. 62C, sec. 32A based on the following Internal Revenue Code (IRC) provisions (check all that apply) IRC 453A IRC 453(l)(2)(B)

Partnership Distributive Share

- | | |
|---|----|
| 1. Massachusetts ordinary income or loss | 1 |
| 2. Guaranteed payments to partners (deductible and capitalized) | 2 |
| 3. Separately stated deductions | 3 |
| 4. Combine lines 1 through 3 | 4 |
| 5. Credits available | |
| a. Taxes due to another jurisdiction (full-year and part-year residents only) | 5a |
| b. Lead Paint | 5b |
| c. Economic Opportunity Area | |
| Economic Development Incentive Program | 5c |
| d. Brownfields | 5d |
| e. Low-Income Housing | 5e |
| f. Historic Rehabilitation | 5f |
| g. Film Incentive | 5g |
| h. Medical Device | 5h |
| i. Employer Wellness Program | 5i |
| j. Farming and Fisheries | 5j |
| k. Certified Housing Development | 5k |
| l. Life Sciences | 5l |
| m. Veterans Hire | 5m |
| n. Low Income Housing Donation | 5n |



2020 Schedule 3K-1, pg. 2

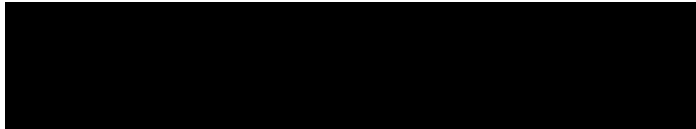
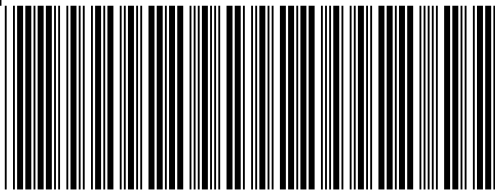
MA203K1021030

Partner Massachusetts Information
813022477

5.	o.	Refundable Film Credit	5o	
	p.	Refundable Dairy Credit	5p	
	q.	Refundable Conservation Tax Credit	5q	
	r.	Refundable Community Investment Tax Credit	5r	
	s.	Angel Investor Credit	5s	
	t.	Apprentice Credit	5t	
	u.	Vacant Storefront Credit	5u	
	v.	Total credits	5v	
6.		Credit recapture	6	
7.		Net income or loss from rental real estate activity	7	-5275
8.		Net income or loss from other rental activity	8	
9.		Interest from U.S. obligations	9	
10.		Interest (5.0%) from Massachusetts banks	10	
11.		Other interest and dividend income	11	
12.		Non-Massachusetts state and municipal bond interest	12	
13.		Royalty income	13	
14.		Short-term capital gains	14	
15.		Short-term capital losses	15	
16.		Gain on the sale, exchange or involuntary conversion of property used in a trade or business held for one year or less	16	
17.		Loss on the sale, exchange, or involuntary conversion of property used in a trade or business held for one year or less	17	
18.		Long-term capital gain or loss	18	
19.		Net gain or loss under Section 1231	19	
20.		Long-term gains on collectibles and pre-1996 installment sales	20	
21.		Differences and adjustments	21	

Corporate Partner Information

22.	State and municipal bond interest not included in U.S. net income	22
23.	Foreign, state or local income, franchise, excise or capital stock taxes deducted from U.S. net income	23
24.	Other adjustments, if any	24



2020 Schedule 3K-1, pg. 3

MA203K1031030

Partner 1 Massachusetts Information
813022477

Reconciliation of Partner's Capital Account

25. Balance at the beginning of the year	25	-109219
26. Massachusetts net income for the year	26	-5275
27. Entire net income for the year	27	-5206
28. Capital contributions	28	
29. Withdrawals	29	
30. Balance at end of year	30	-114425

Partner's Share of Profit, Loss and Capital

31. Percentage of profit	Beginning 0.50000	Ending 0.50000
32. Percentage of loss	Beginning 0.50000	Ending 0.50000
33. Percentage of capital	Beginning 0.50000	Ending 0.50000
34. Non-recourse liabilities	Ending	
35. Qualified non-recourse financing	Ending	516229
36. Recourse liabilities	Ending	

Pass-through Entity Payment and Credit Information

Declaration election code	Withholding	Composite	Member self-file	Exempt PTE	Insurance company
Non-profit	Exempt corporate limited partner				
37. Withholding amount					37
38. Payments made in a composite filing					38
39. Credit for amounts withheld by lower-tier entity(ies)					39
Payer ID number					
40. Payments made with a composite filing by lower-tier entity(ies)					40



Form M-8453P Partnership Tax Declaration for Electronic Filing

2020

Massachusetts

Department of

Revenue

Please print or type. Privacy Act Notice available upon request. For the year January 1 to December 31, 2020.

Partnership name	Federal Identification number		
AJ EAGLE HILL, LLC	81-3022477		
Mailing address	City/Town	State	Zip
200 FALCON ST., UNIT 2	BOSTON	MA	02128

Part 1. Partnership Return Information for Electronic Filing

1 Gross receipts or sales, less returns and allowances (from Form 1065, line 1c).	1	
2 Gross profit (from Form 1065, line 3).	2	
3 Ordinary income or loss from trade or business activities (from Form 1065, line 22).	3	
4 Net income or loss from rental real estate activities (from Form 1065, Schedule K, line 2).	4	-10,411.
5 Net income or loss from other rental activities (from Form 1065, Schedule K, line 3c).	5	

Part 2. Transmitter Information

Transmitter's name
INTUIT INC.

Part 3. Declaration and Signature of Taxpayer

Under pains and penalties of perjury, I declare that I have reviewed the information on my return with the information I have provided to my Electronic Return Originator and that the amounts above agree with the amounts shown on my 2020 Massachusetts return. To the best of my knowledge and belief this information is true, correct and complete. I consent that my return, including this declaration and accompanying schedules, forms and statements be sent to DOR by my Electronic Return Originator. I authorize DOR to inform my Electronic Return Originator and/or the transmitter when my electronic return has been accepted. In the event that it is rejected, I authorize DOR to identify the reasons for rejection so that the return can be corrected and retransmitted. If I have filed a balance due return, I understand that if DOR does not receive full and timely payment of my tax liability, I will remain liable for the tax liability and all applicable penalties and interest.

Your signature	Date
----------------	------

Part 4. Declaration and Signature of Electronic Return Originator (ERO)

I declare that I have reviewed the above taxpayer's return and that the entries on this M-8453P are complete and correct to the best of my knowledge. (Collectors are not responsible for reviewing the taxpayer's return; however, they must ensure that the M-8453P accurately reflects the data on the return.) I have obtained the taxpayer's signature before submitting this return to the Massachusetts Department of Revenue. I have provided the taxpayer with a copy of all forms and information filed with DOR. If I am also the paid preparer, under pains and penalties of perjury I declare that I have examined the above taxpayer's return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct and complete. I declare that I have verified the taxpayer's proof of account and it agrees with the name(s) shown on this form. This declaration of paid preparer (other than taxpayer) is based on all information of which the preparer has any knowledge. Original Forms M-8453P should not be sent to DOR, but must instead be retained by the ERO on the ERO's business premises for a period of three years from the date the return to which the M-8453P relates was filed.

ERO's signature and SSN or PTIN	Date	EIN	<input type="checkbox"/> Check if self-employed
	05/12/21	04-3122045	
Firm name (or yours, if self-employed) and address	City/Town	State	Zip
JAMES ASSOCIATES / 401 HIGHLAND AVE	SOMERVILLE	MA	02144
			<input type="checkbox"/> Check if also paid preparer

Part 5. Declaration and Signature of Paid Preparer (if other than ERO)

Under pains and penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct and complete. This declaration of paid preparer (other than taxpayer) is based on all information of which the preparer has any knowledge.

Paid preparer's signature and SSN or PTIN	Date	EIN	<input type="checkbox"/> Check if self-employed
P00546193	05/12/21	04-3122045	
Firm name (or yours, if self-employed) and address	City/Town	State	Zip
CHARLES SAPOCHETTI / 401 HIGHLAND AVE	SOMERVILLE	MA	02144

State Adjustments to Federal Depreciation Amounts

2020

Name as Shown on Return: AJ EAGLE HILL, LLC

EIN: 81-3022477

Main Activity	(A) State Depr Adj	(B) Other Adjustments	(C) Total Adjustment
	0.		0.
Form 8825	(A) State Depr Adj	(B) Other Adjustments	(C) Total Adj (Col. A + Col. B)
BUILDING	-137.		-137.
BUILDING #2	0.		0.
Total Form 8825 Depreciation Adjustment (Sum of Column C)			-137.

Schedule F	(A) State Depr Adj	(B) Other Adjustments	(C) Total Adj (Col. A + Col. B)
Total Schedule F Depreciation Adjustment (Sum of Column C)			

Farm Rental Income	(A) State Depr Adj	(B) Other Adjustments	(C) Total Adj (Col. A + Col. B)
Total Farm Rental Depreciation Adjustment (Sum of Column C)			

Total Depreciation Adjustment -137.

Section 179 Adjustment	(A) Adjustment Amount	(B) Other Adjustments	(C) Total Adj (Col. A + Col. B)

Sale of Assets (Includes recapture for Form 6252)

Description of Asset Sold	Date Acquired	Date Sold	Federal Accum Depreciation	State Accum Depreciation	Other Adj	Gain/Loss Adjustment

Form 6252 Current Year Installment Gain Adjustment

Description of Asset Sold	Date Acquired Sold	Current Yr Payment	Gross Profit Federal State	Gain Federal State	Other Adj	Gain/Loss Adjustment

Total Gain/Loss Adjustment