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Commonwealth of Massachusetts

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Department of Revenue

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# **2013 Tax Year Computer-Generated Payment Voucher and Extension Forms**

*(Form PV, Form M-4868, Form 2 PV, Form 355 PV, Form 355-7004)*

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## Change Log

10-24-2013: Standard annual changes to indicate forms are for tax year 2013

10-28-2013: Sample of 2013 Form2 payment voucher updated with 2013 information

You have three payment options –

1) Pay online at:

[www.mass.gov/dor/payonline](http://www.mass.gov/dor/payonline)

2) Schedule your payment at:

[www.mass.gov/dor/payonline](http://www.mass.gov/dor/payonline)

3) Or return the bottom portion of this voucher with check or money order payable to:

Commonwealth of Massachusetts

and mail to:

Massachusetts Department of Revenue  
PO Box 7002  
Boston, MA 02204

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**Form PV**

**Income Tax Payment Voucher – 2013**

**Massachusetts  
Department of Revenue**

Social Security number	Spouse's Social Security number	Year end date	Amount enclosed
			Check which form you filed: <input type="checkbox"/> Form 1 <input type="checkbox"/> Form 1-NR/PY <input type="checkbox"/> Nonresident Composite Return <input type="checkbox"/> Name/address changed since 2012

Pay online at [www.mass.gov/dor/payonline](http://www.mass.gov/dor/payonline). Or, return this voucher with check or money order payable to:  
**Commonwealth of Massachusetts, and mail to: Massachusetts Department of Revenue, PO Box 7002, Boston, MA 02204.**

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**Form M-4868**

**Application for Automatic Six-Month Extension — 2013**

**Massachusetts  
Department of Revenue**

Social Security number	Spouse's Social Security number	Period end date	Amount enclosed
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**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.

Your signature

Signature of paid preparer

Date

Employer Identification number of paid preparer

Social Security number or PTIN

You have three payment options –

1) Pay online at:

[www.mass.gov/dor/payonline](http://www.mass.gov/dor/payonline)

2) Schedule your payment at:

[www.mass.gov/dor/payonline](http://www.mass.gov/dor/payonline)

3) Or return the bottom portion of this voucher with check or money order payable to:

Commonwealth of Massachusetts

and mail to:

Massachusetts Department of Revenue  
PO Box 7018  
Boston, MA 02204

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**Form 2-PV**

**Fiduciary Tax Payment Voucher – 2013**

**Massachusetts  
Department of Revenue**

U.S. taxpayer number	Year end date	Amount enclosed
		<input type="checkbox"/> Name/address changed since 2012

Pay online at [www.mass.gov/dor/payonline](http://www.mass.gov/dor/payonline). Or, return this voucher with check or money order payable to:  
**Commonwealth of Massachusetts**, and mail to: **Massachusetts Department of Revenue, PO Box 7018, Boston, MA 02204.**

You have three payment options –

1) Pay online at:

[www.mass.gov/dor/payonline](http://www.mass.gov/dor/payonline)

2) Schedule your payment at:

[www.mass.gov/dor/payonline](http://www.mass.gov/dor/payonline)

3) Or return the bottom portion of this voucher with check or money order payable to:

Commonwealth of Massachusetts

and mail to:

Massachusetts Department of Revenue  
PO Box 7005  
Boston, MA 02204

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**Form 355-PV Massachusetts Corporate Tax Payment Voucher**

**2013**

Corporation name

Federal Identification number

Payment for the year ending:

MONTH / DAY / YEAR

Street address

Check appropriate box:

Domestic corporation (0167)

Foreign corporation (0168)

City/Town

State

Zip

Amount enclosed

\$

Check if name/address changed since 2012

STAPLE CHECK HERE

Pay online at [www.mass.gov/dor/payonline](http://www.mass.gov/dor/payonline). Or, return this voucher with check or money order payable to:  
**Commonwealth of Massachusetts**, and mail to: **Massachusetts Department of Revenue, PO Box 7005,  
Boston, MA 02204.**

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# Form 355-7004 Corporate Extension Worksheet

Massachusetts  
Department of  
Revenue

## Tentative Return

<b>1</b> Estimated amount of tax for the taxable year (must be at least minimum tax) . . . . .	<b>1</b>	
<b>2</b> Advance and/or estimated payments made (if any) . . . . .	<b>2</b>	
<b>3</b> Tax due with this application. Subtract line 2 from line 1. . . . .	<b>3</b>	

Payment in full of the tax due must be made with the extension request for it to be considered valid. If at least 50% of the tax due or the minimum tax (whichever is greater) for the taxable year is not paid, the extension is null and void. Penalties for a late return will be assessed from the original due date of the return.

## General Information

### Who May File Form 355-7004?

All domestic and foreign business, manufacturing or security corporations eligible to file Forms 355, 355U, 355S, 355SC or 355SBC may use this application to request either an automatic six-month extension of time to file their return or an extension of time to file for more than six-months. Taxpayers filing Form 355U must file this form electronically. Corporations that file corporate returns other than those listed, such as insurance companies, financial institutions, public utilities, urban redevelopment companies, etc., must use Form 355-7004 Misc. Form 355-7004 also acts as the required tentative return.

### When Should Form 355-7004 Be Filed?

This application must be filed on or before the 15th day of the third month after the close of the taxable year, calendar or fiscal.

### Must a Payment Be Submitted with This Form?

Yes. The full payment of tax reasonably estimated to be due must accompany this form. If at least 50% of the tax due or the minimum tax (whichever is greater) for the taxable year is not paid, the extension is null and void. If filing Form 355U, payments may be allocated to subsidiaries when Schedule CG is filed.

### Will Interest and Penalties Be Due?

An extension of time to file a corporation tax return **does not** extend the due date for payment of the tax. Interest will be charged on any tax not paid on or before the original due date. Any tax not paid within the extended period is subject to a penalty of 1% per month, up to a maximum of 25%, from the extended due date.

### How Long Is the Period of Extension?

An **automatic six-month extension** is granted upon the proper filing of this form. An **extension for a period longer than six-months** may be granted if good cause exists; it requires the written approval of the Commissioner before it becomes effective. The Commissioner may terminate this extension at any time by mailing a notice of termination to the corporation or to the person who requested the extension for the corporation. The notice will be mailed at least 10 days prior to the termination date designated in the notice.

### Who May Sign?

Form 355-7004 must be signed by the treasurer or assistant treasurer of the corporation or by a person authorized by the corporation to do so. An application signed by an unauthorized person will be considered null and void. If a return is filed after the original due date based on a void extension, interest and penalties will be assessed back to the original due date.

Keep this worksheet with your records. Do not submit it with Form 355-7004. Mail the completed application to: **Massachusetts Department of Revenue, PO Box 7025, Boston, MA 02204.**

**Note:** Under certain circumstances, if a payment is not required to be submitted with the extension request, the requirement to file the extension may be waived. For further information, see TIR 06-21.

Corporations with \$100,000 or more in receipts or sales must submit their extension request, as well as any accompanying payment, electronically. Also, any corporation making an extension payment of \$5,000 or more must make the payment using electronic means. For further information, see TIR 04-30.

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## Form 355-7004

## Application for Corporate Extension — 2013

Massachusetts  
Department of Revenue

Federal Identification number	Is the corporation incorporated in Massachusetts? <input type="checkbox"/> Yes <input type="checkbox"/> No	Period end date	Amount enclosed
Business name	Type of extension being applied for <input type="checkbox"/> a. Automatic six-month <input type="checkbox"/> b. Extension until:		
Mailing address	City/Town	State	Zip
<b>Sign here.</b> 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 officer or agent	Signature of paid preparer	Date	
Employer Identification number of paid preparer	Social Security number or PTIN of paid preparer		