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Form 2-PV Massachusetts Fiduciary Income Tax Payment Voucher

2012

STAPLE CHECK HERE	Name of estate or trust	U.S. taxpayer number
	Name of fiduciary Title	Payment for the year ending: MONTH / DAY / YEAR
	Mailing address of fiduciary	Amount enclosed \$
	City/Town State Zip	<input type="checkbox"/> Check if name/address changed since 2011

Pay online at 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.**

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