



Form PV Massachusetts Income Tax Payment Voucher

2016

Payment for period end date (mm/dd/yyyy)	Tax type 053	Voucher type 01	ID type 005	Vendor code 0001
Name of taxpayer	Social Security number			
Name of taxpayer's spouse	Social Security number of taxpayer's spouse			
Street address				
City/Town	State	Zip	Amount enclosed \$	
Phone	E-mail		Fill in if name/address changed since 2015 <input type="checkbox"/>	

STAPLE CHECK HERE

Pay online at mass.gov/masstaxconnect. Or, return this voucher with check or money order payable to: **Commonwealth of Massachusetts**. Mail to: **Massachusetts Department of Revenue, PO Box 7003, Boston, MA 02204**. Note: If your return was filed electronically, use **PO Box 7062**; if your return has a 2D barcode, use **PO Box 7002**.