

NAME OF ESTATE OR TRUST

ESTATE OR TRUST EMPLOYER IDENTIFICATION NUMBER

[illegible]

Pay in full. Write EIN on lower left corner of check and make payable to Commonwealth of Massachusetts. Mail to: **Mass. DOR, PO Box 7018, Boston, MA 02204.**

These amounts will affect your refund or tax due:

Interest 

Penalty						0	0
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M-2210F amt. 00

EX **encl.**
Form M-2210F

BE SURE TO SIGN RETURN ON PAGE 1