

FORM ST-11

Rev. 7/09



**Massachusetts Department of Revenue
Individual Use Tax Return**

Name _____ Social Security number _____

Address _____ State _____ Zip _____

Return is due with payment on or before April 15 for purchases made in the prior calendar year. Make check payable to the Commonwealth of Massachusetts. Mail to: **Massachusetts Department of Revenue, PO Box 7009, Boston, MA 02204.**

I declare under the penalties of perjury that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

Signature _____

Date _____

- 1.** Year purchases made **1**
- 2.** Total purchases from line 9 on reverse. **2**
- 3.** Use tax (6.25% of line 2). **3**
- 4.** Total credit for sales/use tax paid to other states or jurisdictions. From line 10 on reverse. **4**
- 5.** Balance. Subtract line 4 from line 3. Not less than "0" **5**
- 6.** Penalty. **6**
- 7.** Interest. **7**
- 8.** Total amount due. **8**

Date of purchase	Name of seller, city and state	Quantity and description of property purchased	A. Sales price	B. Sales/use tax paid to other jurisdictions or 6.25% of sales price — whichever is less
9. Total purchases. Add all of the purchase prices listed in column A. Enter the result here and in line 2 on the front.			▶ \$	
10. Total sales/use tax paid to other states or jurisdictions. Add all of the amounts listed in column B. Enter the result here and in line 4 on the front.			▶ \$	

Attach an additional statement if more space is necessary.