



MASSACHUSETTS DEPARTMENT OF REVENUE
 PO BOX 7044
 BOSTON, MA 02204
 CONTACT CENTER
 (617) 887-6367

Letter ID: L0837861376
 Notice Date: October 20, 2016
 MA Taxpayer ID: 10012653

PAYMENT AGREEMENT REMINDER



MASSACHUSETTS CORPORATION
 100 CAMBRIDGE ST STE 1310
 BOSTON MA 02114-2548

Why did you receive this notice?

This notice is your monthly reminder to submit your payments in accordance with your payment agreement.

You agreed to make monthly payments of at least \$449.41 for the duration of the agreement, which is 24 installments. Please note the terms of the payment agreement may fluctuate based on changes in the interest rate which are not controlled by the Department of Revenue (DOR).

When should you respond to this notice?

Your next payment due date is November 10, 2016.

CUT HERE AND RETURN IN THE ENVELOPE PROVIDED

001 Payment Voucher

Massachusetts Department of Revenue

MA Taxpayer ID 10012653	Payment Due Date November 10, 2016	Amount Due \$449.41	Amount Enclosed			
MASSACHUSETTS CORPORATION 100 CAMBRIDGE ST STE 1310 BOSTON MA 02114-2548	Payment Number 15458959369	Tax Type 040	Voucher Type 10	ID Type 001	Vendor Code 0001	

Pay online at mass.gov/masstaxconnect, or return this voucher with a check or money order payable to: Commonwealth of Massachusetts.

Mail to:

MASSACHUSETTS DEPT OF REVENUE
 PO BOX 7089
 BOSTON, MA 02204-7089

00115458959369 000000 0000000000 040 100010001 00000449411



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What steps should you take?

Review the terms and conditions below and if you have any questions, call us at (617) 887-6367 or toll-free in Massachusetts at (877) 671-6367.

Submit your installment payment by November 10, 2016. You may pay more than the agreed amount each month, but not less. Paying more will minimize additional interest and penalty charges, help you to finish paying sooner and save you money.

Visit MassTaxConnect at mass.gov/masstaxconnect to pay online with a credit card or from a checking or savings account. If you pay by check or money order, make it payable to the Commonwealth of Massachusetts, and send it to us with the payment voucher on page one of this notice in the return envelope provided. To have your payments withdrawn automatically from your bank account and submitted to DOR on each payment due date, complete the enclosed Payment Agreement Electronic Funds Transfer Authorization.

What are the terms of your payment agreement?

We accepted your payment agreement for the taxes outlined at the end of this notice. By entering into this payment agreement, you agreed to:

- Submit your required payments in full and on time
- File and pay all tax returns on time
- Pay all other tax liabilities in full and on time, unless in dispute
- Extend the statute of limitations on collection of these taxes
- Provide information to DOR as part of its periodic review of your payment agreement



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If you don't meet any of the requirements, we will cancel your agreement. Full payment of the tax liability covered by the payment agreement will be due and payable immediately. DOR may also proceed with enforcement action to collect this debt.

The following applies to payments made as part of your payment agreement:

- Payments received after the due date may not be reflected on your next billing statement.
- Payments made as part of your payment agreement will be applied in the order of oldest unpaid tax, penalty and interest amount owed.
- Additional interest and penalty charges will accrue until the total amount owed is paid. More information about interest and penalty charges is available at mass.gov/dor.
- Any unpaid balance may be subject to any and all offset programs available to DOR. For instance, your federal or state tax refunds, insurance proceeds and payments from the state comptroller for services provided may be paid over to DOR and credited to your tax liability.

What happens if you don't respond?

If you don't make your payments on time, or don't have enough money in your bank account for each payment, we may cancel this payment agreement. We may also take an escalating series of enforcement actions to collect this debt:

- Levy your bank account and/or garnish your wages
- Intercept your federal/state government payments and/or refunds
- Assign your liability to an outside collection agency

Details of what you owe

Withholding Tax							WTH-10012653-002	
Period End Date	Assessment Date	Tax Liability +	Interest +	Penalty +	Other Liability +	Credits =	Amount Due	
11/30/2015	10/03/2016	\$5,000.00	\$190.71	\$950.00	\$0.00	(\$2,505.55)	\$3,635.16	
12/31/2015	10/03/2016	\$5,000.00	\$167.33	\$850.00	\$0.00	\$0.00	\$6,017.33	
							\$9,652.49	

Total Amount Due: \$9,652.49



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Payment Schedule

No.	Due Date	Amount	No.	Due Date	Amount	No.	Due Date	Amount
1	10/10/2016	\$449.41	2	11/10/2016	\$449.41	3	12/10/2016	\$449.41
4	1/10/2017	\$449.41	5	2/10/2017	\$449.41	6	3/10/2017	\$449.41
7	4/10/2017	\$449.41	8	5/10/2017	\$449.41	9	6/10/2017	\$449.41
10	7/10/2017	\$449.41	11	8/10/2017	\$449.41	12	9/10/2017	\$449.41
13	10/10/2017	\$449.41	14	11/10/2017	\$449.41	15	12/10/2017	\$449.41
16	1/10/2018	\$449.41	17	2/10/2018	\$449.41	18	3/10/2018	\$449.41
19	4/10/2018	\$449.41	20	5/10/2018	\$449.41	21	6/10/2018	\$449.41
22	7/10/2018	\$449.41	23	8/10/2018	\$449.41	24	9/10/2018	\$323.48

Any adjustments made to the liabilities in this Agreement may cause the number of payments to increase or decrease.

Where can you find additional information?

Visit our website at mass.gov/dor for one-stop access to taxpayer information. You can learn more about state tax laws and DOR policies and procedures, including your Taxpayer Bill of Rights and the appeals process.

You can file your returns, make payments and manage your account at mass.gov/masstaxconnect. You may also contact us by phone at (617) 887-6367 or toll-free in Massachusetts at (877) 671-6367, Monday through Friday, 9:00 a.m. to 5:00 p.m.

ELECTRONIC FUNDS TRANSFER AUTHORIZATION FORM

Visit MassTaxConnect at mass.gov/masstaxconnect to enroll in the Department of Revenue's (DOR's) EFT program for your payment agreement. Once enrolled in EFT, your payments will be deducted automatically from your bank account and submitted to DOR for the duration of the payment agreement. If you are unable to activate your EFT enrollment in MassTaxConnect, complete and mail this form to DOR, COLLECTIONS BUREAU, PO BOX 7021, BOSTON, MA 02204.

Step 1. Complete Requested Information

Taxpayer Name

Taxpayer Identification Number

Spouse Name/Responsible Person Name

Spouse SSN/Responsible Person SSN

Name as Appears on Check/Bank Statement

SSN or FID (if different)

I (we) hereby authorize DOR to initiate debit entries from my (our) checking/savings account indicated below and the Depository named below to debit the same from such account.

Depository Name (Your bank name)

Depository Branch Location (city and state)

Phone Number

Transit/ABA Number (from below)

Account Number

Indicate below the type of bank account (checking or savings), frequency (weekly, bi-weekly or monthly) and date you would like payments debited from your account:

Checking Account

Weekly

First date to debit

Statement Savings

Bi-weekly

First date to debit

Monthly

10
Day of the month

Note: This authority is to remain in full force and effect until DOR and the Depository have received written notification from me (or either of us) to its termination in such time and in such manner as to afford DOR and the Depository a reasonable opportunity to act on it.

Name(s) on Account (print)

ID Numbers on Account

Date

Signature

Spouse's Signature

Step 2. Attach Depository Information:

Staple a copy of your voided check or pre-printed savings deposit slip with banking numbers printed on the bottom. Or, staple a copy of a letter from your depository that verifies your banking information (i.e., name, account number, routing number).