

**BE SURE TO DETACH VOUCHER WHERE INDICATED.
FAILURE TO DO SO WILL RESULT IN DELAYS
PROCESSING YOUR PAYMENT.**

DETACH HERE

Massachusetts Department of Revenue

M-941 – Employer’s Return of Income Taxes Withheld



Account ID number	Number of employees from whom taxes were withheld	Tax filing period	1. Amount withheld.	
			2. Previous payments made. List all payments made for this period on reverse.	
Business name			3. Credit carryforward from previous period.	
Business address			4. Total payments and credits. Add lines 2 and 3.	
City/Town	State	Zip	5. Total tax due. Subtract line 4 from line 1.	
Phone number			6. Penalties.	
E-mail address			7. Interest.	
<input type="checkbox"/> Check if amended return (see “Amended Return” in instructions) <input type="checkbox"/> Check if final return and you wish to close your withholding tax account			8. Total amount due. Add lines 5 through 7.	
See instructions for due dates. Mail to Massachusetts DOR, PO Box 419255, Boston, MA 02241-9255.			9. Amount overpaid to be credited to next period.	
I declare under the penalties of perjury that this return (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.			10. Amount overpaid to be refunded.	
Signature	Title	Date	File this return online at mass.gov/masstaxconnect .	

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List dates and amounts of payments made for this quarter (M-941W).

Date	Amount
Total	