



Massachusetts Department of Revenue

# Request for a Certificate of Good Standing and/or Tax Compliance or Waiver of Corporate Tax Lien

PO Box 7073, Boston, MA 02204; phone: 617-887-6400; fax: 617-660-3611

## 1. Applicant information

Name of applicant Daytime phone number (with area code)

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Street address.  Fill in if new address

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City/Town State Zip

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## 2. Taxpayer classification

Federal Employer or Taxpayer Identification number **(required)**

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Entity filing a combined report. If filing a combined report, enter name and FEIN as shown on return:

Name of principal reporting corporation FEIN of entity **(required)**

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Entity taxed as C corporation  
 Entity taxed as S corporation  
 Entity is Disregarded (other than a sole-proprietorship). If Disregarded entity, enter FEIN of filing entity as shown on return:

Name of filing entity FEIN of entity **(required)**

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Nonprofit (tax exempt) organization (see instructions)  
 Entity taxed as a partnership  
 Entity taxed as an estate  
 Entity taxed as a trust  
 Entity taxed as an individual  
 Entity taxed as a sole-proprietorship (including LLCs tax as sole proprietorship). If entity is taxed as sole-proprietorship, enter name, SSN and FEIN:

Name of sole proprietorship SSN of sole proprietorship **(required)** FEIN **(required)**

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## 3. Legal form of organization

- Corporation
- Limited Liability Company (LLC)
- Partnership (including Limited Liability Partnership, Limited Partnership, or other unincorporated association)
- Trust or estate

## 4. Purpose of application. Fill in one only.

- Certificate of Good Standing or Letter of Compliance
- Certificate of Good Standing for a Nonprofit Organization (enclose **required** copy of IRS exemption certificate)
- Certificate of Good Standing Relating to an ABCC Liquor License Transfer or Operational/Administrative Changes

## 5. Reason for application

- Cannabis
- Corporate reinstatement after administrative dissolution from Secretary of State (domestic/foreign corporation doing business in Massachusetts)
- Corporate reinstatement after administrative dissolution from Secretary of State (foreign corporation not doing business in Massachusetts)
- Gaming
- Liquor licenses
- Lottery machines
- Professional license renewal
- Sale of business
- Other (specify) \_\_\_\_\_

General information on page 2.



Name of applicant Trade name or DBA Federal ID or Social Security number (REQUIRED)

6. Sale/transfer of license

Fill in if transferring liquor license Name of buyer

Address of DBA location

City/Town State Zip

List all tax identification numbers filed for this entity (e.g., meals, sales, withholding, room occupancy or income)

Fill in if Waiver of Corporate Tax Lien has been acquired (does not apply to entities not taxed as corporation)

If requesting Waiver of Corporate Tax Lien, attach price and legal description of assets to be sold and complete the following (REQUIRED).

Name of transferee Date of transfer or sale (mm/dd/yyyy)

Street address

City/Town State Zip

List assets

7. Person to receive response. Fill in applicable ovals.

- Send results to taxpayer
Send results to person named below only if taxpayer is in compliance and Power of Attorney is attached
Send results to person named below, even if taxpayer is not in compliance and Power of Attorney is attached

If information is to be mailed to someone other than taxpayer, provide party's name and mailing address.

Name Phone number Fax number

Address

City/Town State Zip

Affidavit

Under the penalties of perjury, I declare that my company is responsible for the following taxes (REQUIRED; fill in all that apply).

- Withholding Sales/Use Meals Room occupancy Corporate Other (specify)

Signature of taxpayer or corporate officer (REQUIRED) Date

General information

The fastest and easiest way to obtain a Certificate is via our online application:

Businesses: https://mtc.dor.state.ma.us/mtc/\_/?Link=COGS

Individuals: https://mtc.dor.state.ma.us/mtc/\_/?Link=COGSIND

If the applicant is a partnership and has not filed a Form 3, Partnership Return of Income, for the last two years, submit complete copies of Form 3 with this application.

Any missing "required" information will delay the processing of your claim.

If a professional license renewal application, all returns must be filed and paid. If in a valid payment agreement, all required payments must be made.