

**355-ES** Massachusetts  
Dept. of Revenue

**Corporate Estimated Tax Payment — 2013**

**Voucher 1**

For calendar year 2013 or other taxable year beginning in 2013

Federal Identification number	DOR use only	Taxable year	Due date	Fill out a & b, only if amending or making first payment.			
Name of corporation				a. Total tax for prior year.	b. Overpayment from last year credited to estimated tax for this year.		
				\$	\$		
Street address				c. Estimated tax for the year ending:			
				MONTH / DAY / YEAR	\$		
City/Town		State	Zip	1. Amount of this installment (.40 times estimated tax). (New corporations see note below*)	\$		
		Return this voucher with check or money order payable to: <b>Commonwealth of Massachusetts.</b>			2. Amount of unused overpayment credit, if any, applied to this installment (see instructions)	\$	
Mail to: <b>Massachusetts Department of Revenue, PO Box 7046, Boston, MA 02204.</b>			Check appropriate box:			3. Amount due with this installment.	\$
			<input type="checkbox"/> Domestic corp. (0167) <input type="checkbox"/> Foreign corp. (0168) <input type="checkbox"/> Other _____			*New corporations in their first full taxable year with less than 10 employees have lower percentages: 30/25/25/20%; 55/25/20% and 80/20%.	

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**Voucher 2**

For calendar year 2013 or other taxable year beginning in 2013

Federal Identification number	DOR use only	Taxable year	Due date	Fill out a & b, only if amending or making first payment.			
Name of corporation				a. Total tax for prior year.	b. Overpayment from last year credited to estimated tax for this year.		
				\$	\$		
Street address				c. Estimated tax for the year ending:			
				MONTH / DAY / YEAR	\$		
City/Town		State	Zip	1. Amount of this installment (.25 times estimated tax). (New corporations see note below*)	\$		
		Return this voucher with check or money order payable to: <b>Commonwealth of Massachusetts.</b>			2. Amount of unused overpayment credit, if any, applied to this installment (see instructions)	\$	
Mail to: <b>Massachusetts Department of Revenue, PO Box 7046, Boston, MA 02204.</b>			Check appropriate box:			3. Amount due with this installment.	\$
			<input type="checkbox"/> Domestic corp. (0167) <input type="checkbox"/> Foreign corp. (0168) <input type="checkbox"/> Other _____			*New corporations in their first full taxable year with less than 10 employees have lower percentages: 30/25/25/20%; 55/25/20% and 80/20%.	

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**Voucher 3**

For calendar year 2013 or other taxable year beginning in 2013

Federal Identification number	DOR use only	Taxable year	Due date	Fill out a & b, only if amending or making first payment.		
Name of corporation				a. Total tax for prior year.	b. Overpayment from last year credited to estimated tax for this year.	
				\$	\$	
Street address				c. Estimated tax for the year ending:		
				MONTH / DAY / YEAR	\$	
City/Town State Zip				1. Amount of this installment (.25 times estimated tax). (New corporations see note below*)	\$	
				2. Amount of unused overpayment credit, if any, applied to this installment (see instructions)	\$	
Return this voucher with check or money order payable to: <b>Commonwealth of Massachusetts.</b> Mail to: <b>Massachusetts Department of Revenue, PO Box 7046, Boston, MA 02204.</b>				3. Amount due with this installment.	\$	
				*New corporations in their first full taxable year with less than 10 employees have lower percentages: 30/25/25/20%; 55/25/20% and 80/20%.		
Check appropriate box: <input type="checkbox"/> Domestic corp. (0167) <input type="checkbox"/> Foreign corp. (0168) <input type="checkbox"/> Other _____						

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**Voucher 4**

For calendar year 2013 or other taxable year beginning in 2013

Federal Identification number	DOR use only	Taxable year	Due date	Fill out a & b, only if amending or making first payment.		
Name of corporation				a. Total tax for prior year.	b. Overpayment from last year credited to estimated tax for this year.	
				\$	\$	
Street address				c. Estimated tax for the year ending:		
				MONTH / DAY / YEAR	\$	
City/Town State Zip				1. Amount of this installment (.10 times estimated tax). (New corporations see note below*)	\$	
				2. Amount of unused overpayment credit, if any, applied to this installment (see instructions)	\$	
Return this voucher with check or money order payable to: <b>Commonwealth of Massachusetts.</b>  Mail to: <b>Massachusetts Department of Revenue, PO Box 7046, Boston, MA 02204.</b>				3. Amount due with this installment.	\$	
				*New corporations in their first full taxable year with less than 10 employees have lower percentages: 30/25/25/20%; 55/25/20% and 80/20%.		
Check appropriate box: <input type="checkbox"/> Domestic corp. (0167) <input type="checkbox"/> Foreign corp. (0168) <input type="checkbox"/> Other _____						