

DETACH HERE

Form M-4768 Massachusetts Estate Tax Extension of Time Request & Payment Voucher



Date of death (mm/dd/yyyy) Tax type **048** Voucher type **18** ID type **005** Vendor code **0001**

Name of decedent Decedent's Social Security number

Name of personal representative Type of extension request being applied for
a. Time to file due to reasonable cause b. Time to pay due to undue hardship

Mailing address

City/Town State Zip Amount enclosed
\$

Sign here. Under penalties of perjury, I declare that to the best of my knowledge and belief any request on this form is true, correct and complete.

Signature of personal representative Signature of paid preparer Date

Employer Identification number of paid preparer Social Security number or PTIN of paid preparer

Pay online at mass.gov/masstaxconnect. Or, return this voucher with check or money order payable to: **Commonwealth of Massachusetts**.
Mail to: **Massachusetts Department of Revenue, PO Box 7023, Boston, MA 02204.**

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