



**Maine Income Tax Withholding
FORM 941BN-ME Business Change
Notification**

Complete this form to report a change in your withholding account or contact information or to cancel your withholding account. Incomplete forms will not be processed.

Mail to: Maine Revenue Services, Taxpayer Assistance
P.O. Box 1057, Augusta, ME 04332-0057

Fax: 207-287-6975
Email: taxpayerassist@maine.gov

Step 1

Identify your business as currently on file with Maine Revenue Services.

Current Legal Name: _____ DBA: _____
 Current Address: _____
 Current Phone Number: _____
 Withholding Account Number: _____

Step 2

List your new contact information; enter only if different from current information.

New Legal Name: _____ New DBA: _____
 New ATTN Line: _____
 New Address: _____
 New Email Address: _____
(PRINT CLEARLY)
 New Phone Number: _____ Effective Date of Change ____/____/____

NOTE: Do not enter a payroll processor's address or other contact information here.

Step 3

Request to cancel account. (Do not report cancellation for a seasonal shutdown period.)

Reason for Cancellation. Check the appropriate box:

Business Closed (Do not include a seasonal or temporary business closure)

Business Sold to: Name: _____ FEIN: _____
 Address: _____ Phone: _____

 Date Business Sold: ____/____/____

Other _____
 Date the business no longer had employees ____/____/____ Date of last payroll ____/____/____

Step 4

Sign and mail your report.

Under penalties of perjury, I certify that the information contained on this form is true and correct.

Print Name: _____
 Signature: _____ Title: _____
 Date: ____/____/____ Daytime Phone: _____

For Paid Preparers Only

Paid Preparer's Signature: _____ Date: ____/____/____
 Firm's Name (or yours if self-employed): _____ Phone: _____
 Address: _____
 EIN/SSN: _____ Maine Payroll Processor License Number: _____