06	07 08 0	9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 3	2 33 34 35 36 37 38 39 4	40 41 42 43 44 45 46 47 48 49 50	51 52 53 54 55 56 57 58 59 60	61 62 63 64 65 66 67 68 69 7	0 71 72 73 74 75 76 77 78 79
	-						_
	20	024 M-2210		A	REA RES	ERVED	
		XXXXXXXXXXXX		FC	DR 2-D BA	RCODE	
		derpayment of Massachusetts Estimated					
		come Tax					
	ти						
	I A	AXPAYERNAMEXXXXXXXXXXXXXXX			.IALSECNU		
	v		·		M 1 4 0005		
	X X	You are a qualified farmer or fisherman filing and p You were a resident of Massachusetts for 12 mont			iviarch 1, 2025		
	X	Your estimated payments and withholding equal o			ear was 12 months an	d a return was filed)	
		Tour command payments and withholding equal 0		Lo lan (Where lanable ye	cai was iz monuns dh	a a return was med).	
	Part	t 1. Figuring your underpay	yment				
	1.	2024 tax				1	XXXXXXXXX
	2.	Total credits				2	XXXXXXXXX
	3.	Balance				3	XXXXXXXXXX
	4.	Enter 80% of line 3 or 66.667% of line 3 if you are	a qualified farme	er or fisherman		4	XXXXXXXXXX
	5.	Enter 2023 tax liability after credits				5	
	6.	Enter the smaller of line 4 or line 5				6	XXXXXXXXXX
	-					t due dates –	1 1 45 0005
	7.	Installment due dates.	7	a. April 15, 2024 MMDDYYYY	b. June 15, 2024 MMDDYYYY	c. Sept. 15, 2024	d. Jan. 15, 2025 MMDDYYYY
	Q	Fiscal year filers, see instructions Divide the amount in line 6 by the number of insta					
	0.	for the year. Enter the result in the appropriate col		XXXXXXXXX	XXXXXXXXX	XXXXXXXXXX	XXXXXXXXX
	9.	Estimated taxes paid and taxes withheld for each		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX	XXXXXXXXXX
	10.	Overpayment of previous installments	10		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX
	11.	Total	11	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX
	12.	Overpayment	12	XXXXXXXXX	XXXXXXXXXX	XXXXXXXXX	XXXXXXXXXX
	13.	Underpayment	13	XXXXXXXXXX	XXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
			XXXXXXX	XXXXXX	ʹϪϪϪϪϪϪϪϪϪ	XXXXXXXXXXX	(XXXX
		XXXXXXXXXXXXXXXXXXXXXX	XXXXXXX	XXXXXX	XXXXXXXXXXXX	XXXXXXXXXXX	(XXXX

06	07 08 0	9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 3	7 38 39	40 41 42 43 44 45 46 47 48 49 5	60 51 52 53 54 55 56 57 58 59 6	60 61 62 63 64 65 66 67 68 69 7	70 71 72 73 74 75 76 77 78 79 8
1							
6	-						
3							
	20	)24 M-2210 pg. 2			AREA RES		
	XX	024 M-2210 pg. 2		F	or 2-d B/	ARCODE	
	Un	derpayment of Massachusetts Estimated					
5	Inc	ome Tax					
;							
3	ТЛ	XPAYERNAMEXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	xxx				
	1/-						
	art	2. Figuring your underpaymen	t pe	enalty			
2		Enter the date you paid the amount in line 13 or the 15th		Jindity			
		day of the 4th month after the close of the taxable year,					
		whichever is earlier	14	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX
	15.	Number of days from the due date of installment to the					
		date shown in line 14	15	XXX	XXX	XXX	XXX
		Number of days in line 15 after 4/15/24 and before 7/1/24	16	XXX	XXX	XXX	XXX
	17.	Number of days in line 15 after 6/30/24 and before 10/1/24	17	XXX XXX	XXX XXX	XXX XXX	
	18.	Number of days in line 15 after 9/30/24 and before 1/1/25	18 19	XXX	XXX	XXX	XXX
	19. 20.	Number of days in line 15 after 12/31/24 and before 4/15/25 Underpayment in line 13 $\times$ (number of days in line 16 $\div$	19				
	20.	365) × 9%	20	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXX	XXXXXXXXXX
	21.	Underpayment in line 13 × (number of days in line 17 ÷	20	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		365) × 9%	21	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX
	22.	Underpayment in line 13 × (number of days in line 18 ÷					
		365) × 9%	22	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
	23.	Underpayment in line $13 \times (number of days in line 19 \div$		VVVVVVVVV	VVVVVVVVV	VVVVVVVVV	VVVVVVVVV
		365) × TBD%	23	*****	XXXXXXXXXX		XXXXXXXXXX
	24.	Penalty. Add all amounts shown in lines 20 through 23.				24	~~~~~
		•	(77	YYYYY	XXXXXXXXXXX	xxxxxxxxx	
			177			~^^^^	

06 07 08 09 10 11 12 13 14 15 16	17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 3	6 37 38 39 4	40 41 42 43 44 45 46 47 48 49 5	50 51 52 53 54 55 56 57 58 59 6	60 61 62 63 64 65 66 67 68 69 7	70 71 72 73 74 75 76 77 78 79 8
04						
05						
06						
07						
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09						
10						
11			/	AREA RES		
12 <b>2024 M-22</b> 13 XXXXXXXX	10 pg. 3					
13 XXXXXXXXX	XXXX		F	OR 2-D BA	ARCODE	
14 Underpayment of	of Massachusetts Estimated					
15 Income Tax						
16						
17						
18						
	AMEXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	(XXX)	XXXXXXX SO	CIALSECNO		
20						
	alized income installn	nent	method	Installme	nt due dates	
	come each period (including long-term		Jan. 1–March 31	Jan. 1–May 31	Jan. 1–August 31	Jan. 1–Dec. 31
	ome taxed at 5.0%)	1	XXXXXXXXXX		XXXXXXXXXXX	XXXXXXXXXX
24 2. Annualization a		2	4	2.4	1.5	1
25 3. Multiply line 1 b		3	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX
	in line 3. Multiply line 3 by .05	4	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX
	come each period	5	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX
<ol> <li>Annualization a</li> </ol>		6	4	2.4	1.5	1
<ol> <li><sup>29</sup></li> <li>7. Multiply line 5 b</li> </ol>		7	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX	XXXXXXXXXX
	in line 7. Multiply line 7 by .085	8	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX
	come each period	9	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX
<sup>32</sup> <b>10.</b> Annualization a		10	4	2.4	1.5	1
<sup>33</sup> <b>11.</b> Multiply line 9 b		11	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX
	in line 11. Multiply line 11 by .12	12	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX
	nes 4, 8, and 12	13	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX
<sup>36</sup> <b>14.</b> Total credits	103 4, 0, 010 12	14	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX
<ul> <li>14. Iotal credits</li> <li>37 15. Total tax after c</li> </ul>	redite	15	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX
<ul> <li>16. Applicable perc</li> </ul>		16	20%	40%	60%	80%
<ul> <li>39</li> <li>17. Multiply line 15</li> </ul>	-	17	XXXXXXXXXX		XXXXXXXXXX	XXXXXXXXXX
	ined amounts of line 24 from all preceding p		18		XXXXXXXXX	XXXXXXXXX
	from line 17. Not less than "0"	19		XXXXXXXXX	XXXXXXXXX	XXXXXXXXX
	Form M-2210 by 4 and enter result in each	10				
43 column	ronn m-2210 by 4 and enter result in each	20	XXXXXXXXX	XXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
	nt from line 23 of this worksheet for the pre			XXXXXXXXX	XXXXXXXXX	XXXXXXXXX
<ul> <li>44 21. Enter the arrow</li> <li>45 22. Add lines 20 ar</li> </ul>		22	XXXXXXXXXX	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX
	e than line 19, subtract line 19 from line 22.			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
40 <b>23.</b> If life 22 is filler 47 Otherwise ente		23	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX
	er of line 19 or line 22 here and on Form	20		,		,
<sup>49</sup> M-2210, line 8		24	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX
50		2-7		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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62						
63 06 07 08 09 10 11 12 13 14 15 16	17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 3	6 37 38 39 /	40 41 42 43 44 45 46 47 48 49 5	50 51 52 53 54 55 56 57 58 59 f	0 61 62 63 64 65 66 67 68 69 7	70 71 72 73 74 75 76 77 78 79 9