

Massachusetts Department of Revenue

Form 84

Application for Relief from Joint Income Tax Liability

Names should appear as they did on the joint return for the tax year in question. The Department of Revenue (DOR) is required by law to notify the spouse noted below that you requested this relief. That person will have the opportunity to participate in the process by completing a questionnaire about the tax years you entered below. It is important to enter the correct year; for example, if DOR used your 2022 income tax refund to pay a 2021 joint tax liability enter tax year 2021, not tax year 2022. DOR will not disclose your address, phone numbers, or employer.

re	fund to pay a 2021 joint tax liability enter tax yea	r 2021, not tax year 2022. DOR will not d	isclose your address, phone numbers, or employer.
Та	ax year(s) for which relief is being requested (mm/dd/yyyy)		
Na	ame of applicant	Social Security number	Phone number
St	treet address		
Ci	ity/Town	State Zip	E-mail address
Name of spouse		Social Security number	N.
St	treet address	· . <	
Ci	ity/Town	State Zip	2
fo 1	Fill in if you have applied for relief from federal tax Attach copies of U.S. Form 8857, Request for Inno return(s) and the federal determination, if any. Fill in if a Notice of Intent to Assess (NIA) has bee Attach a copy of the NIA. You may request a confe for a conference. Fill in if a Notice of Assessment (NOA) has been is Attach a copy of the NOA and this application to Form 84." You may also request a hearing at this time.	n under MGL ch 62C, § 84. Iliability as an innocent spouse O ocent Spouse Relief (including any support on issued for the tax year for which you are recorded for the tax year for which year for the tax year for which year for the tax year for which year for which year for	te of the NIA. If so, attach this form to your written request questing relief olete all items on Form ABT. In line 6 write "see attached a separate written request.
Pi pe th ex lir of jo	erjury, I declare that I have examined this form and facts and statements as represented therein and stent specified in the Commissioner's determinate acknowledge that DOR will be sharing the fact of mitation the contents of this form (except your accept your your accept your your your your your your your your	nd any accompanying statements and d re true, correct and complete. I understa ion and that I will remain jointly and seve this application and will be sharing all in ddress, phone numbers, and employer's age that DOR will be sharing its decision	tax liability as an innocent spouse. Under penalties of locuments and to the best of my knowledge and belief and that if relief is granted, then it will apply only to the rally liable for any amounts where relief is not provided information related to this application, including without is name) and the contents of any attachments, with the on this application with the other person who filed the which he/she has knowledge.
		prepared this Form 84 and that I personall	y know/do not know (strike out one) that the statements
CC	ontained in this Form 84 are true and correct.		
Si	ignature of preparer (attach Form M-2848, Power of Attorney,	, if representing applicant) Title	Date

Form 84 Instructions

General Information

Generally, both you and your spouse are responsible, jointly and individually, for paying tax, interest, or penalties from your joint return. If you believe your current or former spouse should be solely responsible for an erroneous item or underpayment of tax from your joint return, you may be eligible for innocent spouse relief.

Application for Relief

An applicant wishing to apply for relief must submit this form within the time prescribed for challenging an assessment or a proposed assessment under MGL ch 62C §§ 26, 37, and 84. Applicants should attach copies of any federal claim for relief, the federal determination, and the federal tax return. If federal relief was not claimed, please attach a completed U.S. Form 8857. Applicants should also submit any documents or exhibits substantiating this application. The filing of this form will not stay the collection of tax unless or until this application is approved.

Application Prior to Assessment

PART ASUBJECT OCHANGE. If an applicant has received a Notice of Intent to Assess (NIA), this application must be received within 30 days following the issuance of the NIA. The applicant is entitled to a conference if one is requested within this 30-day period. If a conference is requested, this application must be attached to the written request. Mail the completed Form 84, the NIA and all attachments to the return address as shown on the NIA.

Application After Assessment

If an applicant has received a Notice of Assessment, this application must be made by filing an Application for Abatement (Form ABT). The applicant must attach this application to Form ABT and write "see attached Form 84" in line 6 of Form ABT. The applicant is entitled to a hearing if one is requested on either Form ABT or separately in writing. Form ABT is available online at mass.gov/dor. Mail the completed Form 84, Form ABT and all attachments to Massachusetts Department of Revenue, PO Box 7058, Boston, MA 02204.

Notice of Determination

A written notice of determination will be issued to the applicant. A grant of relief will only apply to the extent specified in the writ ten determination. The applicant remains jointly and severally li able for any amounts where relief is not granted. Also, the appli cant's spouse remains liable for the entire tax determined to be due. If the grant of relief was obtained by false or fraudulent means, the grant of relief is void.