

DETACH HERE

2026 Form M-8736
Massachusetts Fiduciary Extension Payment Voucher

Payment for period end date (mm/dd/yyyy)	Tax type 049	Voucher type 18	ID type 004	Vendor code 0001
Name	Federal Identification number		Type of form you plan to file ☐ Form 2 ☐ Form 2G	
Mailing address				
City/Town	State	Zip	Amount enclosed \$	

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 419544, Boston, MA 02241-9544.**



AREA RESERVED
FOR 2-D BARCODE

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