



FORM 941BN-ME

**Maine Income Tax Withholding
Business Change
Notification**

Complete this form to report a change in your withholding account, 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 04332-1057

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: _____