



Form NHR

New Hire and Independent Contractor Reporting Form

Rev. 03/07
Massachusetts
Department of
Revenue

TO ENSURE ACCURACY, PRINT (OR TYPE) NEATLY IN UPPER-CASE LETTERS AND NUMBERS, USING A DARK, BALLPOINT PEN.

Employee Information

FIRST NAME*	MI	LAST NAME*
SOCIAL SECURITY NUMBER*	DATE OF HIRE OR REINSTATEMENT*	
ADDRESS*		
CITY/TOWN*	STATE*	ZIP* +4 (OPTIONAL)

IT'S THE LAW! - Massachusetts regulations requires employers with 25 or more employees to report their new hires and independent contractors electronically.

For more information, go to www.mass.gov/dor and select the **Report New Hires** link located in the **Online Services** section.

Employer Information

EMPLOYER IDENTIFICATION NUMBER*	-	
CORPORATE NAME*		
PAYROLL ADDRESS TO WHICH THE INCOME WITHHOLDING ORDER WILL BE SENT*		
PAYROLL ADDRESS (Continued)		
CITY/TOWN*	STATE*	ZIP* +4 (OPTIONAL)

NOTE: All fields on this form with an * are mandatory fields. Please ensure all information entered is legible and accurate prior to submitting the form to DOR.

Helpful Hint: Once you have completed your employer information, you may copy this form to save time when reporting future new hires and independent contractors.

Send Completed Form NHR to:

Massachusetts Department of Revenue, PO Box 55141, Boston, MA 02205-5141 or,
you may fax the completed form to 617-376-3262.