

**Part 1 CHANGE YOUR HOME MAILING ADDRESS**

Individual income tax returns (Forms IR-22, IR-25, IR-21, IR-18 etc.)

- If your last return was a joint return and you are now establishing a residence separate from the spouse with whom you filed that return, check here.....

|  |   |          |              |
|--|---|----------|--------------|
| 1. <b>Your name</b> (first name, middle initial and last name)           | 1a. <b>Your Social Security Number</b>  |          |              |
| 2. <b>Spouse's name</b> (first name, middle initial and last name)       | 2a. <b>Spouse's Social Security Number</b>  |          |              |
| 3. <b>Prior name(s)</b>  |   |          |              |
| 4. <b>Old address</b> (number, street, city or town, state and zip code) | Apt. No.  |          |              |
| 5. <b>New address</b> (number, street, city or town, state and zip code) | <table style="width:100%; border: none;"> <tr> <td style="width:60%; border: none;">Apt. No.</td> <td style="width:40%; border: none;">Date of move</td> </tr> </table> | Apt. No. | Date of move |
| Apt. No.   | Date of move  |          |              |

**Part 2 CHANGE YOUR BUSINESS MAILING ADDRESS OR BUSINESS LOCATION**

Check all boxes this change affects:

- 6.  **Business net profit returns** (Forms BR-25, BR-21, BR-18 etc.)
- 7.  **Employer withholding returns** (Forms IT-11, IT-13, IT-15 etc.)
- 8.  **Business location**

|   |  |                                |              |                                |  |  |                          |
|---|--|--------------------------------|--------------|--------------------------------|--|--|--------------------------|
| 9. <b>Business name</b>   | 9a. <b>EIN/FID Number</b>  |                                |              |                                |  |  |                          |
| 10. <b>Old mailing address</b> (number, street, city or town, state and zip code) | Room or Suite no.  |                                |              |                                |  |  |                          |
| 11. <b>New mailing address</b> (number, street, city or town, state and zip code) | <table style="width:100%; border: none;"> <tr> <td style="width:15%; border: none;">Room or suite no.</td> <td style="width:15%; border: none;">Date of move</td> <td style="width:70%; border: none;">New telephone number<br/>(    )</td> </tr> <tr> <td colspan="2" style="border: none;"></td> <td style="border: none;">New fax number<br/>(    )</td> </tr> </table> | Room or suite no.              | Date of move | New telephone number<br>(    ) |  |  | New fax number<br>(    ) |
| Room or suite no.   | Date of move   | New telephone number<br>(    ) |              |                                |  |  |                          |
|   |  | New fax number<br>(    )       |              |                                |  |  |                          |

**Part 3 SIGNATURE**

Daytime telephone number of person to contact (optional)    ▶    (    )    \_\_\_\_\_

|  |  |
|--|--|
| <p><b>Sign Here</b> ▶    _____         _____         Date</p> <p>▶    If joint return, spouse's signature         _____         Date</p> | <p>▶    _____         _____         Date</p> <p>▶    _____         _____         Title</p> |
|--|--|