

## CERTAIN PART-YEAR RESIDENTS MUST ENCLOSE SCHEDULE HC

FOR PRIVACY ACT NOTICE, SEE INSTRUCTIONS.

<b>m 1-NR/PY</b> Mass. Nonresident/Pa	art-year Resid	ient lax keturn	2014
MI. LAST NAME		1. YOUR SOCIAL SECURITY NUMBER	
FIDOT NAME		E N T T E R T	S S #
FIRST NAME IV.I. CAST IVALUE		E N T + E R +	S S #
CITY/TOWN/PO	ST OFFICE/FOREIGN COUNTRY	STATE ZIP + 4	
ction Campaign Fund (this contribution will not change your tax or reduce your re	fund)\$1	You \$1 Spouse if filing jointly	Total
reteran of U.S. armed forces who served in Operation Enduring Freedom, Iraqi Fre	edom or Noble Eagle 🕨 🥯 Yo	ou 🕨 🥯 Spouse	▶\$
			nce 2013
Part-year resident part-year resident (see inst	ructions) Fil	l in if noncustodial parent	etions)
Silligie		Till II illing denotatio 120 (000 mon ac	шинај
		opriate space above)	
			on for child(ren)
PART-YEAR RESIDENTS ONLY			
	Y Y To ► M M D		
Takal daya as Massachysakka wasidank		205 . 0	
Total days as massachuseus resident			or mothed only
TOTAL INCOME from U.S. 1040, line 22; 1040A, line 15; 1040EZ, lin	e 4: 1040NR, line 23;	Wildle-uon	
		► 3	0 0
EXEMPTIONS		,	A III BOX at lost
			0 0
			0 0
<ul> <li>Number of dependents. (Do not include yourself or your spouse.)</li> <li>You must enclose Schedule DI.</li> </ul>	Enter number ►	× \$1,000 = 4b	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
c. Age 65 or over before 2015: You Spouse	Enter number ►	×\$ 700 = 4c	00
d Blindness: You Spouse	Enter number ►	× \$2 200 = 4d	0 0
e. 1. Medical/			0 0
Dental ► 2. Adoption ►		1 + 2 = 4e	,,,,,
f. TOTAL EXEMPTIONS. Add lines 4a through 4e. Enter here and on	line 22a	▶ 4f	0 0
INCOME			
Nonresidents report in lines 5 through 11 Massachusetts source inc			
			10 part-year
Magaz calarias ting and other ampleyes compansation (from all East	rme W 2)	. 5	0 0
	,		0 0
Taxable pensions and annuities (see instructions)		▶6	UU
SIGN HERE. Under penalties of perjury, I declare that to the best of my kno	wledge and belief this return	and enclosures are true, correct a	
old in the first behalities of perjury, i declare that to the best of my kno			nd complete.
Your signature Date Print paid pre	parer's name Prep	parer's SSN	nd complete.
	parer's name Prep or P	parer's SSN	nd complete.
CONTROL FOR THE STATE OF THE ST	Street of the contribution will not change your tax or reduce your resteran of U.S. armed forces who served in Operation Enduring Freedom, Iraqi Freetoran of U.S. armed forces who served in Operation Enduring Freedom, Iraqi Freetoran of U.S. armed forces who served in Operation Enduring Freedom, Iraqi Freetoran of U.S. armed forces who served in Operation Enduring Freedom, Iraqi Freetoran of U.S. armed forces who served in Operation Enduring Freedom, Iraqi Freetoran of U.S. armed forces who served in Operation Enduring Freedom, Iraqi Freetoran of U.S. see instructions.    Nonresident	CITYTOWN/POST OFFICE-FOREIGN COUNTRY  Internal of U.S. armed forces who served in Operation Enduring Freedom, Iraqi Freedom or Noble Eagle   Yours(s) is deceased, fill in appropriate oval(s); see instructions.  Nonresident or U.S. armed forces who served in Operation Enduring Freedom, Iraqi Freedom or Noble Eagle   Yours(s) is deceased, fill in appropriate oval(s); see instructions.  Part-year resident  Part-year resident  Part-year resident  Part-year resident (see instructions)  Nonresident composite return (see inst.)  Head of household (see instructions)  Warried filing separate return (enter spouse's Social Security number in the appropriate and part-year resident (see instructions)  Head of household (see instructions)  Part-year RESIDENTS ONLY  Dates as Massachusetts resident: From   OTAL INCOME from U.S. 1040, line 22; 1040A, line 15; 1040EZ, line 4; 1040NR, line 23; or 1040NR-EZ, line 7. If married filing separately, see instructions.  CEXEMPTIONS  Personal exemptions. If single or married filing separately, enter \$4,400. If head of household for married filing jointly, enter \$8,800  Number of dependents. (Do not include yourself or your spouse.)  Number of dependents. (Do not include yourself or your spouse.)  Number of dependents. (You Spouse Enter number   Lage 65 or over before 2015: You Spouse Enter number   Lage 65 or over before 2015: You Spouse Enter number   Lage 65 or over before 2015: You Spouse Enter number   Lage 65 or over before 2015: You Spouse Enter number   Lage 18 Indenses: Your Spouse Enter number   La	CITYTOWN/POST OFFICE/FOREIGN COUNTRY  STATE 2B + 4  CITYTOWN/POST OFFICE/FOREIGN COUNTRY  STATE 2B + 4  STATE 2B + 5  STATE 2B + 4  STATE 2B + 4  STATE 2B + 4  STATE 2B + 4  STATE 2B + 5  STATE 2B + 5  STATE 2B + 4  STATE 2B + 5  STATE 2B -