

Form 1-NR/PY Mass. Nonresident/Part-Year Resident Tax Return 2015

FIRST NAME M.I. LAST NAME 1. YOUR SOCIAL SECURITY NUMBER
 SPOUSE'S FIRST NAME M.I. LAST NAME 2. SPOUSE'S SOCIAL SECURITY NUMBER
 ADDRESS CITY/TOWN/POST OFFICE/FOREIGN COUNTRY STATE ZIP + 4
 ADDRESS OF LEGAL RESIDENCE OR DOMICILE (IF FILING AS NONRESIDENT) CITY/TOWN/POST OFFICE/FOREIGN COUNTRY STATE OR FOREIGN COUNTRY

State Election Campaign Fund (this contribution will not change your tax or reduce your refund) \$1 You \$1 Spouse if filing jointly Total
 Fill in if veteran of U.S. armed forces who served in Operation Enduring Freedom, Iraqi Freedom or Noble Eagle ▶ You ▶ Spouse ▶ \$
 If taxpayer(s) is deceased, fill in appropriate oval(s); see instructions ▶ Primary Spouse
 Under age 18; see instructions ▶ You ▶ Spouse
 Select only one: Nonresident Filing as both a nonresident and part-year resident (see instructions) ▶ Fill in if name/address has changed since 2014
 Part-year resident Nonresident composite return (see inst.) ▶ Fill in if noncustodial parent
 Head of household (see instructions) ▶ You are a custodial parent who has released claim to exemption for child(ren) ▶ Fill in if filing Schedule TDS (see instructions)

1 FILING STATUS ▶ Single (select one only) Married filing joint return (both must sign return) Married filing separate return (enter spouse's Social Security number in the appropriate space above) Head of household (see instructions) ▶ You are a custodial parent who has released claim to exemption for child(ren)

2 PART-YEAR RESIDENTS ONLY
 Dates as Massachusetts resident: From ▶ MMDDYYYY To ▶ MMDDYYYY
 Total days as Massachusetts resident ÷ 365 = ▶ 2

3 TOTAL 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. ▶ 3 Whole-dollar method only
 ▲ If showing a loss, mark an X in box at left

4 EXEMPTIONS
 a. Personal exemptions. If single or married filing separately, enter \$4,400. If head of household, enter \$6,800. If married filing jointly, enter \$8,800 4a 00
 b. Number of dependents. (Do not include yourself or your spouse.) Enter number ▶ × \$1,000 = 4b 00
 You must enclose Schedule DI.
 c. Age 65 or over before 2016: You Spouse Enter number ▶ × \$ 700 = 4c 00
 d. Blindness: You Spouse Enter number ▶ × \$2,200 = 4d 00
 e. 1. Medical/Dental ▶ 00 2. Adoption ▶ See instructions 00 1 + 2 = 4e 00
 f. TOTAL EXEMPTIONS. Add lines 4a through 4e. Enter here and on line 22a. ▶ 4f 00

INCOME
 Nonresidents report in lines 5 through 11 Massachusetts source income only. Use line 13 if appropriate. Part-year residents report in lines 5 through 11 income earned and/or received while a resident. Do not use lines 13 or 14. If filing both as a nonresident and part-year resident, be sure to complete and enclose Schedule R/NR, Resident/Nonresident Worksheet, before proceeding any further.

5 Wages, salaries, tips and other employee compensation (from all Forms W-2) ▶ 5 00
 6 Taxable pensions and annuities (see instructions) ▶ 6 00

SIGN HERE. Under penalties of perjury, I declare that to the best of my knowledge and belief this return and enclosures are true, correct and complete.

Your signature Date Print paid preparer's name Preparer's SSN or PTIN ▶
 Spouse's signature (if filing jointly) Date Paid preparer's phone Paid preparer's EIN ▶

May DOR discuss this return with the preparer? ▶ Yes ▶ Paid preparer's signature Date Fill in if self-employed
 I do not want my preparer to file my return electronically ▶

Attach, with a single staple, state copy of Forms W-2, W-2G and 1099 (showing Massachusetts withholding).