

Part 1 CHANGE YOUR HOME MAILING ADDRESS

Individual income tax returns (Forms IR-25J, IR-21J, IR-18J 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. Your name (first name, middle initial and last name)	1a. Your Social Security Number		
2. Spouse's name (first name, middle initial and last name)	2a. Spouse's Social Security Number		
3. Prior name(s)			
4. Old address (number, street, city or town, state and zip code)	Apt. No.		
5. New address (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-25J, BR-21J, BR-18J etc.)
- 7. **Employer withholding returns** (Forms IT-11J, IT-13J, IT-15J etc.)
- 8. **Business location**

9. Business name	9a. EIN/FID Number						
10. Old mailing address (number, street, city or town, state and zip code)	Room or Suite no.						
11. New mailing address (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:20%; border: none;">Date of move</td> <td style="width:65%; border: none;">New telephone number ()</td> </tr> <tr> <td colspan="2" style="border: none;"></td> <td style="border: none;">New fax number ()</td> </tr> </table>	Room or suite No.	Date of move	New telephone number ()			New fax number ()
Room or suite No.	Date of move	New telephone number ()					
		New fax number ()					

Part 3 SIGNATURE

Daytime telephone number of person to contact (optional) ▶ () _____

<p>Sign Here ▶ _____ _____ Your signature Date</p> <p>▶ If joint return, spouse's signature _____ Date</p>	<p>▶ _____ _____ If Part 2 completed, signature of owner, officer or representative Date</p> <p>▶ _____ _____ Title</p>
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