

Massachusetts General Information

Mark if name and address have changed since last year _____[1]
 Mark if noncustodial parent _____[2]
 In care of address or address of legal residence or domicile:
 Street _____[3]
 City, state, zip code _____[4] _____[5] _____[6]
 Foreign country name _____[7]
 Foreign province or county _____[8]
 Foreign postal code _____[9]

Use Tax

Estimate use tax for out of state purchases less than \$1,000 _____[10]
 Out of state purchases _____[11] Sales tax paid to other state _____[12]

Contributions

Amount of political and charitable contributions you wish to make to:

	Taxpayer	Spouse
Mark to contribute to the State Election Campaign Fund	_____[13]	_____[14]
Organ Transplant Fund _____[15]		_____[18]
Endangered Wildlife Conservation _____[16]		_____[19]
AIDS Fund _____[17]		_____[20]
United States Olympic Fund _____[18]		
Military Family Relief Fund _____[19]		
Homeless Animal Prevention and Care Fund _____[20]		

Adjustments and Deductions

Rental Deduction

Residence #1 rented address _____[21]		
Landlord's name and address _____		
Date from _____	Date to _____	Rent paid _____
Residence #2 rented address _____		
Landlord's name and address _____		
Date from _____	Date to _____	Rent paid _____

Health Insurance Information

	Taxpayer	Spouse
Enrolled in Minimum Creditable Coverage (MCC) health insurance plan for entire year _____[22]		_____[23]
Insurance information has changed from last year	Yes ____[24] No ____[25]	Yes ____[26] No ____[27]
Federal identification number _____[28]		_____[29]
Subscriber number _____[30]		_____[31]
Name of insurance company (Taxpayer) _____[32]		
Name of insurance company (Spouse) _____[33]		

Commuter Deduction

	Tolls paid through Fastlane	MBTA Transit/commuter passes
Taxpayer _____[34]		_____
Spouse _____[35]		_____

Part-year Resident Information

If you were a part-year resident during the tax year, enter the dates you lived in Massachusetts

Part-year residency dates:
 From _____[36]
 To _____[37]