

2006 TAX RETURN

Client Copy

Client: I-9539

Prepared for: ANAND NIDAMANURU
3406 78TH STREET CT
MOLINE, IL 61265

Prepared by: Laxmi P Palaypu
IBSN INC
3406 78TH STREET CT
MOLINE, IL 61265
(866) 4276829

Date: June 8, 2007

Comments:

DO NOT FILE

Route to: _____

IBSN INC
3406 78TH STREET CT
MOLINE, IL 61265
(866) 4276829

Client I-9539
June 8, 2007

ANAND NIDAMANURU
C/O IBSN INC
3406 78TH STREET CT
MOLINE, IL 61265

FEDERAL FORMS

Form 1040NR

2006 U.S. Nonresident Alien Income Tax Return

ILLINOIS FORMS

Form IL-1040
Schedule NR

2006 Illinois Individual Income Tax Return
IL Nonresident and Part-Year Comp. of Tax

WISCONSIN FORMS

Form 1NPR

2006 Wisconsin NR and PY Resident

FEE SUMMARY

Preparation Fee

INCOME

Wages, salaries, tips, etc.....	11,932
Total income.....	11,932

ADJUSTMENTS TO INCOME

Total adjustments.....	0
Adjusted gross income.....	11,932

ITEMIZED DEDUCTIONS

Total itemized deductions.....	0
--------------------------------	---

TAX COMPUTATION

Standard deduction.....	5,150
Larger of itemized or standard deduction.....	5,150
Income prior to exemption deduction.....	6,782
Exemption deduction.....	3,300
Taxable income.....	3,482
Tax before credits.....	348

CREDITS

Total credits.....	0
Tax after credits.....	348

OTHER TAXES

Total tax.....	348
----------------	-----

PAYMENTS

Federal income tax withheld.....	1,775
Total payments.....	1,775

REFUND OR AMOUNT DUE

Amount overpaid.....	1,427
Amount refunded to you.....	1,427
Amount you owe.....	0

TAX RATES

Marginal tax rate.....	10.0%
Effective tax rate.....	10.0%

DO NOT FILE

FEDERAL ADJUSTED GROSS INCOME

Federal adjusted gross income.....	11,932
------------------------------------	--------

SUBTRACTIONS FROM INCOME

Total subtractions.....	0
Illinois base income.....	11,932

TAX AND WITHHOLDING

Number of exempt. * \$2000.....	2,000
Net income.....	9,932
Illinois income from Sch. NR.....	5,118
Exemptions multiplied by Ill. NR %.....	858
Nonresident income subject to tax.....	4,260
Tax.....	128
Illinois income tax withheld.....	154
Total payments and credits.....	154
Overpayment.....	26

REFUND OR AMOUNT DUE

Amount overpaid.....	26
Amount refunded to you.....	26
Amount you owe.....	0

TAX RATES

Marginal tax rate.....	3.0%
Effective tax rate.....	3.0%

DO NOT FILE

FEDERAL ADJUSTED GROSS INCOME

Federal adjusted gross inc. - WI source.....	6,814
Federal adjusted gross income.....	11,932

TAX CALCULATION

Wisconsin income.....	11,932
Deduction for exemptions.....	700
Wisconsin taxable income.....	11,232
Wisconsin tax.....	550

NON REFUNDABLE CREDITS

Tax after credits.....	314
Tax after alternative minimum tax.....	314
Net tax.....	314

ADDITIONS TO TAX

Total tax.....	314
----------------	-----

PAYMENTS AND CREDITS

Wisconsin income tax withheld.....	364
Total payments and refundable credit.....	364

REFUND OR AMOUNT DUE

Amount you owe.....	0
Amount of overpayment.....	50
Amount refunded to you.....	50

TAX RATES

Marginal tax rate.....	6.15%
Effective tax rate.....	2.6%

DO NOT FILE

2006**General Information****Page 1**

ANAND NIDAMANURU

337-04-3179

Forms needed for this return

Federal: 1040NR
Illinois: IL-1040, Sch NR
Wisconsin: 1NPR

Tax Rates

	<u>Marginal</u>	<u>Effective</u>
Federal	10.0%	10.0%
Illinois	3.0%	3.0%
Wisconsin	6.2%	2.6%

Carryovers to 2007

None

DO NOT FILE

U.S. Nonresident Alien Income Tax Return

For the year January 1 - December 31, 2006, or other tax year

OMB No. 1545-0074

beginning , 2006, and ending , 20

2006

Please
print
or
type.

Your first name ANAND	MI	Last name NIDAMANURU	Identifying number (see instructions) 337-04-3179
Present home address (number, street, and apt no., or rural route). If you have a P.O. box, see instructions. Apartment No. 3406 78TH STREET CT			Check if: <input checked="" type="checkbox"/> Individual Estate or Trust
City, town or post office. If you have a foreign address, see instructions. MOLINE, IL 61265			For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see instructions.
Country ▶ USA		Of what country were you a citizen or national during the tax year? ▶ INDIA	
Give address outside the United States to which you want any refund check mailed. If same as above, write 'Same.'		Give address in the country where you are a permanent resident . If same as above, write 'Same.'	
Same		Same	

Attach
Forms
W-2 here.Also
attach
Form(s)
1099-R if
tax was
withheld.

Filing Status and Exemptions for Individuals (see instructions)				7a	7b
Filing status. Check only one box (1-6 below).				Yourself	Spouse
1	<input type="checkbox"/>	Single resident of Canada or Mexico, or a single U.S. national			
2	<input checked="" type="checkbox"/>	Other single nonresident alien		X	
3	<input type="checkbox"/>	Married resident of Canada or Mexico, or a married U.S. national	If you check box 7b, enter your spouse's identifying number. ▶		
4	<input type="checkbox"/>	Married resident of the Republic of Korea (South Korea)			
5	<input type="checkbox"/>	Other married nonresident alien			
6	<input type="checkbox"/>	Qualifying widow(er) with dependent child (see instructions)			
Caution: Do not check box 7a if your parent (or someone else) can claim you as a dependent. Do not check box 7b if your spouse had any U.S. gross income.					
7c Dependents: (see instructions)		(2) Dependent's identifying number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if qualifying child for child tax credit (see instr)	No. of boxes checked on 7a and 7b: ▶ 1
(1) First name Last name					No. of children on 7c who: • lived with you ▶ • did not live with you due to divorce or separation ▶
					Dependents on 7c not entered above: ▶
					Add numbers entered on lines above: ▶ 1
d Total number of exemptions claimed					

Income
Effectively
Connected
With U.S.
Trade/
BusinessEnclose,
but
do not
attach,
any
payment.

8	Wages, salaries, tips, etc. Attach Form(s) W-2	8	11,932.
9a	Taxable interest	9a	
b	Tax-exempt interest. Do not include on line 9a.	9b	
10a	Ordinary dividends	10a	
b	Qualified divs (see instrs)	10b	
11	Taxable refunds, credits, or offsets of state and local income taxes (see instructions)	11	
12	Scholarship and fellowship grants. Attach Form(s) 1042-S or required statement (see instructions)	12	
13	Business income or (loss). Attach Schedule C or C-EZ (Form 1040).	13	
14	Capital gain or (loss). Att Sch D (Form 1040) if reqd. If not reqd, check here. <input type="checkbox"/>	14	
15	Other gains or (losses). Attach Form 4797.	15	
16a	IRA distributions	16a	
		16b Taxable amount	16b
17a	Pensions and annuities	17a	
		17b Taxable amount	17b
18	Rental real estate, royalties, partnerships, trusts, etc. Attach Schedule E (Form 1040).	18	
19	Farm income or (loss). Attach Schedule F (Form 1040).	19	
20	Unemployment compensation	20	
21	Other income. List type and amount (see instructions)	21	
22	Total income exempt by a treaty from page 5, Item M.	22	
23	Add lines 8, 9a, 10a, 11-15, 16b, and 17b-21. This is your total effectively connected income	23	11,932.
24	Archer MSA deduction. Attach Form 8853	24	
25	Health savings account deduction. Attach Form 8889	25	
26	Moving expenses. Attach Form 3903	26	
27	Self-employed SEP, SIMPLE, and qualified plans	27	
28	Self-employed health insurance deduction (see instructions)	28	
29	Penalty on early withdrawal of savings	29	
30	Scholarship and fellowship grants excluded	30	
31	IRA deduction (see instructions)	31	
32	Student loan interest deduction (see instructions)	32	
33	Domestic production activities deduction. Attach Form 8903	33	
34	Add lines 24 through 33	34	0.
35	Subtract line 34 from line 23. Enter here and on line 36. This is your adjusted gross income	35	11,932.

Tax and Credits	36	Amount from line 35 (adjusted gross income)	36	11,932.
	37	Itemized deductions from page 3, Schedule A, line 17. Std. Ded. Allowed Under	37	5,150.
	38	Subtract line 37 from line 36. US-India Income Tax Treaty	38	6,782.
	39	Exemptions (see instructions)	39	3,300.
	40	Taxable income. Subtract line 39 from line 38. If line 39 is more than line 38, enter -0-	40	3,482.
	41	Tax (see instructions). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	41	348.
	42	Alternative minimum tax (see instructions). Attach Form 6251	42	0.
	43	Add lines 41 and 42	43	348.
	44	Foreign tax credit. Attach Form 1116, if required	44	
	45	Credit for child and dependent care expenses. Attach Form 2441	45	
	46	Retirement savings contributions credit. Attach Form 8880	46	
	Other Taxes	47	Residential energy credits. Attach Form 5695	47
48		Child tax credit (see instrs). Attach Form 8901 if required	48	
49		Credits from: a <input type="checkbox"/> Form 8396 b <input type="checkbox"/> Form 8839 c <input type="checkbox"/> Form 8859	49	
50		Other credits. Check applicable box(es): a <input type="checkbox"/> Form 3800 b <input type="checkbox"/> Form 8801 c <input type="checkbox"/> Form	50	
51		Add lines 44 through 50. These are your total credits	51	
52		Subtract line 51 from line 43. If line 51 is more than line 43, enter -0-	52	348.
53		Tax on income not effectively connected with a U.S. trade or business from page 4, line 89	53	
54		Social security and Medicare tax on tip income not reported to employer. Attach Form 4137	54	
55		Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	55	
56		Transportation tax (see instructions)	56	
57		Household employment taxes. Attach Schedule H (Form 1040)	57	
Pay-ments		58	Add lines 52 through 57. This is your total tax	58
	59	Federal income tax withheld from Forms W-2, 1099, 1042-S, etc	59	1,775.
	60	2006 estimated tax payments & amount applied from 2005 rtn	60	
	61	Excess social security and tier 1 RRTA tax withheld (see instructions)	61	
	62	Additional child tax credit. Attach Form 8812	62	
	63	Amount paid with Form 4868 (request for extension)	63	
	64	Other payments from: a <input type="checkbox"/> Form 2439 b <input type="checkbox"/> Form 4136 c <input type="checkbox"/> Form 8885	64	
	65	Credit for amount paid with Form 1040-C	65	
	66	U.S. tax withheld at source from page 4, line 86	66	
	67	U.S. tax withheld at source by partnerships under section 1446:		
	a	From Form(s) 8805	67a	
	b	From Form(s) 1042-S	67b	
Refund	68	U.S. tax withheld on dispositions of U.S. real property interests:		
	a	From Form(s) 8288-A	68a	
	b	From Form(s) 1042-S	68b	
	69	Credit for federal telephone excise tax paid. Attach Form 8913 if required	69	
	70	Add lines 59 through 69. These are your total payments	70	1,775.
	71	If line 70 is more than line 58, subtract line 58 from line 70. This is the amount you overpaid	71	1,427.
	72a	Amt of ln 71 you want refunded to you. If fm 8888 is att, ck here <input type="checkbox"/>	72a	1,427.
	b	Routing number 075911988		
	c	Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d	Account number 1252286818		
	73	Amount of line 71 you want applied to your 2007 estimated tax	73	
	Amount You Owe	74	Amount you owe. Subtract line 70 from line 58. For details on how to pay, see instructions	74
75		Estimated tax penalty. Also include on line 74	75	
Third Party Designee	Do you want to allow another person to discuss this return with the IRS (see instructions)? <input checked="" type="checkbox"/> Yes. Complete the following. <input type="checkbox"/> No			
Sign Here	Designee's name Preparer		Phone number	
	Your signature		Date	
Paid Preparer's Use Only	Preparer's signature Laxmi P Palaypu		Date	
	Firm's name (or yours if self-employed), address, and ZIP code IBSN INC 3406 78TH STREET CT MOLINE, IL 61265		Check if self-employed <input checked="" type="checkbox"/> Preparer's SSN or PTIN P00398566	
		EIN 04-3634467		Phone no. (866) 4276829

Tax on Income Not Effectively Connected With a U.S. Trade or Business

Attach Forms 1042-S, SSA-1042S, RRB-1042S, or similar form.

Nature of income	(a) U.S. tax withheld at source	Enter amount of income under the appropriate rate of tax (see instructions)				
		(b) 10%	(c) 15%	(d) 30%	(e) Other (specify)	
					%	%
76 Dividends paid by:						
a U.S. corporations.						
b Foreign corporations.						
77 Interest:						
a Mortgage.						
b Paid by foreign corps.						
c Other.						
78 Industrial royalties (patents, trademarks, etc).						
79 Motion picture or TV copyright royalties.						
80 Other royalties (copyrights, recording, publishing, etc).						
81 Real property income and natural resources royalties.						
82 Pensions and annuities.						
83 Social security benefits.						
84 Gains (include capital gain from line 92 below).						
85 Other (specify) ▶						
86 Total U.S. tax withheld at source. Add column (a) of lines 76a through 85. Enter the total here and on Form 1040NR, line 66. ▶						
87 Add lines 76a thru 85 in cols (b) - (e)	87					
88 Multiply line 87 by rate of tax at top of each column	88					
89 Tax on income not effectively connected with a U.S. trade or business. Add columns (b) through (e) of line 88. Enter the total here and on Form 1040NR, line 53. ▶						89

Capital Gains and Losses from Sales or Exchanges of Property

Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real property interest; report these gains and losses on Schedule D (Form 1040).

Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040), Form 4797, or both.

90 (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo, day, yr)	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e)	(g) GAIN If (d) is more than (e), subtract (e) from (d)
91 Add columns (f) and (g) of line 90.	91					
92 Capital gain. Combine columns (f) and (g) of line 91. Enter the net gain here and on line 84 above (if a loss, enter -0-). ▶						92

Other Information (If an item does not apply to you, enter 'N/A'.)**A** What country issued your passport?INDIA**B** Were you ever a U.S. citizen? ☐ Yes ☒ No**C** Give the purpose of your visit to the United States ▶EMPLOYMENT**D** Type of entry visa. ☐ H1B

and current nonimmigrant status and date of change

(see instrs) ▶ N/A**E** Date you entered the United States (see instructions)▶ 3/06/05**F** Did you give up your permanent residence as an immigrant in the United States this year? ☐ Yes ☒ No**G** Dates you entered and left the United States during the year. Residents of Canada or Mexico entering and leaving the United States at frequent intervals, give name of country only. ▶DATE OF ENTRY-01/01/2006.DATE OF EXIT- 03/14/2006.**H** Give number of days (including vacation and nonwork days) you were present in the United States during:2004 N/A, 2005 49, and 2006 72.**I** If you are a resident of Canada, Mexico, or the Republic of Korea (South Korea), or a U.S. national, did your spouse contribute to the support of any child claimed on Form 1040NR, line 7c? ☐ Yes ☒ NoIf 'Yes,' enter amount ▶ \$ N/A

If you were a resident of the Republic of Korea (South Korea) for any part of the tax year, enter in the space below your total foreign source income not effectively connected with a U.S. trade or business. This information is needed so that the exemption for your spouse and dependents residing in the United States (if applicable) may be allowed in accordance with Article 4 of the income tax treaty between the United States and the Republic of Korea (South Korea).

Total foreign source income not effectively connected with a U.S. trade or business ▶ \$ N/A

J Did you file a U.S. income tax return for any year before 2006? ☒ Yes ☐ No

If 'Yes,' give the latest year and form number ▶

1040 NR**K** To which Internal Revenue office did you pay any amounts claimed on Form 1040NR, lines 60, 63, and 65? N/A**L** Have you excluded any gross income other than foreign source income not effectively connected with a U.S. trade or business? ☐ Yes ☒ No

If 'Yes,' show the amount, nature, and source of the excluded income. Also, give the reason it was excluded. (Do not include amounts shown in item M.) ▶

N/A**M** If you are claiming the benefits of a U.S. income tax treaty with a foreign country, give the following information. See the instructions for additional information.• Country ▶ INDIA (UNDER ARTICLE 21 (2))

• Type and amount of effectively connected income exempt from tax. Also, identify the applicable tax treaty article. Do not enter exempt income on lines 8, 9a, 10a, 11-15, 16b, or 17b-21 of Form 1040NR:

For 2006 (also, include this exempt income on line 22 of Form 1040NR) ▶

N/AFor 2005 ▶ N/A

• Type and amount of income not effectively connected that is exempt from or subject to a reduced rate of tax. Also, identify the applicable tax treaty article:

For 2006 ▶

N/AFor 2005 ▶ N/A

• Were you subject to tax in that country on any of the income you claim is entitled to the treaty benefits? ☐ Yes ☒ No

• Did you have a permanent establishment or fixed base (as defined by the tax treaty) in the United States at any time during 2006? ☐ Yes ☒ No

N If you file this return to report community income, give your spouse's name, address, and identifying number.N/A**O** If you file this return for a trust, does the trust have a U.S. business? ☐ Yes ☒ No

If 'Yes,' give name and address ▶

P Is this an 'expatriation return' (see instructions)? ☐ Yes ☒ No

If 'Yes,' you must attach an annual information statement.

Q During 2006, did you apply for, or take other affirmative steps to apply for, lawful permanent resident status in the United States or have an application pending to adjust your status to that of a lawful permanent resident of the United States? ☐ Yes ☒ No

If 'Yes,' explain ▶

R Check this box if you have received compensation income of \$250,000 or more and you are using an alternative basis to determine the source of this compensation income (see instructions) ☐

2006

Federal Statements

Page 1

ANAND NIDAMANURU

337-04-3179

Statement 1
Form 1040-NR
Wage Schedule

<u>Taxpayer - Employer</u>	<u>Wages</u>	<u>Federal W/H</u>	<u>FICA</u>	<u>Medi- care</u>	<u>State W/H</u>	<u>Local W/H</u>
INFOSYS TECHNOLOGIES LTD	<u>11,932.</u>	<u>1,775.</u>	<u>740.</u>	<u>173.</u>	<u>518.</u>	
Grand Total	<u>11,932.</u>	<u>1,775.</u>	<u>740.</u>	<u>173.</u>	<u>518.</u>	<u>0.</u>

DO NOT FILE

2006 TAX RETURN

Illinois Individual

Client: I-9539

Prepared for: ANAND NIDAMANURU
3406 78TH STREET CT
MOLINE, IL 61265

Prepared by: Laxmi P Palaypu
IBSN INC
3406 78TH STREET CT
MOLINE, IL 61265
(866) 4276829

Date: June 8, 2007

Comments:

DO NOT FILE

Route to: _____



Step 1: Personal Information

337-04-3179

ANAND NIDAMANURU

3406 78TH STREET CT

MOLINE, IL 61265

C Filing status (see instructions)

☒ Single or head of household ☐ Married filing jointly ☐ Married filing separately ☐ Widowed

▼ Step 2: Income

- | | | | |
|---|---|---|---------|
| 1 | Federal adjusted gross income from your U.S. 1040, Line 37; U.S. 1040A, Line 21; U.S. 1040EZ, Line 4 | 1 | 11,932. |
| 2 | Federally tax-exempt interest and dividend income from your U.S. 1040 or 1040A, Line 8b; or U.S. 1040EZ | 2 | |
| 3 | Other additions to your income. Attach Schedule M | 3 | |
| 4 | Add Lines 1 through 3. This is your total income | 4 | 11,932. |

Step 3: Base Income

- | | | | |
|----|--|--------------------------|---------|
| 5 | Income received from Social Security benefits and certain retirement plans if included in Step 2, Line 1. Attach federal page 1 | 5 | |
| 6 | Military pay earned if included in Step 2, Line 1. Attach military W-2 | 6 | |
| 7 | Illinois Income Tax overpayment included in U.S. 1040, Line 10 | 7 | |
| 8 | U.S. Treasury bonds, bills, notes, savings bonds, and U.S. agency interest from U.S. 1040, Schedule B, or U.S. 1040A, Schedule | 8 | |
| 9 | Other subtractions to your income. Attach Schedule M | 9 | |
| | Check if Line 9 includes any amount from Schedule 1299-C | <input type="checkbox"/> | |
| 10 | Add Lines 5 through 9. This is the total of your subtractions | 10 | |
| 11 | Subtract Line 10 from Line 4. This is your Illinois base income | 11 | 11,932. |

Step 4: Exemptions

See instructions before completing Line 12.

- | | | | | |
|-----|--|-------------|----|--------|
| 12a | Number of exemptions from your federal return | 1 x \$2,000 | a | 2,000. |
| b | If someone else claimed you or your spouse as a dependent on their return, see instructions to figure the number to enter here | x \$2,000 | b | |
| c | Check if 65 or older: <input type="checkbox"/> You + <input type="checkbox"/> Spouse = | x \$1,000 | c | |
| d | Check if legally blind: <input type="checkbox"/> You + <input type="checkbox"/> Spouse = | x \$1,000 | d | |
| | Add Lines a through d. This is your total Illinois exemption allowance | | 12 | 2,000. |

▼ Step 5: Net Income

- | | | | |
|----|---|----|--------|
| 13 | Residents only: Subtract Line 12 from Line 11. This is your net income. <i>Skip Line 14.</i> | 13 | |
| 14 | Nonresidents and part-year residents only: Check the box that applies to you during the year 2006: <input type="checkbox"/> Nonresident <input checked="" type="checkbox"/> Part-year resident, and enter the Illinois base income from Schedule NR. Attach Schedule NR | 14 | 5,118. |

Step 6: Tax

- | | | | |
|----|---|----|------|
| 15 | Residents: Multiply Line 13 by 3% (.03). Enter the result here. This is your tax . Nonresidents and part-year residents: Enter the tax from Schedule NR. This amount may not be less than zero. | 15 | 128. |
|----|---|----|------|

This form is authorized as outlined by the Illinois Income Tax Act. Disclosure of this information is REQUIRED. Failure to provide information could result in a penalty. This form has been approved by the Forms Management Center. IL-492-0065

16 Tax amount from Page 1, Step 6, Line 15. 16 128.

Step 7: Payments and Credits

Nonresidents
may not
claim a credit
on
Lines 19, 20,
or 21.The total of
Lines 19,
20b, and 21b
may not
exceed the
tax amount
on Line 16.

17 Illinois Income Tax withheld. **Attach** W-2 and 1099 forms. 17 154.

18 Estimated payments from Forms IL-505-I and IL-1040-ES including overpayment applied from 2005 return. 18

19 Income tax paid to another state while an Illinois resident. **Attach** Schedule CR and other states' returns. 19

20 Illinois Property Tax credit. **Complete the PT Worksheet in instructions.**

PT Worksheet Line 3 amount. 20a

PT Worksheet Line 8 amount. 20b

21 K-12 education expense credit. **Complete ED Worksheet in instructions or Schedule ED. Attach** receipt or Schedule ED.

ED Worksheet or Schedule ED Line 1 amount. 21a

ED Worksheet or Schedule ED Line 10 amount. 21b

22 Earned Income Credit. **Complete EIC Worksheet in instructions.**

EIC Worksheet Line 1 amount. 22a

EIC credit amount from the EIC worksheet. 22b

Check if you have a qualifying child (living with you) born after 12/31/88 ☐

23 Income tax credit amount from Schedule 1299-C. **Attach** Schedule 1299-C. 23

24 Add Lines 17, 18, 19, 20b, 21b, 22b, and 23. This is the total of your payments and credits. 24 154.

Step 8: Overpayment or Tax Due

25 If Line 24 is greater than Line 16, subtract Line 16 from Line 24. This is your **overpayment**. 25 26.

26 If Line 16 is greater than Line 24, subtract Line 24 from Line 16. This is your **tax due**. 26

Step 9: Penalty

27 Late-payment penalty for underpayment of estimated tax. 27

a Check if you annualized your income on Form IL-2210, Step 6, or if you are 65 or older and permanently living in a nursing home. **Attach** Form IL-2210. ☐

b Check if at least two-thirds of your federal gross income is from farming. ☐

Step 10: Donations Any donation will reduce your refund or increase the amount you owe

Make 'Giving'
Easy!

28 Amount you wish to donate to one or more of the following voluntary contribution funds:

Wildlife	a	Multiple Sclerosis	f	Pet Population	k
Child Abuse	b	Military Family	g	Energy Assistance	l
Alzheimer's	c	Lou Gehrig's	h	Heartsaver AED	m
Homeless	d	IL Veterans' Home	i		
Breast Cancer	e	Diabetes	j		

Add Lines a through m. This is your donations total. 28

29 Add Line 27 and Line 28. This is your total penalty and donations. 29

Step 11: Refund or Amount You Owe

Direct
Deposit ▶See
instructions
for payment
options.

30 If you have an overpayment on Line 25 and this amount is greater than Line 29, subtract Line 29 from Line 25. 30 26.

31 Amount from Line 30 that you want applied to your 2007 estimated tax. 31

32 Subtract Line 31 from Line 30. This is your **refund**. 32 26.

33 Complete to direct deposit your refund

Routing number 075911988 ☒ Checking or ☐ Savings

Account number 1252286818

34 If you have tax due on Line 26, add Lines 26 and 29. **or** If you have an overpayment on Line 25 and this amount is less than Line 29, subtract Line 25 from Line 29. This is the **amount you owe**. 34

Step 12: Sign and Date

Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete.

Your signature	Date	Daytime phone number	Your spouse's signature	Date
Laxmi P Palaypu		(866) 4276829	04-3634467	
Paid preparer's signature	Date	Preparer's phone number	Preparer's FEIN, SSN, or PTIN	

IBSN INC 3406 78TH STREET CT MOLINE, IL 61265

If no payment enclosed, mail to:	ILLINOIS DEPARTMENT OF REVENUE SPRINGFIELD, IL 62719-0001	If payment enclosed, mail to:	ILLINOIS DEPARTMENT OF REVENUE SPRINGFIELD, IL 62726-0001
----------------------------------	--	-------------------------------	--

DR _____ AP _____ CA DE EL EV LP ME MO PR RM RR TT TV WA WT WV ZZ



Illinois Department of Revenue

2006 Schedule NR**Nonresident and Part-Year Resident Computation of Illinois Tax****Step 1: Provide the following information****Attach to your Form IL-1040**
Attachment No. 2

1 <u>ANAND</u> <small>Your first name and initial</small>	<u>NIDAMANURU</u> <small>Spouse's first name (and last name if different)</small>	<u>NIDAMANURU</u> <small>Your last name</small>
2a <u>337-04-3179</u> <small>Your Social Security number</small>	b _____ <small>Your spouse's Social Security number</small>	
3 Were you, or your spouse if 'married filing jointly,' a full-year resident of Illinois during the tax year? <div style="display: flex; justify-content: space-around;"><div><input type="checkbox"/> Yes</div><div><input checked="" type="checkbox"/> No</div><div> If you answered 'Yes,' you cannot use this form (see instructions).</div></div>		
4 If you, or your spouse if 'married filing jointly,' were a part-year resident during the tax year, tell us your residency dates for 2006.		
a I lived in Illinois from <u>1/01/06</u> to <u>2/14/06</u> I lived in _____ from _____ to _____ <div style="display: flex; justify-content: space-between;"><div><small>Month Day Year</small></div><div><small>Month Day Year</small></div><div><small>State</small></div><div><small>Month Day Year</small></div><div><small>Month Day Year</small></div></div>		
b My spouse lived in Illinois from _____ to _____ My spouse lived in _____ from _____ to _____ <div style="display: flex; justify-content: space-between;"><div><small>Month Day Year</small></div><div><small>Month Day Year</small></div><div><small>State</small></div><div><small>Month Day Year</small></div><div><small>Month Day Year</small></div></div>		
5 If you were a resident of any of the states listed below during the tax year, check the appropriate state. <div style="display: flex; justify-content: space-around;"><div><input type="checkbox"/> Iowa</div><div><input type="checkbox"/> Kentucky</div><div><input type="checkbox"/> Michigan</div><div><input checked="" type="checkbox"/> Wisconsin</div></div>		
6 If you earned income or filed an income tax return for the tax year in a state other than those listed above, enter the two-letter abbreviation of that state. _____		

Step 2: Complete Form IL-1040

Complete Lines 1 through 12 of your Form IL-1040, Individual Income Tax Return, as if you were a full-year Illinois resident. Then, complete the remainder of this schedule following the instructions for your residency. **Attach Schedule NR to your Form IL-1040.**

Step 3: Figure the Illinois portion of your federal adjusted gross income

Enter the amounts from your federal return in **Column A**. Before completing **Column B**, read the **Column B** instructions.

		Column A Federal Total	Column B Illinois Portion
7	Wages, salaries, tips, etc. (federal Form 1040 or 1040A, Line 7; 1040EZ, Line 1).....	<u>11,932.</u>	<u>5,118.</u>
8	Taxable interest income (federal Form 1040 or 1040A, Line 8a; 1040EZ, Line 2).....	_____	_____
9	Ordinary dividend income (federal Form 1040 or 1040A, Line 9a).....	_____	_____
10	Taxable refunds, credits, or offsets of state and local income tax (federal Form 1040, Line 10).....	_____	_____
11	Alimony received (federal Form 1040, Line 11).....	_____	_____
12	Business income or loss (federal Form 1040, Line 12).....	_____	_____
13	Capital gain or loss (federal Form 1040, Line 13 or 1040A, Line 10).....	_____	_____
14	Other gains or losses (federal Form 1040, Line 14).....	_____	_____
15	Taxable IRA distributions (federal Form 1040, Line 15b; or 1040A, Line 11b).....	_____	_____
16	Taxable pensions and annuities (federal Form 1040, Line 16b; or 1040A, Line 12b).....	_____	_____
17	Rents, royalties, partnerships, S corporations, estates, and trusts (federal Form 1040, Line 17).....	_____	_____
18	Farm income or loss (federal Form 1040, Line 18).....	_____	_____
19	Unemployment compensation, Alaska Permanent Fund dividends, and jury duty fees (federal Form 1040, Line 19; 1040A, Line 13; 1040EZ, Line 3).....	_____	_____
20	Taxable Social Security benefits (federal Form 1040, Line 20b; or 1040A, Line 14b).....	_____	_____
21	Other income (federal Form 1040, Line 21). Include winnings from the Illinois State Lottery as Illinois income in Column B.....	_____	_____
22	Add Column B, Lines 7 through 21. This is the Illinois portion of your federal total income.....	22	<u>5,118.</u>

Continue with Step 3 on Page 2

Step 3: Continued

		Column A Federal Total	Column B Illinois Portion
23	Enter the Illinois portion of your federal total income from Page 1, Step 3, Line 22	23	5,118.
24	Deduction for Archer MSA (federal Form 1040, Line 23)	24	
25	Certain business expenses of reservists, performing artists, and fee-based government officials (federal Form 1040, Line 24)	25	
26	Deduction for health savings account (federal Form 1040, Line 25)	26	
27	Moving expenses (federal Form 1040, Line 26)	27	
28	Deduction for one-half of self-employment tax (federal Form 1040, Line 27)	28	
29	Self-employed (SEP), SIMPLE, and qualified plans (federal Form 1040, Line 28)	29	
30	Self-employed health insurance deduction (federal Form 1040, Line 29)	30	
31	Penalty on early withdrawal of savings (federal Form 1040, Line 30; or 1040A, Line 16)	31	
32	Alimony paid (federal Form 1040, Line 31a)	32	
33	Total IRA deduction (federal Form 1040, Line 32; or 1040A, Line 17)	33	
34	Deduction for student loan interest (federal Form 1040, Line 33; or 1040A, Line 18)	34	
35	Deduction for jury duty pay (federal Form 1040, Line 34; or 1040A, Line 19)	35	
36	Domestic production activities deduction (federal Form 1040, Line 35)	36	
37	Other adjustments (see instructions)	37	
38	Add Column B, Lines 24 through 37. This is the Illinois portion of your federal adjustments to income	38	
39	Enter your adjusted gross income as reported on your federal Form 1040, Line 37; 1040A, Line 21; 1040EZ, Line 4	39 11,932.	
40	Subtract Line 38 from Line 23. This is the Illinois portion of your federal adjusted gross income	40	5,118.

Step 4: Figure your Illinois additions and subtractions

In Column A, enter the total amounts from your Form IL-1040. You must read the instructions for Column B to properly complete this step.

		Column A Form IL-1040 Total	Column B Illinois Portion
41	Federally tax-exempt interest income (Form IL-1040, Line 2)	41	
42	Other additions (Form IL-1040, Line 3)	42	
43	Add Column B, Lines 40, 41, and 42. This is the Illinois portion of your total income	43	5,118.
44	Federally taxed Social Security and retirement income (Form IL-1040, Line 5)	44	
45	Military pay earned and included in your adjusted gross income (Form IL-1040, Line 6)	45	
46	Illinois Income Tax overpayment included on your U.S. 1040, Line 10 (Form IL-1040, Line 7)	46	
47	U.S. Treasury bonds, bills, notes, savings bonds, and U.S. agency interest (Form IL-1040, Line 8)	47	
48	Other subtractions (Form IL-1040, Line 9)	48	
49	Add Column B, Lines 44 through 48. This is the total of your Illinois subtractions	49	

Step 5: Figure your Illinois income and tax

50	Subtract Line 49 from Line 43. If Line 49 is larger than Line 43, enter zero. This is your Illinois base income	50	5,118.
	Enter this amount on your Form IL-1040, Line 14. If Line 50 is zero, skip Lines 51 through 55, and enter '0' on Line 56.		
51	Enter the base income from Form IL-1040, Line 11	51 11,932.	
52	Divide Line 50 by Line 51 (carry to three decimal places). Enter the appropriate decimal. If Line 50 is greater than Line 51, enter 1.000	52 0.429	
53	Enter your exemption allowance from your Form IL-1040, Line 12	53 2,000.	
54	Multiply Line 53 by the decimal on Line 52. This is your Illinois exemption allowance	54	858.
55	Subtract Line 54 from Line 50. This is your Illinois net income	55	4,260.
56	Multiply the amount on Line 55 by 3% (.03). This amount may not be less than zero. This is your tax. Enter this amount on your Form IL-1040, Line 15.	56	128.

This form is authorized as outlined by the Illinois Income Tax Act. Disclosure of this information is REQUIRED. Failure to provide information could result in a penalty. This form has been approved by the Forms Management Center. IL-492-0098

2006 TAX RETURN

Wisconsin Individual

Client: I-9539

Prepared for: ANAND NIDAMANURU
3406 78TH STREET CT
MOLINE, IL 61265

Prepared by: Laxmi P Palaypu
IBSN INC
3406 78TH STREET CT
MOLINE, IL 61265
(866) 4276829

Date: June 8, 2007

Comments:

DO NOT FILE

Route to: _____

1NPR

Nonresident & part-year resident

Wisconsin
income tax

2006

Check box
if this is an
amended
return . . . ☐For the year Jan 1 - Dec 31, 2006,
or other tax year

beginning _____, 2006

ending _____, 2006

Your social security number	Spouse's social security number
337-04-3179	

Your legal last name	Legal first name	M.I.	State election campaign fund If you want \$1 to go to the State Election Campaign Fund, check box(es). <input type="checkbox"/> You <input type="checkbox"/> Your spouse Checking the box(es) will not change your tax or refund
NIDAMANURU	ANAND		
If a joint return, spouse's legal last name	Spouse's legal first name	M.I.	

Home address (number and street)			Tax district Check proper box and fill in name of Wisconsin city, village, or town, and the county in which you lived at the end of 2006 or before leaving Wisconsin (non-residents leave blank). Fill in <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town name of city, village, or town
3406 78TH STREET CT			
City or post office	State	ZIP Code	
MOLINE	IL	61265	

Filing status

<input checked="" type="checkbox"/> Single	Special Conditions
<input type="checkbox"/> Married filing joint return (even if only one had income)	
<input type="checkbox"/> Married filing separate return. Fill in spouse's full name here <input type="text"/>	
<input type="checkbox"/> Head of household (with qualifying person) (see instructions)	
Also, check here if married. <input type="checkbox"/>	

County of _____

School district Fill in
your school district
number (see instructions)

Resident status Check the box(es) that applies

<input type="checkbox"/> Full-year resident of Wisconsin
<input type="checkbox"/> Nonresident of Wisconsin; Resident of _____ (state)
<input checked="" type="checkbox"/> Part-year resident of Wisconsin from 2/15 to 3/14 (month/day)

NOTE If you changed your legal residence from Wisconsin to another state during 2006, complete the residence questionnaire in the instructions.

Income

	A Federal column	B Wisconsin column
1 Wages, salaries, tips, etc (see instructions).....	11,932 .	6,814 .
2 Taxable interest (see instructions)
3 Ordinary dividends (see instructions).....	.	.
4 Taxable refunds, credits, or offsets of state and local income taxes (from federal Form 1040, line 10).....	.	Not taxable
5 Alimony received (from federal Form 1040, line 11).....	.	.
6 Business income or (loss) (from federal Form 1040, line 12).....	.	.
7 Capital gain or (loss) (see instructions).....	.	.
8 Other gains or (losses) (from federal Form 1040, line 14).....	.	.
9 IRA distributions (see instructions).....	.	.
10 Pensions and annuities (see instructions).....	.	.
11 Rental real estate, royalties, partnerships, S corporations, trusts, etc. (from federal Form 1040, line 17).....	.	.
12 Farm income or (loss) (from federal Form 1040, line 18).....	.	.
13 Unemployment compensation (see instructions).....	.	.
14 Social security benefits (see instructions).....	.	.
15 Other income (see instructions).....	.	.
16 Add lines 1 through 15.....	11,932 .	6,814 .

Adjustments to Income

		A Federal column	B Wisconsin column
17 Archer MSA deduction (see instructions)	17	.	.
18 Certain business expenses of reservists, performing artists, and fee-basis government officials (see instructions)	18	.	.
19 Health savings account deduction (see instructions)	19	Not deductible for Wisconsin	
20 Moving expenses (see instructions)	20	.	.
21 One-half of self-employment tax (from federal Form 1040, line 27)	21	.	.
22 Self-employed SEP, SIMPLE, and qualified plans (see instructions)	22	.	.
23 Self-employed health insurance deduction (see instructions)	23	.	.
24 Penalty on early withdrawal of savings (from federal Form 1040, line 30)	24	.	.
25 Alimony paid (from federal Form 1040, line 31a)	25	.	.
26 IRA deduction (see instructions)	26	.	.
27 Student loan interest deduction (see instructions)	27	.	.
28 Jury duty pay you gave to your employer (see instructions)	28	.	.
29 Domestic production activities deduction (see instructions)	29	.	.
30 Other adjustments included in federal Form 1040, line 36 (list type and amount) _____	30	.	.
31 Total adjustments to income. Add lines 17 through 30.	31	.	.

Adjusted Gross Income

32 Wisconsin income. Subtract line 31, column B from line 16, column B.	32		6,814 .
33 Federal income. Subtract line 31, column A from line 16, column A	33	11,932 .	
34 Divide line 32 by line 33. Carry the decimal to four places. If the amount on line 32 is more than the amount on line 33, fill in 1.00. (See instructions)	34		0.5711

Tax Computation

35 Fill in the larger of Wisconsin income from line 32, column B or federal income from line 33, column A. But , if Wisconsin income from line 32 is zero or less, fill in 0 (zero)	35	11,932 .
36a If you (or your spouse) can be claimed as a dependent on anyone else's return, check this box and see the 'Exception' in the instructions for line 36c on page 20	36 a	<input type="checkbox"/>
36b Aliens (see instructions to determine if you must check this box)	36 b	<input checked="" type="checkbox"/>
36c Find the standard deduction for amount on line 33 using table in instructions.	36 c	.
37 Subtract line 36c from line 35. If line 36c is more than line 35, fill in 0 (zero)	37	11,932 .
38a Deduction for exemptions (from line 6 of Exemption Worksheet, page 21)	38 a	700 .
38b Fill in number of dependents (do not count yourself or your spouse)	38 b	.
38c If you (or your spouse if filing jointly) were age 65 or over, check here.	38 c	<input type="checkbox"/> You <input type="checkbox"/> Spouse
39 Subtract line 38a from line 37. If line 38a is more than line 37, fill in 0 (zero)	39	11,232 .
40 Tax (see table in instructions)	40	550 .
41 Itemized deduction credit. Complete Schedule 1 (page 4, Form 1NPR)	41	.
42 School property tax credit (Part-year and full-year residents only)		
a Rent paid in 2006 — heat included _____		
Rent paid in 2006 — heat not included _____	42a	.
b Property taxes paid on home in 2006 _____	42b	.
43 Add credits lines 41, 42a, and 42b.	43	.
44 Subtract line 43 from line 40. If line 43 is more than line 40, fill in 0 (zero)	44	550 .
45 Fill in ratio from line 34.	45	x 0.5711 .
46 Multiply line 44 by ratio on line 45.	46	314 .



Name(s) as shown on Form 1NPR

Your social security number

ANAND NIDAMANURU

337-04-3179

47	Fill in amount from line 46	47	314 .
48	Armed forces member credit (Full-year Wisconsin residents only)	48	.
49	Historic rehabilitation credits	49	.
50	Working families tax credit (Full-year Wisconsin residents only)	50	.
51	Add lines 48, 49, and 50	51	.
52	Subtract line 51 from line 47. If line 51 is more than line 47, fill in 0 (zero)	52	314 .
53	Alternative minimum tax. Enclose Schedule MT	53	.
54	Add lines 52 and 53	54	314 .
55	Married couple credit. Complete Schedule 2 (page 4, Form 1NPR)	55	.
56	Other credits		
	a Sch. MS	e Sch. VC (Part I)	.
	b Sch. DI	f Sch. VC (Part II)	.
	c Sch. DC	g Sch. OS	.
	d Sch. TC		.
	h Total (add lines a through g)	56h	.
57	Add lines 55 and 56h	57	.
58	Subtract line 57 from line 54. If line 57 is more than line 54, fill in 0 (zero). This is your net tax	58	314 .
59	Recycling surcharge. Enclose Schedule RS	59	.
60	Sales and use tax due on out-of-state purchases (see instructions)	60	.
61	Donations (decreases refund or increases amount owed)		
	• Endangered resources a	• Multiple sclerosis MS e	.
	• Packers football stadium b	• Firefighters memorial f	.
	• Breast cancer research c	• Prostate cancer research g	.
	• Veterans trust fund VETS d	Total (add lines a through g)	61h
62	Penalties on IRAs, other retirement plans, MSAs, etc (see instrs)	x .33 =	62
63	Credit repayments and other penalties (see instrs)		63
64	Add lines 58 through 63		64
			314 .



Payments and Credits

65	Wisconsin income tax withheld. Enclose readable withholding statements	65	364 .
66	2006 Wisconsin estimated tax paid and amount applied from 2005 return	66	.
67	Earned income credit. (Full-year Wisconsin residents only)		
	Number of qualifying children		
	Federal credit	x % =	67
68	Farmland preservation credit. (Full-year Wisconsin residents only)	68	.
69	Repayment credit	69	.
70	Homestead credit. (Full-year Wisconsin residents only)	70	.
71	Farmland tax relief credit (Full-year Wisconsin residents only)		
	Fill in property taxes on farmland	x .23 =	71
72	Eligible veterans and surviving spouses property tax credit	72	.
73	Add lines 65 through 72	73	364 .

Refund or Amount You Owe

74	If line 73 is more than line 64, subtract line 64 from line 73. This is the AMOUNT YOU OVERPAID	74	50 .
75	Amount of line 74 you want REFUNDED TO YOU	75	50 .
76	Amount of line 74 to be APPLIED TO YOUR 2007 ESTIMATED TAX	76	.
77	If line 73 is less than line 64, subtract line 73 from line 64. This is the AMOUNT YOU OWE	77	.
78	Underpayment interest. Also include on line 77. <input type="checkbox"/>	78	.

**Third
Party
Designee**

Do you want to allow another person to discuss this return with the Department of Revenue?

☒ **Yes** Complete the following. ☐ **No**

Designee's

name ▶ **Laxmi P Palaypu**

Phone

no. ▶ **8664276829**Personal
identification
number (PIN)▶ **92066***Under penalties of law, I declare that this return and all attachments are true, correct, and complete to the best of my knowledge and belief.***Sign
here** ▶

Your signature

Spouse's signature (if filing jointly, BOTH must sign)

Date

Mail your return to: Wisconsin Department of Revenue

For Department Use Only

(if tax is due)

P.O. Box 268

Madison WI 53790-0001

(if refund or no tax due)

P.O. Box 59

Madison WI 53785-0001

R T MAN D A C

Schedule 1 — Wisconsin Itemized Deduction Credit
(see line 41 instructions)

04-3634467

IBSN INC

3406 78TH STREET CT

MOLINE, IL 61265

1	Medical and dental expenses from line 4, federal Schedule A. See instructions for exceptions.	1	.
2	Interest paid from line 14, federal Schedule A. See instructions for exceptions.	2	.
3	Gifts to charity from line 18, federal Schedule A. See instructions for exceptions.	3	.
4	Add lines 1 through 3.	4	.
5a	Wisconsin standard deduction from Form 1NPR, line 36c.	5a	.
5b	Ratio from Form 1NPR, line 34.	5b	X 0.5711
5c	Multiply line 5a by ratio on line 5b. Fill in the result on line 5c.	5c	.
6	Subtract line 5c from line 4. If line 5c is more than line 4, fill in 0 (zero)	6	0 .
7	Rate of credit is .05 (5%)	7	x .05
8	Multiply line 6 by line 7. Fill in here and on line 41 of Form 1NPR.	8	.

Schedule 2 — Married Couple Credit May be claimed only when both spouses have earned income taxable by Wisconsin.

(A) YOURSELF

(B) YOUR SPOUSE

1	Wages, salaries, tips, etc., included in column B of line 1 on Form 1NPR. Do not include deferred compensation (even though reported on a W-2) or taxable scholarships or fellowships not reported on a W-2.	1	.	.
2	Net profit or loss from self-employment from federal Schedules C, C-EZ, and F (Form 1040), Schedule K-1 (Form 1065), and any other taxable self-employment or earned income included in column B on Form 1NPR.	2	.	.
3	Combine lines 1 and 2. This is your total Wisconsin earned income.	3	.	.
4	Add amounts on Form 1NPR, lines 18, 22, 26, and 30, column B. Fill in the total of these adjustments that apply to you or your spouse's income.	4	.	.
5	Subtract line 4 from line 3. This is your qualified earned income.	5	.	.
6	Compare the amount in columns (A) and (B) of line 5. Fill in the smaller amount here. If more than \$16,000, fill in \$16,000.	6	.	.
7	Rate of credit is .03 (3%)	7	x .03	.
8	Multiply line 6 by line 7. Round the result and fill in here and on line 55 of Form 1NPR. Do not fill in more than \$480.	8	.	.



LEGAL RESIDENCE (DOMICILE) QUESTIONNAIRE

Your answers to these questions will be used to determine your legal residence. Certain types of income are either taxable or nontaxable to Wisconsin based upon whether you were a legal resident of Wisconsin at the time you received such income. Form 1NPR may be returned to you or its processing delayed if the questionnaire is not completed. If the questionnaire does not fit your situation or you want to submit additional information, enclose an additional sheet describing your particular circumstances.

NAME(S) ANAND NIDAMANURU

SOCIAL SECURITY NO. 337-04-3179

Please ☒ one: (If married and checking a different box for husband and wife, indicate (H) or (W) next to the appropriate box)

- ☐ Full-year Wisconsin resident; did not change domicile from Wisconsin during 2006.
- ☒ Changed legal residence from Wisconsin during 2006; have not moved back to Wisconsin.
- ☐ Changed legal residence from Wisconsin during or before 2006; have moved back to Wisconsin.
- ☐ Changed legal residence to Wisconsin from _____ (state) on _____ (date) during 2006; no previous Wisconsin residency. If you check this box, do not complete the rest of the questionnaire.
- ☐ Was a nonresident of Wisconsin for all of 2006. Resident of _____
(Nonresident alien; please indicate country)

If you changed your legal residence from Wisconsin during 2005 or 2006 and you did not previously complete a questionnaire for that change, answer the following questions.

- 1 a On what date did you move from Wisconsin? 3/14/06
- b When you moved from Wisconsin, did you intend to move back to Wisconsin? If yes, when?
- c If you moved back to Wisconsin, indicate date and explain the circumstances under which you moved back to Wisconsin.
- 2 Did you establish a legal residence in another state? If yes, in which state and on what date?
OUTSIDE OF US 3/14/06
- 3 After establishing legal residency in the new state, list the dates you were in Wisconsin.
- 4 When were you physically present in your new state of legal residence (please list dates)?
- 5 Did your spouse and dependent children (if any) move to your new state of legal residence? If yes, when?
- 6 a On what date did you begin working in your new state of legal residence?
- b Was your job ☐ permanent, ☐ temporary, or ☐ seasonal? Check one and explain
- 7 In your new state of legal residence, referred to in question 2, did you:
- a Register to vote? If yes, when? If no, why not?
- b Purchase a home? If yes, when? If no, why not?
- c Obtain a driver's license? If yes, when? If no, why not?
- d Register an auto or other vehicle? If yes, when? If no, why not?
- e File resident income tax returns? If yes, what years filed? If no, why not?
- 8 Since changing your legal residence from Wisconsin, have you:
- a Performed services for income in Wisconsin? If yes, when?
- b Purchased Wisconsin auto license plates? If yes, when?
- c Renewed a Wisconsin driver's license? If yes, when?
- d Voted in Wisconsin, in person or by absentee ballot? If yes, when?
- e Attended or sent your children to Wisconsin schools? If yes, when?
- f Purchased a Wisconsin resident hunting, fishing, or trapping license? If yes, when?
- Type of license? _____ County purchased in? _____
- g Listed Wisconsin as your state of legal residence for purposes of your auto insurance? NO
- h Listed Wisconsin as your state of legal residence for purposes of your will? NO
- i Listed Wisconsin as your state of legal residence for purposes of any legal proceedings? If yes, when?
- j Obtained or renewed any Wisconsin trade or professional licenses or union memberships? If yes, when?
- 9 If you answered 'yes' to any of the questions 8a through 8j, please explain why you have taken such action.
- 10 Did you or your spouse own the real estate you occupied as your home while living in Wisconsin? NO If yes, have you disposed of it? _____ If yes, when? _____ If you still own the Wisconsin home, what use do you make of it and how often?
- 11 If you established a legal residence in a new state but are using a Wisconsin address on your 2006 tax returns, please explain.