Form 8879
(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpay	er's name	Social secur	ity numbe	er						
SUR	YA ANIRUDH YAKALA	673-52-8287								
Spouse	's name	Spouse's so	cial secur	ity number						
Par	Tax Return Information – Tax Year Ending December 31, 2023 (Enter	ˈ year you :	are auth	norizing.)						
Enter	whole dollars only on lines 1 through 5.									
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.									
1	Adjusted gross income		1	22,480.						
2	Total tax		2	863.						
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	1,238.						
4	Amount you want refunded to you		4	375.						
5	Amount you owe		5							

Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

X	l authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	4
				ERO firm name		E

2	8	2	8	7	as mv
Ent don	er fiv i't en	ve di Iter a	gits, all ze	but ros	asiny

signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date 🕨

Spouse's PIN: check one box only

I authorize

to	enter	or	generate	my	PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature	ate 🕨							 				
Practitioner PIN Method Returns Only—continue below												
Part III Certific	ication and Authentication – Practitioner PIN Method Only											
ERO's EFIN/PIN. En	nter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2			6 nter a		 2	7	1	

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >	Date 🕨		
ERO Must Retain This Fo Don't Submit This Form to the II			
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 03/07/24 PRO	Form 8879 (Rev. 01-2021)

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta >		turn	202	3	OMB No. 1545	-0074	IRS Use Onl	y—Do not v	rite or st	aple in this space.
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See se	parate	instructions.
Your first name	and m	iddle initial	Last r	name						Your so	cial sec	curity number
SURYA AN			YAK	ALA								8287
		s first name and middle initial	Last r									I security number
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	pt. no.	Preside	ntial Ele	ection Campaigr
11500 I	LAGO	VISTA EAST									,	ou, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP co	ode			jointly, want \$3 nd. Checking a
DALLAS						TΣ	ζ.	752	34			not change
Foreign country	/ name			Foreign p	rovince/state/	count	ty	Foreig	n postal code	your ta	_	_
											Y	ou Spouse
Filing Status	; 🛛	Single					Head of he	ouseh	old (HOH)			
Check only		Married filing jointly (even if only o	ne hac	l income)			_					
one box.		Married filing separately (MFS)							ing spouse	. ,		
		you checked the MFS box, enter the			pouse. If you	u che	ecked the HOF	l or QS	SS box, ent	er the ch	ild's na	me if the
	qu	alifying person is a child but not you	ir depe	endent:								
Digital	At ar	ny time during 2023, did you: (a) rece	eive (a	s a reward	d, award, or	payr	ment for prope	rty or :	services); o	r (b) sell,		
Assets	exch	nange, or otherwise dispose of a digi	ital ass	set (or a fi	nancial inter	est ir	n a digital asse	et)? (Se	e instructio	ons.)	Y	es 🛛 No
Standard	Som	neone can claim: 🗌 You as a de	pende	nt 🗌	Your spous	e as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	alien	1					
Age/Blindness	S You	: Were born before January 2, 1	959	🗌 Are b	lind Spo	ouse	: 🗌 Was bor	n befc	ore January	2, 1959		s blind
Dependents	s (see	instructions):		(2)	Social security	,	(3) Relationsh	ip (4) Check the b	box if qual	fies for	(see instructions):
If more	•	irst name Last name		(_)	number		to you		Child tax of	credit	Credit fo	or other dependents
than four												
dependents,												
see instructions and check	s											
here 🗌												
Income	1a	Total amount from Form(s) W-2, be	ox 1 (s	ee instruc	ctions) .					. 1 a	ı	22,480.
Attach Form(s)	b	Household employee wages not re			. ,					. 1b)	
W-2 here. Also	С	Tip income not reported on line 1a						• •		. 10	-	
attach Forms W-2G and	d	Medicaid waiver payments not rep			, ,			• •		. 10	_	
1099-R if tax	e	Taxable dependent care benefits f						• •		. 1e	-	
was withheld.	f	Employer-provided adoption bene						• •		. 1f	-	
lf you did not get a Form	g L	Wages from Form 8919, line 6 .						• •		. <u>1</u> g		0.
W-2, see	h i	Other earned income (see instruction Nontaxable combat pay election (s	,	· · ·		• •	· · · · ·			. <u>1</u> h		0.
instructions.	z	Add lines 1a through 1h		structions)		• •				. 1z	,	22,480.
Attach Sch. B	2	-	2a			 ьт	axable interest	· ·		. 12	-	
if required.	3a		3a				Ordinary divider			. <u>2</u> .	-	
	4a		4a				axable amount			. 46	_	
Standard	5a		5a				axable amoun			. 5b	_	
 Deduction for — Single or 	6a		6a				axable amoun			. 6b	_	
Married filing separately,	с	If you elect to use the lump-sum e	lectior	method,	check here	(see	instructions)					
\$13,850	7	Capital gain or (loss). Attach Schee	dule D	if require	d. If not requ	uired	, check here			7		
 Married filing jointly or 	8	Additional income from Schedule	1, line	10						. 8		
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8	3. This is y	our total inc	come	e			. 9		22,480.
\$27,700 • Head of	10	Adjustments to income from Sche	dule 1	, line 26						. 10		
household,	11	Subtract line 10 from line 9. This is	your	adjusted	gross incor	ne				. 11		22,480.
\$20,800 If you checked r	12	Standard deduction or itemized	deduc	ctions (fro	m Schedule	A)				. 12	2	13,850.
any box under Standard	13	Qualified business income deduction	on fro	m Form 8	995 or Form	899	5-A			. 13	8	
Deduction,	14	Add lines 12 and 13			• • •					. 14		13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ess, enter	-0 This is y	our	taxable incom	ie .		. 15	i	8,630.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2023)

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	863.
Credits	17	Amount from Schedule 2, line	e3					17	
	18	Add lines 16 and 17						18	863.
	19	Child tax credit or credit for o	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, line	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18.	If zero or less,	enter -0				22	863.
	23	Other taxes, including self-er	nployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is y						24	863.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a 1	,238.		
	b	Form(s) 1099				25b	-	1	
	с	Other forms (see instructions				25c		1	
	d	Add lines 25a through 25c	·					25d	1,238.
	26	2023 estimated tax payment						26	
If you have a L qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from			-	28		1	
	29	American opportunity credit				29		1	
	30	Reserved for future use		-		30			
	31	Amount from Schedule 3, line				31		1 /	
	32	Add lines 27, 28, 29, and 31.				-		32	
	33	Add lines 27, 28, 29, and 31. Add lines 25d, 26, and 32. Th		-	-		• •	33	1,238.
Defined	34	If line 33 is more than line 24	-				• •	34	375.
Refund	35a	Amount of line 34 you want r	-				· ·	35a	375.
Direct deposit?	b b	Routing number 1 1 1					· Savings	55a	575.
See instructions.	d b	Account number 5 9 3					Savings		
	36								
A		Amount of line 34 you want a				36		-	
Amount You Owe	37	Subtract line 33 from line 24. For details on how to pay, go						07	
Tou Owe	00					1 1	• •	37	
	38	Estimated tax penalty (see in				38			
Third Party		you want to allow another structions	person to disc		m with the IRS?		omplete b		× No
Designee		siquee's		· · · · · Phone			onal identif		
	na	0		no.			ber (PIN)	ICation	
Sign	Un	der penalties of perjury, I declare th	at I have examined	d this return and	accompanying sche	edules and statemen	ts, and to tl	ne best	of my knowledge and
Here	be	ief, they are true, correct, and comp	olete. Declaration of	of preparer (othe	r than taxpayer) is b	ased on all information	on of which	prepare	er has any knowledge.
nere	Yo	ur signature		Date	Your occupation		If the	IRS ser	nt you an Identity
					_				IN, enter it here
Joint return?					QUALITY E		(see		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, b	oth must sign.	Date	Spouse's occupation	tion			nt your spouse an action PIN, enter it here
your records.							(see		
	Ph	one no. (979)985-7916	5	Email address	ANTRUDHYAK	ALA@GMAIL.CO	 M(
		eparer's name	Preparer's signat		I IIIIIII	Date	PTIN		Check if:
Paid		M PRIYA RAM SAGAR GUPTA	- 1		AR CIIDTA	04/13/2024	P02082	2702	Self-employed
Preparer		m's name GLOBAL TAX			JUNC OUF IA	01/10/2024			678)965-9522
Use Only		m's address 245 ROONEY		NGWICK N	J 08816			's EIN	84-3171965
Co to warm in		1040 for instructions and the lates		TIONICIC IN					Form 1040 (2023)
GO 10 WWW.IIS.go	JVITON	Tro-to for instructions and the lates	si mornation.		BAA	REV 03/07/24 PRO			Form 1040 (2023)

1NPR		L					2023
Nonresident & part-year resider	nt Fo	┘ r the year Ja	n. 1-Dec	. 31, 2023,	or other tax y	ear	
Wisconsin income tax		ginning		, 2023	ending		, 20
Check here if this is an amended retu							
Your legal last name	Legal first name	-	M.I.	Your social se	curity number		
YAKALA	SURYA ANI				67	7352828	7
If a joint return, spouse's legal last name	Spouse's legal first r	ame	M.I.	Spouse's soci	al security numbe	٢	
Home address (number and street). If you have 11500 LAGO VISTA EAS		I4 Apt. n	10.	Tax distric	t v then fill in eithe	r the name of	the Wisconsi
City or post office	State	Zip code		city, village	, or town, and	the county	in which yo
DALLAS	TX	75234		(nonresiden	end of 2023 or ts leave blank).	before leave	ng wisconsi
Foreign Country	Foreign p	rovince/state/cou	unty	1	_X_ City	Village	Towi
				City, village,	MENOMON	гœ	
Filing status	Foreign p	ostal code		or town			
X Single				County of	DUNN		
Married filing joint return (even if only one had income) [Legal last name			School dis	strict number	See page 58	3444
Married filing separate return.							
Fill in spouse's SSN above and full name here	Legal first name		M.I.	Special condition	e		
F _					804 filed with r	eturn (see pa	ge 12)
	d (see page 15)		//\			ota (000 pa	30/
Head of household, married (see Resident status Check the status that You Spouse Full-year resident of Wiscon Nonresident of Wisconsin; s	page 15) If marrie SSN ab t applies sin tate of residence	ove and full na (2-letter st	ime here tate abbre	eviation)			
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2023	Form 1NPR	Name	SURY	A ANIF	RUDH YA	KAL.	A			SSN 67352	828	87	Page 2 of 4
Adj	ustments to	Incom	9						A	A. Federal colum	n	B. Wisco	nsin column
17	Educator ex	penses						1	7		.00		.00
18	Certain busi fee-basis go	iness ex	penses o	f reservis	sts, perform	ing ar	rtists, and				.00		.00
19											.00		.00
20	Moving expe	-									.00		.00
21	Deductible p										.00		.00
22	Self-employ										.00		.00
23	Self-employ			-	-						.00		.00
24	Penalty on e										.00		.00
25	Alimony paid	-		-							.00		.00
26	IRA deductio										.00		.00
27	Student loar								_		.00		.00
28	Other adjustm										.00		.00
29	Total adjustr		,						_		.00		.00
-	usted Gross				5								
30	Wisconsin ir			ine 29, co	olumn B fror	n line	16, column	B.3	0				20480.00
31	Federal inco									22480.	00		
32	Divide line 3	30 by line	e 31. Cari	ry the dec	cimal to four	r plac	es. If amour	nt				0110	
	on line 30 is	more th	ian amou	nt on line	31, fill in 1.	0000	. (See page 2	27) 3 2	2			.9110	
Тах	Computatio	on											
33	Fill in the la column A. B	rger of V But, if Wi	Visconsir sconsin i	n income income fr	from line 30 om line 30 i), colu s zero	umn B or feo o or less, fill	deral in in 0 (ze	com ero)	e from line 31,	. 33	3	22480.00
<u>34a</u>	If you (or yo	ur spous	se) can be	e claimed	as a deper	ndent	on anyone e	else's re	eturi	n, check here			
<u>34</u> b	Aliens (see	page 28	to deterr	nine if yo	u must cheo	ck line	e 34b)				. 34	b	
340	Find the sta	ndard de	eduction	for amour	nt on line 31	l usin	g table on p	age 48			. 34	c	12298.00
35	Subtract line	e 34c fro	m line 33	3. If line 3	4c is more t	than I	ine 33, fill in	0 (zero	o) .		. 35	5	10182.00
<u>36</u>	Exemptions						-						
										700.00			
										.00	20		700.00
07	_											ic	9482.00
$\frac{37}{20}$													
38	Itemized dec										. 30		331.00
39						ge 4, r	-onn inpr).	35		.00			
<u>40</u>	Additional cl		-				00			00			
	Federal cred)% = 40		.00			
41		-		-	-	00)		m					
	Rent paid ir	n 2023–h	eat not inc	luded		$\frac{100}{00}$	Find credit from table page 32 Find credit from	41	a	.00			
	b Property ta:	xes paid	on home ii	n 2023		.00	Find credit from table page 33	m 41	b	.00			
42											. 42	2	.00
<u>43</u>													331.00
44	Fill in ratio fr	rom line	32								. 44	<u> </u>	9110
<u>45</u>	Multiply line	43 by ra	itio on lin	e 44							. 45	5	302.00



Name(s) shown on Form 1NPR Your social security number SURYA ANIRUDH YAKALA 673528287 46 Fill in amount from line 45 46 47 Working families tax credit. (Full-year Wisconsin residents only) 47	r
46 Fill in amount from line 45	
47 Working families tax credit. (Full-year Wisconsin residents only) 4700	302.00
48 Married couple credit. Complete Schedule 2 (page 4, Form 1NPR) 48 .00	
49 Nonrefundable credits from Schedule CR, line 34. Include Schedule CR 49 .00	
50 Net income tax paid to another state. Include Schedule OS 50 .00	
51 Add lines 47 through 50	.00
52 Subtract line 51 from line 46. If line 51 is more than line 46, fill in 0 (zero). This is your net tax . 52	302.00
53 Sales and use tax due on internet, mail order, or other out-of-state purchases (see page 36) 53	.00
If you certify that no sales or use tax is due, check here	
54 Donations (decreases refund or increases amount owed)	
a Endangered resources00 e Military family relief00	
b Cancer research00 f Second Harvest/Feeding Amer00	
c Veterans trust fund	
d Multiple sclerosis	
Total (add lines a through h) → 54i	.00
55 Penalties on IRAs, other retirement plans, MSAs, etc. (see page 37) ▶	.00
56 Other penalties (see page 38) 56	.00
57 Add lines 52 through 56 57	302.00
58 Wisconsin income tax withheld. Include readable withholding statements 58 678.00 59 2023 Wisconsin estimated tax paid and amount applied from 2022 return 59 .00 60 Earned income credit. (Full-year Wisconsin residents only) Number of qualifying children ▶ .00 x % = 60 .00	
61 Farmland preservation credit. a. Schedule FC, line 17 61a	
b. Schedule FC-A, line 13 61b00	
62 Repayment credit .00 63 Homestead credit. (Full-year Wisconsin residents only) 63 .00	
64 Eligible veterans and surviving spouses property tax credit 64 .00 65 Definition of the standard structure of the standard structure of the structure	
65 Refundable credits from Schedule CR, line 40 65 .00	
66 AMENDED RETURN ONLY – amount previously paid (see page 44) 66 .00 67 Add lines 58 through 66 67 8.00	
68 AMENDED RETURN ONLY – amount previously refunded (see page 44) 68 .00 69 Subtract line 68 from line 67 69	678.00
	078.00
Refund or Amount You Owe	
	376.00
	376.00
72 Amount of line 70 to be APPLIED TO YOUR 2024 ESTIMATED TAX 72 0.00	



2023	3 Form 1NPR	Paper clip a tax return a	copy of your feder nd schedules to th	al income is return.) [SSN	67352828	37	Page	4 of 4
73	If line 69 is less	than line 57, sub	otract line 69 from lin	e 57 Thi	s is the AN	IOUNT	UNDERPAID	73		.00
74	Underpayment i	nterest. Fill in ex	ception code – see	Sch. U →				74		.00
75			AMOUNT YOU OW							.00
76	-									.00
		- ,								
Th		o allow another pers	son to discuss this returr	n with the depa	artment <i>(see</i>	e page 47)?Yes C Personal	omplete	the following.	X No
Pa De	signee name	e's		Phone no. 🕨			identificati number (P	on		
	- J			,						
Und			return and all attachme	nts are true, c	correct, and	d comple		-	-	
Sig	Your signature			Ε	Date		Wisconsin Ide	ntity Prot	ection PIN (7 cha	aracters)
he										
014	Spouse's signa	ature (if filing jointly,	BOTH must sign)	Γ	Date		Wisconsin Ide	ntity Prot	ection PIN (7 cha	aracters)
Siq he	re									
	-	/isconsin Identity P	rotection PIN if you rece	eived one from	the depart	ment (se	ee page 47).			
Mai	l your return to: Wis	consin Departme	nt of Revenue				, , ,			
	(if tax is due)		(if refund or no tax	due)						
	PO Box 268 Madison WI 537	00 0001	PO Box 59 Madison WI 53	785 0001						
Sc	hedule 1 – W	isconsin Ite	emized Deduct	ion Cred	it (see lin	e 39 in	structions)			
<u>1</u>			n federal Schedule A							00
2			ıle A (Form 1040). Se							.00 00.
<u>-</u> 3			dule A (Form 1040).							.00
<u>-</u> 4			edule A (Form 1040)							.00
5	-							_		.00
6			m Form 1NPR, line					_		.00
7	Subtract line 6 fro	om line 5. If line	6 is more than line 5	, fill in 0 (zer	o)			. 7		.00
8	Rate of credit is .	05 (5%)						8	x .0	5
9	Multiply line 7 by	line 8. Fill in her	e and on line 39 of F	orm 1NPR .				. 9		.00
Sc	hedule 2 – M	arried Coup	ole Credit May be	e claimed only	when both	n spouse	es have earned	income	taxable by Wis	consin.
1	Wages, salaries,	tips, etc., includ	ed in column B of lin	e 1 on Form	1NPR.		(A) YOURSE	LF	(B) YOUR SF	OUSE
			ation (even though r					00		00
0			os not reported on a			1		.00		.00
<u>2</u>			yment from federal S (Form 1065), and an							
			cluded in column B c			2		.00		.00
3	Combine lines 1	and 2. This is yo	ur total Wisconsin ea	arned incom	е	3		.00		.00
<u>4</u>			es 18, 22, 26, and 28			A		.00		.00
E	-		bly to your or your spo your qualified earne			4 <u>-</u>		.00		.00
5 6			(A) and (B) of line 5.			5_		.00		.00
0	smaller amount h	ere. If more thar	n \$16,000, fill in \$16,	000			6		.00	
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 48 of Form 1NPR.



.00

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, include an additional sheet describing your particular circumstances.

NAME(S) SURYA ANIRUDH YAKALA

SOCIAL SECURITY NUMBER 673528287

Please ✓ one: (If married filing joint return check one box for each spouse.) You Spouse □ Full-year Wisconsin resident; did not change domicile from Wisconsin during 2023. X □ Changed legal residence from Wisconsin during 2023; have not moved back to Wisconsin. □ □ Changed legal residence from Wisconsin during or before 2023; have moved back to Wisconsin. □ □ Changed legal residence from Wisconsin form (state or country) on during 2023; no previous Wisconsin residency. If you check this box, do not complete the rest of the question during 2023; no previous Wisconsin for all of 2023. Resident of	ountry) Iy complete									
 Full-year Wisconsin resident; did not change domicile from Wisconsin during 2023. Changed legal residence from Wisconsin during 2023; have not moved back to Wisconsin. Changed legal residence from Wisconsin during or before 2023; have moved back to Wisconsin. Changed legal residence to Wisconsin from(state or country) onduring 2023; no previous Wisconsin residency. If you check this box, do not complete the rest of the question and the previous wisconsin for all of 2023. Resident of(Nonresident alien; please indicate context and please indicate context andicate context and please indicate context and please indica	uestionnaire. ountry) Iy complete									
 Changed legal residence from Wisconsin during 2023; have not moved back to Wisconsin. Changed legal residence from Wisconsin during or before 2023; have moved back to Wisconsin. Changed legal residence to Wisconsin from	uestionnaire. ountry) Iy complete									
 Changed legal residence from Wisconsin during or before 2023; have moved back to Wisconsin. Changed legal residence to Wisconsin from	uestionnaire. ountry) Iy complete									
Changed legal residence to Wisconsin from(state or country) on during 2023; no previous Wisconsin residency. If you check this box, do not complete the rest of the qu Was a nonresident of Wisconsin for all of 2023. Resident of (<i>Nonresident alien; please indicate co</i> you changed your legal residence from Wisconsin during 2022 or 2023 and you did not previousl uestionnaire for that change, answer the following questions. . a. On what date did you move from Wisconsin? 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 Did you establish a legal residence in another state? If yes, in which state and on what date?	uestionnaire. ountry) Iy complete									
during 2023; no previous Wisconsin residency. If you check this box, do not complete the rest of the question of the grade of the	uestionnaire. ountry) Iy complete									
during 2023; no previous Wisconsin residency. If you check this box, do not complete the rest of the question of the grade of the	uestionnaire. ountry) ly complete									
(Nonresident alien; please indicate content (Nonresident alien; please indicate content) (Nonresident alien; please indica	ly complete									
you changed your legal residence from Wisconsin during 2022 or 2023 and you did not previousl uestionnaire for that change, answer the following questions. a. On what date did you move from Wisconsin?	ly complete									
 uestionnaire for that change, answer the following questions. a. On what date did you move from Wisconsin?										
After establishing legal residency in the new state, list the dates you were in Wissensin										
After establishing legal residency in the new state, list the dates you were in Wissensin										
. After establishing legal residency in the new state, list the dates you were in Wisconsin.										
. When were you physically present in your new state of legal residence (please list dates)?										
. Did your spouse and dependent children (if any) move to your new state of legal residence? If yes, where the s	hen?									
. 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										
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?										
Since changing your legal residence from Wisconsin, have you:										
a. Performed services for income in Wisconsin? If yes, when?										
c. Renewed a Wisconsin driver's license? If yes, when?										
	•									
Attended an event way to bilder to Missensin extended. If we will and										
e. Attended or sent your children to Wisconsin schools? If yes, when?										
Type of license? County purchased in?										
g. Listed Wisconsin as your state of legal residence for purposes of your auto insurance?										
h. Listed Wisconsin as your state of legal residence for purposes of your will?										
i. Listed Wisconsin as your state of legal residence for purposes of any legal proceedings? If yes, where	hen?									

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? _____ 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 2023 tax returns, please explain.