| | 22 | Change of Address | | | |
|------------------------------------|---|--|----------------|--------------------|-----------------|
| Form UU (Rev. May 199 | 95) | ► Please type or print. | | OMB No | 0. 1545-1163 |
| Department of the Internal Revenue | | See instructions on back.Do not attach this form to your return | rn. | | |
| Part I | Compl | ete This Part To Change Your Home Mailing Address | | | |
| 1 □ Indi | ividual inco f your last from the s ployment Enter your s, estate, o | iis change affects: ome tax returns (Forms 1040, 1040A, 1040EZ, 1040NR, etc.) return was a joint return and you are now establishing a residence separate pouse with whom you filed that return, check here | pw. | | |
| ▶ [| Decedent's | s name Social security number | r | | |
| | | | | ocial security | number |
| 5a Spouse | e's name (firs | st name, initial, and last name) 5 | ib Spouse | 's social sec | urity number |
| 6 Prior n | ame(s). See | instructions. | : | : | |
| 7a Old ad | dress (no., s | treet, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions. | | | Apt. no. |
| 7b Spouse | e's old addre | ess, if different from line 7a (no., street, city or town, state, and ZIP code). If a P.O. box or foreign add | dress, see ir | nstructions. | Apt. no. |
| 8 New a | ddress (no., : | street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions. | | | Apt. no. |
| 9 🗌 Em 10 🛄 Em | boxes th ployment, | ete This Part To Change Your Business Mailing Address or Busine is change affects: excise, and other business returns (Forms 720, 941, 990, 1041, 1065, 1120, on returns (Forms 5500, 5500-C/R, and 5500-EZ). See instructions. | | ation | |
| | ss name | | 12b Emplo | oyer identifica | ation number |
| 13 Old ad | dress (no., s | treet, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions. | | Ro | om or suite no. |
| 14 New ad | ddress (no., : | street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions. | | Ro | om or suite no. |
| 15 New b | usiness loca | tion (no., street, city or town, state, and ZIP code). If a foreign address, see instructions. | | Ro | om or suite no. |
| Part III | Signat | ure | | | |
| Please | Daytime telep | whone number of person to contact (optional) | | | |
| Sign Here | Your signa | | owner, officer | , or representativ | e Date |
| | If joint retu | urn, spouse's signature Date Title | | | |

For Privacy Act and Paperwork Reduction Act Notice, see back of form.

Privacy Act and Paperwork Reduction Act Notice

We ask for this information to carry out the Internal Revenue laws of the United States. We may give the information to the Department of Justice and to other Federal agencies, as provided by law. We may also give it to cities, states, the District of Columbia, and U.S. commonwealths or possessions to carry out their tax laws. And we may give it to foreign governments because of tax treaties they have with the United States.

If you fail to provide the Internal Revenue Service with your current mailing address, you may not receive a notice of deficiency or a notice and demand for tax. Despite the failure to receive such notices, penalties and interest will continue to accrue on the tax deficiencies.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated average time is 16 minutes.

If you have comments concerning the accuracy of this time estimate or suggestions for making this form simpler, we would be happy to hear from you. You can write to the **Internal Revenue Service**, Attention: Tax Forms Committee, PC:FP, Washington, DC 20224. **DO NOT** send the form to this address. Instead, see **Where To File** on this page.

Purpose of Form

You may use Form 8822 to notify the Internal Revenue Service if you changed your home or business mailing address or your business location. Generally, complete only one Form 8822 to change your home and business addresses. If this change also affects the mailing address for your children who filed income tax returns, complete and file a separate Form 8822 for each child. If you are a representative signing for the taxpayer, attach to Form 8822 a copy of your power of attorney.

Note: If you moved after you filed your return and you are expecting a refund, also notify the post office serving your old address. This will help forward your check to your new address.

Prior Name(s)

If you or your spouse changed your name because of marriage, divorce, etc., complete line 6. Also, be sure to notify the **Social Security Administration** of your new name so that it has the same name in its records that you have on your tax return. This prevents delays in processing your return and issuing refunds. It also safeguards your future social security benefits.

P.O. Box

If your post office does not deliver mail to your street address and you have a P.O. box, show your box number instead of your street address.

Foreign Address

If your address is outside the United States or its possessions or territories, enter the information in the following order: number, street, city, province or state, postal code, and country. **Do not** abbreviate the country name. Be sure to include any apartment, room, or suite number in the space provided.

Employee Plan Returns

A change in the mailing address for employee plan returns must be shown on a separate Form 8822 unless the **Exception** below applies.

Exception. If the employee plan returns were filed with the same service center as your other returns (individual, business, employment, gift, estate, etc.), you do not have to use a separate Form 8822. See **Where To File** below.

Where To File

Send this form to the **Internal Revenue Service Center** shown below for your old address. But if you checked the box on line 10 (employee plan returns), send it to the address shown in the far right column.

| If your old address was in: | Use this address: |
|---|----------------------|
| Florida, Georgia, South Carolina | Atlanta, GA 39901 |
| New Jersey, New York (New York City and counties of Nassau, Rockland, Suffolk, and Westchester) | Holtsville, NY 00501 |
| New York (all other counties), Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont | Andover, MA 05501 |
| Alaska, Arizona, California (counties of Alpine, Amador, Butte, Calaveras, Colusa, Contra Costa, Del Norte, El Dorado, Glenn, Humboldt, Lake, Lassen, Marin, Mendocino, Modoc, Napa, Nevada, Placer, Plumas, Sacramento, San Joaquin, Shasta, Sierra, Siskiyou, Solano, Sonoma, Sutter, Tehama, Trinity, Yolo, and Yuba), Colorado, Idaho, Montana, Nebraska, Nevada, North Dakota, Oregon, South Dakota, Utah, Washington, Wyoming | Ogden, UT 84201 |
| California (all other counties), Hawaii | Fresno, CA 93888 |

| Ohio, West Virginia | |
|--|--|
| Kansas, New Mexico, Oklahoma, Texas | Austin, TX 73301 |
| Delaware, District of Columbia, Maryland, Pennsylvania, Virginia | Philadelphia, PA 1925 |
| Alabama, Arkansas, Louis Mississippi, North Carolina Tennessee | |
| Illinois, Iowa, Minnesota, Missouri, Wisconsin | Kansas City, MO 6499 |
| American Samoa | Philadelphia, PA 1925 |
| Guam: Permanent residents | Department of Revenue and Taxation Government of Guan 378 Chalan San Antonio Tamuning, GU 9691 |
| Guam: Nonpermanent residents Puerto Rico (or if excludin income under section 93 Virgin Islands: Nonpermanent residents | g 33) Philadelphia, PA 1925 |
| Virgin Islands: Permanent residents | V. I. Bureau o Internal Revenue Lockhart Gardens No. 1-4 Charlotte Amalie St. Thomas, VI 00802 |
| Foreign country: U.S. citizens and those filing Form 2555, Form 2555-EZ, or | Philadelphia, PA 1925 |

Indiana, Kentucky, Michigan,

Employee Plan Returns ONLY (Form 5500 series)

Form 4563

addresses

All APO and FPO

If the principal office of the plan sponsor or the plan administrator was in: Use this address: Connecticut, Delaware, District of Columbia, Maine, Maryland, Massachusetts, New Holtsville, NY 00501 Hampshire, New Jersey, New York, Pennsylvania, Puerto Rico, Rhode Island, Vermont, Virginia Alabama, Alaska, Arkansas, California, Florida, Georgia, Hawaii, Idaho, Louisiana, Mississippi, Nevada, North Atlanta, GA 39901 Carolina, Oregon, South Carolina, Tennessee, Washington Arizona, Colorado, Illinois, Indiana, Iowa, Kansas, Kentucky, Michigan, Minnesota, Missouri, Montana, Nebraska, New Memphis, TN 37501 Mexico, North Dakota, Ohio, Oklahoma, South Dakota, Texas, Utah, West Virginia, Wisconsin, Wyoming Foreign country Holtsville, NY 00501 All Form 5500-EZ filers Andover, MA 05501

Cincinnati OH 45999

