

Department of the Treasury

U.S. Income Tax Return for Certain Nonresident Aliens With No Dependents

OMB No. 1545-0074

2006

| Inter | nal Revenue | Service | | | | | | | |
|---|--|--|---|---|------------------------|-----------------------------------|--|--|--|
| | Your first | name and initial | Last name | | Identifying | g number (see page 4) | | | |
| | Present home address (number, street, and apt. no., or rural route). If a P.O. box, see page 4. | | | | | | | | |
| print or type. | City, town or post office, state, and ZIP code. If a foreign address, see page 4. | | | | | | | | |
| tor | Country ► | | | | | | | | |
| rint | Of what c | ountry were you a citize | n or national during 2006? ► | | | | | | |
| Please p | 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." | | | | | |
| | 1 🗌 S | y status (see page 4). ingle nonresident alien larried nonresident alie | 1 | | | | | | |
| | 3 Wage | es, salaries, tips, etc. A | Attach Form(s) W-2 (see page 4) | | | 3 | | | |
| | - | - | offsets of state and local incom | | | 4 | | | |
| | | | grants. Attach explanation (see | | | 5 | | | |
| held | 6 Total | | os exempt by a treaty from page 2 | | | 7 | | | |
| with | 7 Add | | grants excluded (see page 5) | | · · · · | | | | |
| ere. was | 8 Scho 9 Stude | arship and reliowship | ction (see page 5) | 9 | | | | | |
| 2 he | 10 Adju | sted gross income. S | subtract the sum of line 8 and line | e 9 from line 7 | | 10 | | | |
| , , , , , , , , , , , , , , , , , , , | 11 Itemi | zed deductions (see | | | | 11 | | | |
| Attach Form(s) W-2 here. attach Form(s) 1099-R if tax was withheld | 12 Subti | act line 11 from line 1 | | | – | 12 | | | |
| h Fo | 13 Exem | | page 6) | | · · · · | 13 | | | |
| Form | 14 Taxa | | line 13 from line 12 | | · · · · | 14 15 | | | |
| ach | 15 Tax. Find your tax in the Tax Table on pages 12–20 16 Social security and Medicare tax on tip income not reported to employer. Attach Fo | | | | | 16 | | | |
| | 16 Socia | | s your total tax | | | 17 | | | |
| Also | | | d (from Form W-2, 1042-S, and 1 | | | | | | |
| | | | ts and amount applied from 2005 | · · · - · · | | | | | |
| | | t for amount paid with | | | | | | | |
| | | | cise tax paid. Attach Form 8913 if req hese are your total payments | | | 20 | | | |
| _ | | | | | | 22 | | | |
| Re | fund | | an line 17, subtract line 17 from line 2 3 you want refunded to you | 2. This is the amount ye | bu overpaid | 20 | | | |
| Direct deposit? See page 7. | | 24a Amount of line 23 you want refunded to you. If Form 8888 is attached, check here | | | | 24a | | | |
| | | b Routing number | | c Type: Checkin | g 🗌 Savings | | | | |
| | | d Account number | | | | | | | |
| | | | ou want applied to your 2007 estimated | • • | | | | | |
| | iount u Owe | | Subtract line 22 from line 17. For de nalty (see page 9). Also include on | | ee page 8 ► | 26 | | | |
| | ird | - | nother person to discuss this return | | e 9)? 🗌 Yes. Co | mplete the following. | | | |
| | rty | | | | | | | | |
| Designee | | Designee's Phone Pe name ► no. ► () nu | | | | fication | | | |
| Sign Here | | Under penalties of perjury, I declare that I have examined this return and accompanying schedules a and belief, they are true, correct, and accurately list all amounts and sources of U.S. source incom preparer (other than taxpayer) is based on all information of which preparer has any knowledge. | | | | | | | |
| Keep a copy of this return for your records. | | Your signature Date You | | | Your occupation in | r occupation in the United States | | | |
| Paid Pre- | | | | | Check if self-employed | | | | |
| | rer's | Firm's name (or yours if self-employed), | | | | | | | |
| Use Only | | address, and ZIP code | | | | () | | | |

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see page 11 of instructions. Cat. No. 21534N Form 1040NR-EZ (2006)

Other Information (If an item does not apply to you, enter "N/A.")

| Α | What country issued your passport? | | |
|---|---|-------|------|
| в | Were you ever a U.S. citizen? | ☐ Yes | 🗌 No |
| С | Give the purpose of your visit to the United States ► | | |
| | | | |
| D | Type of entry visa and current nonimmigrant status and date of change | | |
| Е | Date you entered the United States (see page 9) ► | | |
| 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. ► | | |
| | | | |
| | | | |
| | | | |
| Н | Give number of days (including vacation and nonworkdays) you were present in the United States during 2004, 2005, and 2006 | | |
| I | Did you file a U.S. income tax return for any year before 2006? | Yes | 🗌 No |
| J | If you are claiming the benefits of a U.S. income tax treaty with a foreign country, give the following information. See page 9 for additional information. ● Country ● | | |
| | Type and amount of income exempt from tax and the applicable tax treaty article. Enter treaty-exempt income for 2006 below and on line 6; not on line 3 or 5. For 2006 | | |
| | | | |
| | For 2005 ► | | |
| | | | |
| | | | |
| | • Were you subject to tax in that country on any of the income that you claim is entitled to the treaty benefits? | 🗌 Yes | 🗌 No |
| к | During 2006, did you apply for, or take any 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 |
| | | | |

Form **1040NR-EZ** (2006)