

763-S Virginia Special Nonresident Claim For Individual Income Tax Withheld 2009



Amended Claim

First Name	MI	Last Name	Suffix	Your Social Security Number
Present Home Address (Number and Street, Including Apartment Number or Rural Route)				Spouse's Social Security Number
City, Town or Post Office			State	ZIP Code

STEP I - Exemption Category

Review categories 1 - 4 below and enter the category number for which you are claiming an exemption

1 Commuter State Exemption:

I declare that during the taxable year shown above I commuted on a daily basis from my place of residence to work in Virginia. My only income from sources within Virginia was from wages and salaries, which are subject to taxation by the state or district checked below. I did not live in nor was I a domiciliary or legal resident of Virginia at any time.

Check One: District of Columbia Kentucky

2 Domiciliary State Exemption:

I declare that during the taxable year shown above I was a domiciliary or legal resident of the state checked below. My only income from sources within Virginia was from wages and salaries, which are subject to taxation by the state checked below. I am not an actual resident of Virginia and I did not maintain a place of abode in Virginia for a total of more than 183 days.

Check One: Maryland Pennsylvania West Virginia

3 Military Spouse Exemption: *Review and complete the back of this form before continuing.*

I declare that for the entire portion of the year I lived in Virginia I was married to a service member on active military duty who was in Virginia pursuant to military orders. While in Virginia I have not taken any action to abandon my domicile in another state or to become a domiciliary or legal resident of Virginia. To be exempt, you and your spouse must have the same domiciliary or legal state of residency. Enter the 2 letter state abbreviation for:

3(a) Your domiciliary or legal state of residency

3(b) Your spouse's domiciliary or legal state of residency for military payroll purposes

4 Tax Withheld in Error by Employer:

I declare that during the taxable year shown above I was not a domiciliary or legal resident of Virginia at any time. I did not perform any services in Virginia and the Virginia tax was erroneously withheld from salary and wages paid me by my employer.

Enter the 2 letter state abbreviation for your domiciliary or legal state of residency

STEP II - Enter amount of Virginia Tax withheld requested to be refunded: \$

If amended, enter the full refund amount as it should have been reported on the original return. You must provide copies of your withholding statements.

STEP III - Avoid Delays in the issuance of your refund.

If you are a Resident of a State with an Individual Income Tax, you must attach a complete copy of your State of Residence Income Tax Return. Check the box to indicate that you are a Resident of a State with Income Tax and have attached a copy of your resident individual income tax return.

Due by **May 3, 2010**. Mail to the **Department of Taxation, P.O. Box 1498, Richmond, Virginia 23218-1498**.

Both husband and wife must complete a separate Form 763-S when both filers have Virginia income tax withheld.

I, the undersigned, do declare under penalties provided by law that this is a true, correct and complete return.

Please Sign Here

Your Signature X	Date	Your Business Phone Number ()	Home Phone Number ()
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Preparer's Use Only

Preparer's Signature X	Date	Preparer's Phone Number	
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Firm's Name (or Yours if Self-employed) and Address	Preparer's FEIN/PTIN/SSN	Code
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<input type="text"/>

Staple Copy of W-2 here

Military Spouse Qualification

Complete each question below and provide copies of the requested documentation, before claiming **Exemption Category 3** on the front of this form. Incomplete responses or missing documentation could cause your refund to be delayed.

To qualify for the income tax exemption for military spouses you must **have the same domicile as the military member** and meet all of the following qualifications:

I. Your spouse is a member of the armed forces present in Virginia in compliance with military orders.

1. Was your spouse in active military service for the tax year in question? Yes No
- a. If your spouse was discharged from full-time military service, what was the date your spouse left the service? _____
MM/DD/YYYY
- b. If your spouse was in the military at any time for the tax year in question, provide his or her duty station(s) for the tax year. Additional rows are provided in case your spouse had more than one duty station during the year.

Location of Duty Station (include country if not USA)	Date Assignment Started MM/DD/YYYY	Date Assignment Ended MM/DD/YYYY

2. When were you and your spouse married? _____
MM/DD/YYYY
3. Attach a copy of your military ID card. This would be a military identification card issued to spouses of military personnel. If a military identification card has not been issued, check here.
4. What is your spouse's state of domicile? (Enter here and on line 3(b) on the front of this return) _____
Attach a copy of one or more of the following documents showing the military service member's domicile or legal residence. (Check the appropriate boxes to indicate which documents you are providing.)
- Leave & Earning Statement (LES)
- Current driver's license from the military service member's domicile state
- DD Form 2058 (State of Legal Residence Certificate)
- Other _____

II. You are present in Virginia solely to be with your spouse.

5. Do you own a business or any income producing property in Virginia? Yes No
- a. If yes, please describe. _____

III. You maintain your domicile or legal residency in another state.

6. Do you claim the same state of domicile reported under question 4 above? Yes No
If you answered no, stop here. You do not qualify for tax relief. See Virginia Tax Bulletin 10-1 for details.
If you answered yes, please respond to the remaining questions.
- a. Attach a copy of your state income tax return for the year in question. If your state of domicile does not have an income tax, check here.
- b. When was the last period of time in which you physically resided in that state? From _____ To _____
MM/DD/YYYY MM/DD/YYYY
- c. What was your last physical address in that state?

Street Address City State ZIP
- d. Was your name different when you last physically resided in that state? Yes No
If Yes, what was your name _____
First Name Middle Initial Last Name
7. Please attach a copy of one or more of the following documents showing your domicile or legal residence. (Check the appropriate boxes to indicate which documents you are providing.)
- Property tax bill from your domicile state
- Current driver's license from your domicile state
- Other _____

Note: A copy of documents requested above will assist us in speeding up the issuance of the refund.