763-S	Virginia Spec	ial N	onresident Claim	202	23					
First Name	For Individual	l Incc	Last Name			Suffix	Your Social Se	curity Numbe	er	
Present Home Addr	ess (Number and Street, Includin	g Apartme	nt Number or Rural Route)				Spouse's Soci	al Security Nu	umber	
City, Town or Post C	ffice					State		ZIP Code		
I authorize the	e Department of Taxation to	discuss r	ny return with my preparer.		Ame	ended Cl	aim			
Date of Birth	Your Birthday (MM-DD-YYYY)				Primar		iyer Decease	d (Include	Federal Fo	rm 1310 if
Rev 1 Commu daily ba was fro did not Ch	uter State Exemption asis from my place of om wages and salari live in nor was I a d eck One:	below on: 1 of reside es, whomicili trict of	and enter the category n declare that during the tax ence to work in Virginia. M nich are subject to taxatio ary or legal resident of Vir Columbia □ Kentucky declare that during the taxa	able ye y only i n by th ginia a	for whice ear sho ncome e state t any tir	ch you wn ab from s or dis me.	ove I com ources wi trict checl	muted c thin Virg ked belo	on a inia w. I	ı.
or lega wages residen Ch 3 Military <i>regardi</i> lived in active r service (2) you spouse	I resident of the stat and salaries, which at of Virginia and I dic eck One: Mar Spouse Exemption Mar Spouse Exemption Mar Mar Virginia, I was present Virginia, I was present Nilitary duty and in Mar member spouse mu must elect to use the I fyou are claiming	e cheo are s I not m ryland on: Co r this e ent in /irginia ust hav e sam this e	cked below. My only inco ubject to taxation by the a intain a place of abode ir	me fror state c Virgin West of this for the my se rs. To b domici of taxa er state	n sourc hecked ia for a Virginia s form entire p ervicem be exer liary or tion as abbrev	first to ortior embe npt, ei legal that or	thin Virgin w. I am no f more that o provide n of the tai r spouse v ther (1) your state of r f your serve for the do	ia was fi ot an ac n 183 da <i>informa</i> xable ye who was bu and y esidency ricememoniciliar	tual ays. <i>tion</i> ear l s on your y or uber	
4 Tax Wit a domin the Virg Enter th STEP II - En If a	thheld in Error by E ciliary or legal reside ginia tax was errone the 2 letter state abbu ter amount of Virgi mended, enter the f	Emplo ent of V ously v reviation inia Ta ull refu	yer: I declare that during Virginia at any time. I did r withheld from salary and v on for your domiciliary or I ax withheld requested to und amount as it should has ust provide copies of your	the taxa not perf vages p egal sta be ref ave be	able ye form an baid to ate of re f unded en repo	ar sho y serv me by esider : rted	own above ices in Vir my emple ncy	l was n ginia an oyer.	d	
			Resident of a State with ar							
			section below is not complete							
DIRECT BANK DE Domestic Accounts No International De	s Only	Routin	g Transit Number Acc	ount Nur	nber		Checki	ng	Savings	
			e Department of Taxation, I				-			
			a separate Form 763-S whe							
_		do decl	are under penalties provided by	<u> </u>	tnis is a t	r		· .		
	Your Signature X			Date		Your Ph	one	Offi	ce Use	
Preparer's	Preparer's Name X			Date		Prepare	r's Phone Numb	er		
	Firm's Name (or Yours if Self-emp	loyed) and	d Address	•		Prepare	r's FEIN/PTIN/S	SN		Code

Enclose copies of your withholding statements.

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. The provisions of the Servicemember Civil Relief Act apply only to spouses of military servicemembers and do not apply to dependents.

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

. Was your spouse in active military service for the taxable year in question?		Was your sp	ouse in active	military service f	or the taxable	year in qu	uestion?		
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a. If your spouse was discharged from full-time military service, what was the date your spouse left the service?......

MM/DD/YYYY

MM/DD/YYYY

Yes

No

Yes

No

b. If your spouse was in the military at any time for the taxable year in question, provide his or her duty station(s) for the taxable year. Additional rows are provided in case your spouse had more than one duty station during the taxable year.

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

2. Where and when were you and your spouse married? State

- 3. Enclose 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 or legal state of residency? (Enter here and on Line 3 on the first page of this return).

Enclose a copy of one or more of the following documents showing the military servicemember's domicile or legal state of residency

(check the appropriate boxes to indicate which documents you are providing).

	Leave & Earning	Statement	(LES)	for the	year in	question
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Current driver's license from the military servicemember's domicile state

- DD Form 2058 (State of Legal Residence Certificate)

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?
 - a. If yes, please describe.

III. You have the same non-Virginia domiciliary or legal state of residency as that of your servicemember spouse, or you elect to use the same non-Virginia state of residency as that of your servicemember spouse.

Did you file a state income tax return for the year in question with the state reported under question 4 above?
Yes No

If you answered yes, enclose a copy of your state income tax return for the year in question.

If your state of residency for tax purposes does not have an income tax, check here.