763-S	Virginia Spe	cial N	onresident Claim	202	20					
First Name	For Individua	al Inco M	Last Name			Suffix	Your Social S	ecurity Number		
Present Home Add	ress (Number and Street, Includ	ing Apartme	ent Number or Rural Route)			<u> </u>	Spouse's Soc	ial Security Num	ber	
City, Town or Post 0	Dffice					State		ZIP Code		
I (we) author	ize the Department of Taxat	ion to disc	cuss my (our) return with my (our) p	oreparer.	Ame	nded Cl	aim	I		
Date of Birth	Your Birthday (MM-DD-YYYY)				Primary applica		iyer Deceas	ed (Include F	Federal Form	1310 if
Rev 1 Comm daily ba was fro did not Ch 2 Domic	uter State Exempt asis from my place of om wages and sala live in nor was I a of neck One: Dis iliary State Exemp	4 below ion: 1 of resid ries, wh domicil strict of tion: 1	v and enter the category declare that during the ta ence to work in Virginia. I hich are subject to taxati iary or legal resident of \ f Columbia declare that during the ta cked below. My only inc	axable ye My only ir on by the /irginia a <y xable yea</y 	for whice ear shown come t e state t any tir ar show	ch you wn ab from s or dis me. /n abc	ove I com ources w trict chec	nmuted or ithin Virgir ked below	n a nia v. I ary	
3 Military regard lived in active (2) you spouse legal si	A spouse Exempt ing your eligibility for Virginia, I was pre- military duty and in emember spouse m must elect to use t e. If you are claiming tate of residency of	aryland ion: C or this e sent in Virginia ust ha he sam g this e your se	omplete the second page exemption. I declare that the state solely to be will a pursuant to military orce ve the same non-Virgini he residence for purpose exemption, enter the 2 le ervicemember spouse	West West Name and the second states of the west of the second states of the west of the second states of the second second states of the second states of the second states of the second second states of the second stat	Virginia s form entire p erviceme be exen liary or tion as t abbrev	first to portior embe npt, ei legal that of /iation	o provide n of the ta r spouse ther (1) y state of r f your serv for the d	<i>informati</i> xable yea who was ou and yo esidency vicememb omiciliary	on ar I on our or or or or	
a domi the Vir Enter t STEP II - En If a	ciliary or legal resid ginia tax was errone he 2 letter state abb t ter amount of Virg amended, enter the	ent of eously previati ginia Ta full refu	oyer: I declare that during Virginia at any time. I did withheld from salary and on for your domiciliary of ax withheld requested to und amount as it should ust provide copies of you	not perf wages p r legal sta t o be ref have bee	orm any paid to r ate of re unded: en repo	y serv me by esider : rted	ices in Vi my empl ncy	rginia and oyer.		
			Resident of a State with a te of Residence Income							
			section below is not comple							
DIRECT BANK D Domestic Account No International D	s Only	k Routin	g Transit Number A	ccount Nun	nber		Check	ing	Savings	
Du	ue by May 1, 2021. M	ail to th	e Department of Taxation	, P.O. Box	x 1498 , I	Richm	ond, Virg	inia 23218	-1498.	
	Both spouses must c	omplete	e a separate Form 763-S w	hen both f	filers hav	ve Virg	inia incom	e tax withh	eld.	
_	I, the undersigned	, do dec	lare under penalties provided b	y law that	this is a t	rue, co	rrect and co	mplete retur	n.	
	Your Signature X			Date		Your Ph	one	Office	Use	
	Preparer's Name X			Date		Prepare	r's Phone Numl	ber		
-	Firm's Name (or Yours if Self-en	nployed) an	d Address			Prepare	r's FEIN/PTIN/S	SSN		Code

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?
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- a. If your spouse was discharged from full-time military service, what was the date your spouse left the service?......
- 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.

Yes

MM/DD/YYYY

Yes

No

No

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 & Earnir	ng 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)
- 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?
 - 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.

6. Did you file a state income tax return for the year in question with the state reported under question 4 above?

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.

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