First Name

City, Town or Post Office

L													
	Date of Birt	h Your Bi			-	-			Primary	/ Taxpayer Deceased	(Include Fede	ral Form	1310 if
Ī	STEP I - Select Exemption Category												
Review categories 1 - 4 below and enter the category number for which you are claiming									ng an exem	ption.			
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													
אוווא אומובווובוויי	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												
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  Military Spouse Exemption: Complete the second page of this form first to provide information regarding your eligibility for this exemption. I declare that, for the entire portion of the taxable year I lived in Virginia, I was present in the state solely to be with my servicemember spouse who was on active military duty and in Virginia pursuant to military orders. To be exempt, either (1) you and your servicemember spouse must have the same non-Virginia domiciliary or legal state of residency or (2) you must elect to use the same residence for purposes of taxation as that of your servicemember spouse. If you are claiming this exemption, enter the 2 letter state abbreviation for the domiciliary or legal state of residency of your servicemember spouse.  Tax Withheld in Error by Employer: I declare that during the taxable year shown above I was not													
	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 to me by my employer.												
	Enter the 2 letter state abbreviation for your domiciliary or legal state of residency												
ł	STEP II - Enter amount of Virginia Tax withheld requested to be refunded:												
		If amended,									5		
		on the origin											
ا ا										ome Tax, <b>enclos</b>			
Rev. 06/23										d check this bo			Ш
e.		If	the Dire	ct Deposit s	section l	below is no	ot comple	ted, you	r refund v	vill be issued by ch	eck.		
	DIRECT BAN	K DEPOSIT	Your F	Bank Routing	g Transit	Number	Ad	count Nu	mber	Checking	S	avings	
	Domestic Acco												
	Due by <b>May 1, 2024.</b> Mail to the <b>Department of Taxation, P.O. Box 1498, Richmond, Virginia 23218-1498.</b>												
ജ	Both spouses must complete a separate Form 763-S when both filers have Virginia income tax withheld.												
7638		I, the	undersigi	ned, do decl	lare unde	r penalties	orovided b	y law that	this is a t	rue, correct and comp	lete return.		
ation	Please Sign Here	Your Signature					Date		Your Phone	Office Use			
t. of Taxation	Preparer's Use Only		Preparer's Name					Date		Preparer's Phone Number			
Va. Dept.	-	Firm's Name (or	Name (or Yours if Self-employed) and Address						Preparer's FEIN/PTIN/SSN			Code	
> L													

2023

Spouse's Social Security Number

ZIP Code

State

Amended Claim

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

I authorize the Department of Taxation to discuss my return with my preparer.

Present Home Address (Number and Street, Including Apartment Number or Rural Route)

## **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.

<u>l.                                    </u>	Yo	<u>ur spouse is a member of the armed force</u>	<u>s present in Virginia in compliance with r</u>	<u>military orders.</u>					
	1.	Was your spouse in active military service for	or the taxable year in question?	Yes No					
		a. If your spouse was discharged from full-							
		the date your spouse left the service?.		MM/DD/YYYY					
			time for the taxable year in question, provide provided in case your spouse had more th						
L	_oca	ion of Duty Station (include country if not USA)	Date Assignment Started E	Date Assignment Ended MM/DD/YYYY					
	2.	Where and when were you and your spouse	e married? State	MM/DD/YYYY					
	3.								
	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 state of residency (check the appropriate boxes to indicate which documents you are providing).								
		Leave & Earning Statement (LES) for the year in question							
		☐ Current driver's license from the military servicemember's domicile state							
		DD Form 2058 (State of Legal Resid	ence Certificate)						
		Other							
II.	Yo	u are present in Virginia solely to be with	your spouse.						
	5.	Do you own a business or any income prod	ucing property in Virginia?	Yes No					
		a. If yes, please describe.							
<u>III.</u>		u have the same non-Virginia domiciliary you elect to use the same non-Virginia sta							
	6.	Did you file a state income tax return for the under question 4 above?	year in question with the state reported	Yes No					
		If you answered yes, enclose a copy of your	r state income tax return for the year in ques	stion.					
		If your state of residency for tax purposes d	oes 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.