

SOCIAL SECURITY NUMBER	Deceased <input type="checkbox"/> Date of Death*	**SPOUSE'S SOCIAL SECURITY NUMBER	Deceased <input type="checkbox"/> Date of Death*
LAST NAME		SUFFIX	YOUR FIRST NAME MI
SPOUSE'S LAST NAME		SUFFIX	SPOUSE'S FIRST NAME MI
FIRST LINE OF ADDRESS	SECOND LINE OF ADDRESS		
CITY	STATE	ZIP CODE	
TELEPHONE NUMBER	EMAIL	EXTENDED DUE DATE MM/DD/YYYY	

\* ONLY INCLUDE A DECEASED TAXPAYER AND THEIR DATE OF DEATH IF IT OCCURRED IN THIS TAX YEAR. FOR THE NEXT TWO YEARS, PLEASE LIST THEM BELOW ON THE SURVIVING SPOUSE EXEMPTION.

AMENDED RETURN    NONRESIDENT SPECIAL    NONRESIDENT/PART YEAR RESIDENT    FORM WV-8379 FI LED AS AN INJURED SPOUSE

**FILING STATUS** (CHECK ONE)    1 SINGLE    2 HEAD OF HOUSEHOLD    3 MARRIED, FILING JOINT    4 MARRIED, FILING SEPARATE    5 WIDOW(ER) WITH DEPENDENT CHILD  
\*\*Enter spouse's SS# and name in the boxes above

**EXEMPTIONS**

(a) **YOURSELF**   To claim an exemption for yourself, enter 1. If someone can claim you as a dependent, leave box (a) blank.   (a)

(b) **SPOUSE**   To claim an exemption for your spouse, enter 1. They may not be claimed as an exemption by anyone else.   (b)

(c) **DEPENDENTS**   List your dependents. If over four dependents, continue on Schedule DP on page 11. **Enter total number of dependents**   (c)

Dependent First name	Dependent Last name	Social Security Number	Date of Birth (MM DD YYYY)

(d) **SURVIVING SPOUSE**   (See page 21) Decedents SSN    Year Spouse Died:    (d)

(e) **Total Exemptions**   (add boxes a, b, c, and d). Enter here and on line 6 below. If box e is zero, enter \$500 on line 6 below.   (e)

1. Federal Adjusted Gross Income or income to claim senior citizen tax credit from Schedule SCTC-A	1	.00
2. Additions to income (line 58 of Schedule M).....	2	.00
3. Subtractions from income (line 49 of Schedule M).....	3	.00
4. West Virginia Adjusted Gross Income (line 1 plus line 2 minus line 3).....	4	.00
5. Low-Income Earned Income Exclusion (see worksheet on page 25).....	5	.00
6. Total Exemptions as shown above on Exemption Box (e) _____ x \$2,000 .....	6	.00
7. West Virginia Taxable Income (line 4 minus lines 5 & 6) IF LESS THAN ZERO, ENTER ZERO .....	7	.00
8. Income Tax Due (Check One) .....	8	.00

Tax Table    Rate Schedule    Nonresident/Part-year resident calculation schedule

**TAX DEPT USE ONLY**

PAY PLAN   COR   SCTC   NRSR   HEPTC

**MUST INCLUDE WITHHOLDING FORMS WITH THIS RETURN (W-2s, 1099s, Etc.)**



PRIMARY LAST NAME	SOCIAL SECURITY NUMBER	<b>8.Total Taxes Due</b> (line 8 from previous page)	8	.00
9. Credits from Tax Credit Recap Schedule (see schedule on page 5 )			9	.00
10. Line 8 minus 9. If line 9 is greater than line 8, enter 0			10	.00
11. Overpayment previously refunded or credited (amended return only)			11	.00
12. Penalty Due from Form IT-210 <input type="checkbox"/> CHECK IF REQUESTING WAIVER/ANNUALIZED WORKSHEET ATTACHED		If you owe penalty, enter here	12	.00
13. West Virginia Use Tax Due on out-of-state purchases (See Schedule UT on page 41). <input type="checkbox"/> CHECK IF NO USE TAX DUE			13	.00
14. Add lines 10 through 13. This is your total amount due			14	.00
15. West Virginia Income Tax Withheld (See instructions page 22) <input type="checkbox"/> Check if withholding from NRSR (Nonresident Sale of Real Estate)			15	.00
16. Estimated Tax Payments and Payments with Schedule 4868			16	.00
17. Non-Family Adoption Tax Credit if applicable (include Schedule WV NFA-1)			17	.00
18. Senior Citizen Tax Credit for property tax paid (include Schedule SCTC-A)			18	.00
19. Homestead Excess Property Tax Credit for property tax paid (include Schedule HEPTC-1 and Class II receipt)			19	.00
20. Amount paid with original return (amended return only)			20	.00
21. Payments and Refundable Credits (add lines 15 through 20)			21	.00
<b>22. Balance Due</b> (line 14 minus line 21). If Line 21 is greater than line 14, complete line 23 ..... <b>PAY THIS AMOUNT</b>			22	.00
23. Line 21 minus line 14. This is your overpayment			23	.00
24. Indicate donations from line 23. Enter below and enter the sum of columns 24A, 24B, and 24C on Line 24			24	.00
24A. CHILDREN'S TRUST FUND	24B. WV DEPT. OF VETERANS ASSISTANCE	24C. STATE VETERANS CEMETERY		
25. Amount of Overpayment to be credited to your 2023 estimated tax			25	.00
26. Refund due to you (line 23 minus line 24 and line 25)..... <b>REFUND</b>			26	.00

**Direct Deposit of Refund**

CHECKING  SAVINGS

ROUTING NUMBER

ACCOUNT NUMBER

**PLEASE REVIEW YOUR ACCOUNT INFORMATION FOR ACCURACY. INCORRECT ACCOUNT INFORMATION MAY RESULT IN A \$15.00 RETURNED PAYMENT CHARGE.**

I authorize the Tax Division to discuss my return with my preparer  YES  NO

Under penalty of perjury, I declare that I have examined this return, accompanying schedules, and statements, and to the best of mv knowledge and belief, it is true, correct and complete.

Your Signature \_\_\_\_\_ Date \_\_\_\_\_ Spouse's Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone Number \_\_\_\_\_

Preparer: Check HERE if client is requesting NOT to efile

Preparer's EIN \_\_\_\_\_ Signature of preparer other than above \_\_\_\_\_ Date \_\_\_\_\_ Telephone Number \_\_\_\_\_

Preparer's Printed Name \_\_\_\_\_ Preparer's Firm \_\_\_\_\_

<b>FOR REFUND, MAIL TO THIS ADDRESS:</b> WV TAX DIVISION P.O. BOX 1071 CHARLESTON, WV 25324-1071	<b>FOR BALANCE DUE, MAIL TO THIS ADDRESS:</b> WV TAX DIVISION P.O. BOX 3694 CHARLESTON, WV 25336-3694
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**Payment Options:** Returns filed with a balance of tax due may pay through any of the following methods:  
• Check or Money Order payable to the WV Tax Division - Enclose check or money order with your return.  
• Electronic Payment - May be made by visiting mytaxes.wvtax.gov and clicking on "Pay Personal Income Tax".  
• Credit Card Payment - May be made by visiting the Treasurer's website at: epay.wvsto.com/tax

