



AREA RESERVED
FOR 2-D BARCODE

2016 Form M-8379

XXXXXXXXXXXXXX

Nondebtor Spouse Claim and Allocation for Refund Due

NAMEOFTAXPAYERXXXXXXXXXXXXXXXXXXXXX SOCIALSECNO X Fill in if nondebtor spouse
STREETADDRESSXXXXXXXXXXXXX CITYTOWNPOSTOFFICEXXXXXXXXX ST ZIP+FOURX
NAMEOFSPOUSEXXXXXXXXXXXXXXXXXXXXX SOCIALSECNO X Fill in if nondebtor spouse
NAMEOFEXECUTORXXXXXXXXXXXXXXXXXXXXX DESIGNATIONXXXXXXXXXXXXXXXXXXXXX
STREETADDRESSXXXXXXXXXXXXX CITYTOWNPOSTOFFICEXXXXXXXXX ST ZIP+FOURX

Allocable items

		a. Nondebtor spouse	b. Other spouse	c. Joint (as filed)
1.	Total income (list all sources)	1 XXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX
2.	Adjustments to income	2 XXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX
3.	Deductions	3 XXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX
4.	Exemptions	4 XXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX
5.	Credits against tax (do not include Limited Income Credit)	5 XXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX
6.	Taxes withheld (include copies of all Forms W-2)	6 XXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX
7.	Tax payments (amounts paid with return, estimated, etc.)	7 XXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX
X	Fill in if the refund due is being requested in the nondebtor spouse's name only			

Declaration

Under penalties of perjury, I declare that I have examined this form, and to the best of my knowledge it is true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which the preparer has knowledge.

Signature of nondebtor spouse Date
XXXXXXXXXX

Signature of paid preparer Date Social Security number
XXXXXXXXXX XXXXXXXXXXXXXXXX

Mail to: Massachusetts Department of Revenue, PO Box 7010, Boston, MA 02204.

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