Form **8379**

(Rev. November 2016) Department of the Treasury Internal Revenue Service

Injured Spouse Allocation

▶ Information about Form 8379 and its separate instructions is at www.irs.gov/form8379.

OMB No. 1545-0074

Attachment Sequence No. **104**

Pa	Should You File This Form? You must complete this part.							
1	Enter the tax year for which you are filing this form. ► Answer the following questions for that year.							
2	Did you (or will you) file a joint return?							
	Yes. Go to line 3.							
	No. Stop here. Do not file this form. You are not an injured spouse.							
3	Did (or will) the IRS use the joint overpayment to pay any of the following legally enforceable past-due debt(s) owed only by your							
	spouse? (see instructions)							
	• Federal tax • State income tax • State unemployment compensation • Child support • Spousal support							
	• Federal nontax debt (such as a student loan)							
	Yes. Go to line 4.							
	No. Stop here. Do not file this form. You are not an injured spouse.							
	Note: If the past-due amount is for a federal tax liability owed by both you and your spouse, you may qualify for innocent							
	spouse relief for the year to which the joint overpayment was (or will be) applied. See <i>Innocent Spouse Relief</i> in the							
	instructions.							
4	Are you legally obligated to pay this past-due amount?							
	Yes. Stop here. Do not file this form. You are not an injured spouse.							
	Note: If the past-due amount is for a federal tax liability owed by both you and your spouse, you may qualify for innocent							
	spouse relief for the year to which the joint overpayment was (or will be) applied. See <i>Innocent Spouse Relief</i> in the							
	instructions.							
	No. Go to line 5a.							
5a	Were you a resident of a community property state at any time during the tax year entered on line 1? (see instructions)							
	☐ Yes. Enter the name(s) of the community property state(s)							
	Go to line 5b.							
	No. Skip line 5b and go to line 6.							
b	b If you answered "Yes" on line 5a, was your marriage recognized under the laws of the community property state(s)? (see							
	instructions)							
	Yes. Skip lines 6 through 9. Go to Part II and complete the rest of this form.							
	□ No. Go to line 6.							
6	Did you make and report payments, such as federal income tax withholding or estimated tax payments?							
	Yes. Skip lines 7 through 9 and go to Part II and complete the rest of this form.							
	No. Go to line 7.							
7	Did you have earned income, such as wages, salaries, or self-employment income?							
	☐ Yes. Go to line 8.							
	No. Skip line 8 and go to line 9.							
8	Did (or will) you claim the earned income credit or additional child tax credit?							
	Yes. Skip line 9 and go to Part II and complete the rest of this form.							
	■ No. Go to line 9.							
9	Did (or will) you claim a refundable tax credit? (see instructions)							
	Yes. Go to Part II and complete the rest of this form.							
	No. Stop here. Do not file this form. You are not an injured spouse.							
<u> </u>	All latermention About the Leist Tou Datum tou Williah This Forms to Filed							
	Information About the Joint Tax Return for Which This Form Is Filed							
10	Enter the following information exactly as it is shown on the tax return for which you are filing this form. The spouse's name and social security number shown first on that tax return must also be shown first below.							
	First name, initial, and last name shown first on the return Social security number shown first If Injured Spouse,							
	check here ►							
	First name, initial, and last name shown second on the return Social security number shown second If Injured Spouse,							
	check here ▶ □							
11	Check this box only if you want your refund issued in both names. Otherwise, separate refunds will be issued for each							
	spouse, if applicable							
12	Do you want any injured spouse refund mailed to an address different from the one on your joint return? \Box Yes \Box No							
	If "Yes," enter the address.							
	Number and street City, town or post office, state, and ZIP code							

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Part III P	Milocation Between Spouses of Item	is on the Joint 18	ax Return (See the se	eparate	Form 8379	instructions for Part III.)	
	Allocated Items		(a) Amount shown	(b) /	Allocated to	(c) Allocated to	
	(Column (a) must equal columns (b)	+ (c))	on joint return	inju	red spouse	other spouse	
13 Incom	e: a. Income reported on Form(s) W	-2					
	b. All other income						
14 Adjust	ments to income						
15 Standa	ard deduction or Itemized deductions						
16 Numb	er of exemptions						
17 Credit	17 Credits (do not include any earned income credit)						
18 Other	taxes						
19 Federa	al income tax withheld						
20 Payme							
Part IV	Signature. Complete this part only	if you are filing F	orm 8379 by itself a	and no	t with you	r tax return.	
	es of perjury, I declare that I have examined ey are true, correct, and complete. Declarat						
Keep a copy of this form for your records	Injured spouse's signature			Date Ph		Phone number	
Paid Preparer	Print/Type preparer's name	r's name Preparer's signature				Check if if self-employed	
Use Only	Firm's name ▶				Firm's EIN ▶		
	Firm's address ▶				Phone no.		
						Form 8379 (Rev. 11-2016	