Virginia Department of Taxation Nonresident Real Property Owner Exemption Certificate

Part I. Owner/Seller	Part VII. Exempt Transfers of Real Property
SSN, Fed. Employer Identification #, or Virginia Business Account #	Gain on sale of principal residence up to \$250,000 (\$500,000 on joint return) exclud-
Name	ed from income pursuant to IRC § 121.
(If Trust) Name and Title of Fiduciary	Like-kind exchange under IRC § 1031.
Address (of Fiduciary if Trust) Number & Street or Rural Route & Box #	Involuntary conversions eligible for tax
City or Town, State and ZIP Code	deferral under IRC §§ 1033 & 1034.
Daytime Phone Number ()	Tax free gift or inheritance under IRC §
Part II. Type of Entity (check one)	
Individual C-Corp.	Tax free contribution for partnership interest under IRC § 721.
Trust/Estate Partnership LLC S-Corp	Transfer of property pursuant to tax-free corporate reorganization.
Part III. Property Information	Tax free contribution to corporation in ex-
Legal Description	change for stock under IRC § 351.
Address (Number and Street or Rural Route and Box Number)	Other transactions not subject to federal or
City or County	Virginia income taxes. Explain:
Part IV. Transaction Type (Check one)	
Sales Rental	
Part V. Broker or Real Estate Reporting Person SSN, Fed. Employer Identification #, or Virginia Business Account #	□ For Assistance:
π = 5510, Fed. Employer Identification π , or Virginia Business Account π	Write to: Department of Taxation
Name	Office of Customer Services P. O. Box 1115
Address (Number and Street)	Richmond, VA 23218-1115
City or Town, State and ZIP Code	Call: 804-367-8031 Internet: www.tax.virginia.gov To get forms: 804-440-2541
Part VI. Exemption for rental/lease gross annual payments of less than \$600	
I the undersigned hereby certify that the condition cite	ad applies to the property described herein and that this

I, the undersigned, hereby certify that the condition cited applies to the property described herein and that this transaction, property and/or income is exempt from the Nonresident Real Property Owner Registration Requirements.

Signature_____ Date _____

Mail this certificate to: Department of Taxation, P. O. Box 1880, Richmond, VA 23218-1880