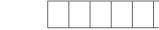


## 2019 Virginia Nonresident Income Tax Return \* VA0763119888\*

	Enclose a compl	ete copy o	f your feder	al ta	x return and all	l other required	l Virgin	ia e	nclosur	es.								
First Name		MI	Last Name		Suffix		Your Social Security N		ity Ni	umber				heck if eceased				
Spouse's First Name (Filing Status 2 Only)			MI	Last Name	Suffix		Spouse's Social Securi			ty Nur	nber			heck if eceased				
Present Home Address (Number and Street or Rural Route) Your Birth Date (mm-dd-yyyy)								]										
City, 1	Town or Post Office				State	ZIP Code	Spouse's Birth Date (mm-dd-yyyy)				-	-						
State	of Residence		Important - I	Name	of Virginia City or	County in which p		place of business, employment					ent, or	income source   Locality Cod				
			is located.									· 		_	County			
Ch	eck Applicable Boxes	Chec	nded Return k if Result of			Name(s) or a than Shown Return	on 2018	8 VA	A						n Due Date			
		Depe	pendent on Another's Return Qualifying Farmer, Fisherman, or EIC C Merchant Seaman						Jaim	ed on								
	Filing Status Enter	r Filing Stati	is Code in b	ox be	low			emr	otions A	dd S	\$ Sectio		1 and	2. Er	.0 nter the sum		ine 12.	
	•	•	ad of house		_			You	Spou Filing S	ise if Statu		epend					Section 1	
	<b>2</b> = Marrie	d, Filing Joi	nt Return - b	oth n	nust have Virgin rom Any Source			1	2°o	r3	+	-	=		X \$930 =			
	4 = Marrie	d, Filing Se	parate Retur	ns	-			/ou 6 or ove	5 Spouse r or ove		You Blind	Sp B	ouse lind		1	Total	Section 2	
	If Filing Status 3 or 4 box at top of form an			e Sp	ouse's Social Sec	curity Number			+	+		+	=		X \$800 =			
		•		Na											]			
1 2	Adjusted Gross Inc Additions from Sch													1			00	
3	Additions from Sch Add Lines 1 and 2													2			00	
														3			00	
4	Age Deduction (Se Enter Birth Dates a on Line 4a and You	bove. Enter	Your Age De	educ	tion									1a 1b			00	
5	on Line 4a and Your Spouse's Age Deduction on Line 4b								5			00						
6										6			00					
7 Subtractions from Schedule 763 ADJ, Line 7									00									
8	Add Lines 4a, 4b,	5, 6, and 7.												8			00	
9	Virginia Adjusted	Gross Inco	ome (VAGI).	Subt	tract Line 8 from	m Line 3								9			00	
10	Itemized Deduction	ns from Virgi	inia Schedule	эA, i	f applicable. Se	e instructions							1	10			00	
11	If you do not claim	itemized de	ductions on I	Line	10, enter standa	ard deduction.	See inst	ruct	ions					11			00	
12	Exemption amount	. Enter the t	otal amount	from	the Exemption	Sections 1 and	2 above	ə					1	12			00	
13	Deductions from Se	chedule 763	3 ADJ, Line 9										1	13			00	
14	Add Lines 10, 11,	12 and 13.											1	14			00	
15	Virginia Taxable Ind	come compi	uted as a res	iden	t. Subtract Line	14 from Line 9.							1	15			00	
16       Percentage from Nonresident Allocation Section on Page 2 (Enter to one decimal place only)								%										
17	Nonresident Taxab	le Income. (	Multiply Line	15 k	oy percentage o	n Line 16)							1	17			00	
18	Income Tax from Ta	ax Table or <sup>-</sup>	Tax Rate Sch	nedul	e								1	18			00	

For Local Use	LTD
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## 2019 FORM 763 Page 2

9.

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14.

Your	Vame	Your SSN						JI		- 1	30		0
19a	Your Virginia income tax withheld. Enclose F	⊥ orms W-2, W-2G, 10	99, and VK-1					. 19	a				00
19b Spouse's Virginia income tax withheld. Enclose Forms W-2, W-2G, 1099, and VK-1							. 19	b				00	
20									0				00
21								1				00	
22 Extension Payment - submitted using Form 760IP							2				00		
23	Credit for Low-Income Individuals or Virginia	Earned Income Cred	dit from Schedule	e 7	763 ADJ, Li	ne 17	,	. 2	3				00
24	Total credits from Schedule OSC.							. 2	4				00
25	Credits from Schedule CR, Section 5, Line 1.								5				00
26	Total payments and credits. Add Lines 19								6				00
27	If Line 18 is larger than Line 26, enter the dif	ference. This is the <b>II</b>	NCOME TAX YO	ວບ	OWE			. 2	7				00
28	If Line 26 is larger than Line 18, enter the dif								8				00
29	Amount of overpayment on Line 28 to be CRE								9				00
30	Virginia529 and ABLEnow Contributions fron								0				00
31	Other Voluntary Contributions from Schedule VAC, Section II, Line 14							. 3	1				00
32	Addition to Tax, Penalty, and Interest from <b>er</b>								2				00
33	Sales and Use Tax is due on Internet, mail ord See instructions	der, and out-of-state p	ourchases (Cons	um	ner's Use T	ax).		3	3				00
34	Add Lines 29 through 33.							. 3	4				00
35	If you owe tax on Line 27, add Lines 27 and Line 34 is larger than Line 28, enter the differ www.tax.virginia.govCheck here if pa	rence. AMOUNT YO	U OWE. Enclos	se p	payment or	pay		3	5				00
36	If Line 28 is larger than Line 34, subtract Line 3	84 from Line 28. This i	is the amount to b	be l	REFUNDE	о то	YOU.	3	6				00
	Direct Deposit section below is not completed,		ssued by check.										
	CT BANK DEPOSIT Your Bank Routing	Transit Number	Your Bar	nk /	Account N	umbe	r Ch	ecking		Sa	avings		]
	ernational Deposits												
Non	resident Allocation Percentage				A -		ources		В-	Virgi	nia Sou	irces	
1.	Wages, salaries, tips, etc		1	1				00					00
2.	Interest income			2				00					00
3.	Dividends			3				00					00
4.	Alimony received		4	1				00					00
5.	Business income or loss			- F				00				$\square$	00
6.	Capital gain or loss/capital gain distributions			Ē				00				$ \rightarrow $	00
7.	Other gains or losses			7				00					00
8.	Taxable pensions, annuities and IRA distributi	ons	8	3				00					

\*\///0762010222\*

TOTAL - Add Lines 1 through 13 and enter each column total here..... 14 00 15. Nonresident allocation percentage - Divide Line 14 B, by Line 14 A. Compute percentage to one decimal place (e.g., 5.4%). Enter on Page 1, Line 16..... 15 I agree to obtain my Form 1099-G at www.tax.virginia.gov. I (We) authorize the Dept. of Taxation to discuss this return with my (our) preparer. 1 (We), the undersigned, declare under penalty provided by law that I (we) have examined this return and to the best of my (our) knowledge, it is a true, correct, and complete return.

Rents, royalties, partnerships, estates, trusts, S corporations, etc.....

Farm income or loss.

Other income.....

Interest on obligations of other states from Schedule 763 ADJ, Line 1.....

Lump-sum and accumulation distributions included on Sch. 763 ADJ, Line 3.

Your Signature	Your Phone Number	Date			
Spouse's Signature (If a joint return, <b>both</b> must sign	)	Spouse's Phone Number	Preparer's PTIN	Vendor Code	
Preparer's Name	Firm's Name (or Yours if Self-Employed)	Preparer's Phone Number	Filing Election Code	ID Theft PIN	

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