Staple Here

Virginia Nonresident Income Tax Return

Due May 1, 2013

Attach a complete copy of your federal tax return and all other required Virginia attach



	Attach a complete	e copy or your red	erar ta	x return a	anu	all	other	16	quirec	virgiilla	illaciiiile	iiio.									
First N	ame	MI	Last Name Suffix Your Social Secur							ecurity Number						Check if deceased					
Spous	e's First Name (Filing Sta	МІ	Last Name Suffix						Suffix	Spouse'	s Socia	Social Security Number									
Preser	ent Home Address (Number and Street or Rural Route) State of Re														ence						
City, To	Town or Post Office State ZIP Code													9							
Impor	ortant - Name of Virginia City or County in which principal place of business, employment or income Locality Co														de from Instructions						
	e is located	.,,	ļļ-	p			,	-,	Γ		County		,								
Your H	lome Phone Number	ur Busines	City OR Cou								Spouse's Business Phone Number										
			фотобрания																		
Prepar	rer's PTIN	Filing Election	on Co	ode		I(we) authorize the Department of Tax (our) preparer.								xation to discuss my (our) return with my							
Chec Boxe	k Applicable s:	Chook if Popult of NOI									Overseas on Due Da										
	Showing 2011 va Requiri											EIC Claimed on federal return									
	L	Dependent on Another's Qualifying Farmer, Fisherman or Merchant Seaman Return													\$.00						
										EXE	MPTION	S (Ente	er Nu	ımbe	r be	low)					
Filin	ng Status (Check Onl		You	De]	pende	nts [To	tal Section	1 65 o	over	Blind	d T		1	То	tal Section 2				
`	1) Single- Did you claim		_	1	+		=		X \$930 =			+		=		X \$800	=				
	2) Married, Filing Joi source income		2	+		=		X \$930 =			+		=		X \$800	=					
□ (; □ (4	 Married, Spouse H Enter Spouse's SSN a Spouse's full name 	y Source-	2	+		=		X \$930 =			+		=		X \$800	=					
☐ (·	(4) Married, Filing Separate Returns - Enter Spouse's SSN above							=		X \$930 =			+] =		X \$800	_ [
	Enter Spouse's SSN above Spouse's full name Add the Total of Section 1 plus the Total of Section													ction] 1 2. F	Enter f	the sum	on L	_ine 13		
Date	e of Birth Y							use's Birt													
1 2	ate of Birth Your Birth Date Spouse's Birth Date (mm-dd-yyyy) (mm-dd-yyyy)																				
1	Adjusted Gross Inco														1				00		
2	Additions from Sche	dule 763 ADJ, Line	3												2	2			00		
. 3	Add Lines 1 and 2.														3	3			00		
4	4 Age Deduction (See instructions and the Age Deduction Worksheet). You														4a	1			00		
_	Enter Birth Dates ab on Line 4a and Your			b							S	Spous	se	4b	,			00			
5	5 Social Security Act and equivalent Tier 1 Railroad Retirement Act benefits reported on your federal return										າ		5	5			00				
6															6	3			00		
7	Subtractions from Schedule 763 ADJ, Line 7.														7	,			00		
8															8	3			00		
9	Virginia Adjusted G	Gross Income (VAC	SI). Su	btract Lir	ne 8	fro	m Lir	ne 3	3						ç)			00		
10	Virginia Adjusted Gross Income (VAGI). Subtract Line 8 from Line 3. Deductions: Enter total Federal Itemized Deductions from Federal Schedule A.														10				00		
11	State and Local income taxes claimed from Federal Schedule A, if claiming Itemized Deductions														11				00		
12	If claiming Itemized Deductions subtract Line 11 from Line 10 or enter Standard Deduction amount													12	2			00			
13	Exemption amount. Enter the total amount from the Exemption Sections 1 and 2 above													13	3			00			
14	Deductions from Sch	nedule 763 ADJ, Lir	ne 9												14	١ [00		
4.5	5 Add Lines 12, 13, and 14													15							
15	Add Lilles 12, 13, a	na 14													15	'			00		

FOR Your N		(2012) Page 2	2			Your S	SSN													
40	\	Tavabla la sance sa				4 0		45 6	Line O			1188			40					
16	•	Taxable Income co	•												16					00
17		age from Nonreside									-				17					%
18	Nonresident Taxable Income. (Multiply Line 16 by percentage on Line 17).													18					00	
19	Income Tax from Tax Table or Tax Rate Schedule.													19					00	
20a	`	ginia income tax wi		•											20a					00
20b		s Virginia income to													20b					00
21		timated Tax Payme	`				,								21					00
22														22					00	
23	Tax Cred	lit for Low Income	Individ	duals	or Virgini	a Ea	rned Incom	e Credit	from Sc	hedule	e 763	ADJ, Li	ne 17		23					00
24	Total cre	dits from Schedule	OSC)											24					00
25	Credits f	rom Schedule CR,	Secti	ion 5,	Line 1A.	If cla	iming Politi	cal Cont	ribution	Credit	only,	check b	юх		25					00
26	Total pa	yments and credi	ts. A	dd Lii	nes 20a,	20b	, 21, 22, 23	24 and	25						26					00
27	If Line 19	9 is larger than Line	e 26, e	enter t	the differ	ence	. This is the	INCOM	E TAX	you o	WE.	Skip to	Line 3	30	27					00
28	If Line 26	6 is larger than Line	e 19, e	enter t	the differ	ence	. This is the	OVERF	PAYMEN	IT AM	OUNT				28					00
29	Amount o	of overpayment on L	ine 28	8 to be	CREDIT	FD 1	TO 2013 FS	TIMATFI	DINCON	ΛΕ ΤΔ	X				29					00
30		ents and Voluntary													30					00
31	-	es 29 and 30													31					00
32		e tax on Line 27, a													31					00
32	larger th	an Line 28, enter the eck here if credit ca	ne diff	ferenc	e. This is	the	AMOUNT Y	OU OW	E. Attac	ch payr	ment.				32					00
33	If Line 28	B is larger than Line	31, su	ubtract	Line 31	from	Line 28. Thi	s is the a	mount to	o be R l	EFUN	DED TO	ο Υοι	J.	33					00
		REFUND CHECKS V	VILL N					Card or	Direct D	eposit	belov	٧.								_
DE	BIT CARE	D 🗆	OR		ECT BAN	K DE	POSIT		Your b	ank ro	uting	transit	numb	er						
		ox to have your		1	pe: necking								1						\pm	\pm
	und issued oit card.	I on a prepaid			vings		Account r	umber												
		ENT ALLOCATION	N PER	RCEN	Γ AGE . Ε	nter	negative nu	mbers ir	bracke	ts.		A - A	All So	urces			B - Virg	inia Sou	ırces	
1	Wages	salaries, tips, etc.								1					00					00
2	Interest	income								2					00					00
3	Dividen	ds								3					00					00
4	Alimon	y received								4					00					00
5		ss income or loss													00	-				00
6													00	-				00		
7 8													00					00		
9		•													00					00
10												00					00			
11												00					00			
12		on obligations of o								12					00					
13		um distributions/ac								12					+					
		ne 3								13					00					00
14	TOTAL	- Add Lines 1 throu	ugh 13	3 and	enter ea	ch co	olumn total	nere		14					00					00
15	percent	ident allocation per tage to one decima there and on Line	al plac	e, but	not more	e tha	n 100% (ex	ample 5	.4%).	15										%
	the undersi	gned, declare under p		_							the be	st of my	(our) k	nowled	ge, it is a	a true, o	correct a	nd compl	ete re	turn.
	se Sign Iere	Your Signature						D	ate S	pouse's	Signa	ture (If a	a joint	return, I	both mu	ıst sign)		Date	
	parer's e Only	Preparer's Name						Firm's 1	Name (or	Yours i	f Self-I	Employe	d) [Prepare	er's Phor	ne Num	ber			