





Your Name	Your SSN
-----------	----------

19b Spouse's Virginia income tax withheld. Enclose Forms W-2, W-2G, 1099, and VK-1.....	19b		00
20 2023 Estimated Tax Payments.....	20		00
21 2022 overpayment credited to 2023 estimated tax.....	21		00
22 Extension Payment - submitted using Form 7601P.....	22		00
23 Credit for Low-Income Individuals or Virginia Earned Income Credit from Schedule 763 ADJ, Line 17.....	23		00
24 Total credits from Schedule OSC.....	24		00
25 Credits from Schedule CR, Section 5, Line 1A.....	25		00
26 <b>Total payments and credits. Add Lines 19a through 25.</b> .....	26		00
27 If Line 18 is larger than Line 26, enter the difference. This is the <b>INCOME TAX YOU OWE.</b> .....	27		00
28 If Line 26 is larger than Line 18, enter the difference. This is the <b>OVERPAYMENT AMOUNT.</b> .....	28		00
29 Amount of overpayment on Line 28 to be CREDITED TO 2024 ESTIMATED INCOME TAX.....	29		00
30 Virginia529 and ABLE Contributions from Schedule VAC, Part I, Line 6.....	30		00
31 Other Voluntary Contributions from Schedule VAC, Section II, Line 14.....	31		00
32 Addition to Tax, Penalty, and Interest from <b>enclosed</b> Schedule 763 ADJ, Line 21. See instructions..... Enclose 760C or 760F and check here..... <input type="checkbox"/>	32		00
33 Sales and Use Tax is due on Internet, mail order, and out-of-state purchases (Consumer's Use Tax). See instructions..... Check here if no sales and use tax is due..... <input type="checkbox"/>	33		00
34 <b>Add Lines 29 through 33.</b> .....	34		00
35 If you owe tax on Line 27, add Lines 27 and 34 - <b>OR</b> - If you have an overpayment on Line 28 and Line 34 is larger than Line 28, enter the difference. <b>AMOUNT YOU OWE.</b> Enclose payment or pay at <b>www.tax.virginia.gov.</b> .....Check here if paying by credit or debit card - See instructions..... <input type="checkbox"/>	35		00
36 If Line 28 is larger than Line 34, subtract Line 34 from Line 28. This is the amount to be <b>REFUNDED TO YOU.</b> .....	36		00

If the Direct Deposit section below is not completed, your refund will be issued by check.

<b>DIRECT BANK DEPOSIT</b> Domestic Accounts Only No International Deposits	Your Bank Routing Transit Number	Your Bank Account Number	Checking <input type="checkbox"/>	Savings <input type="checkbox"/>							
	<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table>					<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table>					

**Nonresident Allocation Percentage**

		A - All Sources		B - Virginia Sources
1. Wages, salaries, tips, etc.....	1	00		00
2. Interest income.....	2	00		00
3. Dividends.....	3	00		00
4. Alimony received.....	4	00		00
5. Business income or loss.....	5	00		00
6. Capital gain or loss/capital gain distributions.....	6	00		00
7. Other gains or losses.....	7	00		00
8. Taxable pensions, annuities and IRA distributions.....	8	00		
9. Rents, royalties, partnerships, estates, trusts, S corporations, etc.....	9	00		00
10. Farm income or loss.....	10	00		00
11. Other income.....	11	00		00
12. Interest on obligations of other states from Schedule 763 ADJ, Line 1.....	12	00		
13. Lump-sum and accumulation distributions included on Sch. 763 ADJ, Line 3..	13	00		00
14. TOTAL - Add Lines 1 through 13 and enter each column total here.....	14	00		00
15. Nonresident allocation percentage - Divide Line 14 B, by Line 14 A. <i>Compute percentage to one decimal place (e.g., 5.4%).</i> Enter on Page 1, Line 16.....	15			%

I (We) authorize the Dept. of Taxation to discuss this return with my (our) preparer.  I agree to obtain my Form 1099-G at [www.tax.virginia.gov](http://www.tax.virginia.gov).

I (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.

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