

## 2024 Virginia Nonresident Income Tax Return Due May 1, 2025



Enclose a complete conv of your federal tax return and all other required Virginia

First N	Jame			MI	Last Name		Suffix		Your Soc		ecurity N	lumber			Che	ck if	
													eased				
Spouse's First Name (Filing Status 2 Only)				MI	Last Name	Suffix Spouse's Social Secu			urity Number			Che dece					
Present Home Address (Number and Street or Rural Ro				pute)			Your Birth Date (mm-dd-yyyy)										
City, Town, or Post Office					State	ZIP Code Spouse's Birth Date (mm-dd-yyyy)											
State	of Residence			Name	e of Virginia City o	l r County in which p		-			employn	nent, or i	incorr	ne source	.ocality C	ode	
			is located.	-								City C	dr [	County			
Amended Return Reason Code Name(s) or Address Different than Shown on 2023 VA Return						Ov	erse	erseas on Due Date									
Ch	eck Applicable Boxes			L	m'a Datuma								EIC Claimad on fadaral raturn				
			ndent on An	otne	r's Return	Merchant Se	Farmer, Fisherman, or EIC Claimed on federal return Seaman \$ .00								.00		
	Filing Status Ente	r Filing Stat	us Code in b	ox b	elow.		Ex	emp	otions A	dd S	ections	1 and	2. Er	nter the sur		e 12.	
			ead of house					You	Spou Filing S	Status	Depen	dents		Total Section 1			
					th must have Virginia income e From Any Source			2 <sup>°</sup> or 3				] _ [		X \$930 =			
			parate Retur		·			You 65	5 Spouse		/ou S	pouse					
	g Status 3 or 4, en					-		or ove	r or ove	er B	lind	Blind		]	Total Se	ction 2	
box at	t top of form and en	iter Spouse'	s Name						+	+	+	=		X \$800 =			
1	Adjusted Gross In	come from	federal returr	n - N	lot federal taxab	le income							1			00	
2	2 Additions from Schedule 763 ADJ, Line 3.							2			00						
3	Add Lines 1 and	2											3			00	
4	Age Deduction (S										You	4	a			00	
	Enter Birth Dates and Your Spouse'									(	Spouse	e 4	b			00	
5	Social Security Ac	t and equiva	alent Tier 1 F	Railro	ad Retirement	Act benefits repo	orted on	n you	ur federa	ıl retu	ırn		5			00	
6	State income tax	refund or ov	erpayment c	redit	reported as inc	ome on your fea	leral ret	turn.					6			00	
7	Subtractions from	Schedule 7	63 ADJ, Line	e 7									7			00	
8	Add Lines 4a, 4b	, 5, 6, and 7	7										8			00	
9	Virginia Adjusted	d Gross Inc	ome (VAGI).	. Sul	btract Line 8 fro	om Line 3							9			00	
10	Itemized Deduction	ons from Virg	ginia Schedu	le A,	if applicable. S	ee instructions						1	0			00	
11	If you do not claim	n itemized d	eductions on	Line	e 10, enter stand	dard deduction.	See ins	struct	tions			1	1			00	
12	Exemption amour	nt. Enter the	total amount	t fror	n the Exemptior	n Sections 1 and	2 abov	ve				1	2			00	
13	Deductions from S	Schedule 76	3 ADJ, Line	9								1	3			00	
14	4 Add Lines 10, 11, 12, and 13						1	4			00						
15	15 Virginia Taxable Income computed as a resident. Subtract Line 14 from Line 9						1	5			00						
16 Percentage from Nonresident Allocation Section on Page 2 (Enter to one decimal place only)					1	6			%								
17 Nonresident Taxable Income. (Multiply Lin			e 15	15 by percentage on Line 16)						1	7			00			
18	Income Tax from	Tax Table or	Tax Rate Sc	hed	ule							1	8			00	
19a	Your Virginia inco	me tax with	neld. Enclose	e For	ms W-2, W-2G,	1099, and VK-1						19	a			00	
	Dept. of Taxation F 1044 Rev. 11/24	or Local Use	LTD		\$												

## 2024 FORM 763 Page 2

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2024	FORM 763 Page 2									
Your I	Name	Your SSN								
19b	Spouse's Virginia income tax withheld. Enclo	se Forms W-2, W-2G, 10	099, and VK-1			19b			00	0
20	2024 Estimated Tax Payments		20			00	0			
21	2023 overpayment credited to 2024 estimate		21			00	0			
22	Extension Payment – submitted using Form		22			00	0			
23	Credit for Low-Income Individuals or Virginia		23			00	0			
24	Total credits from Schedule OSC.					24			00	0
25	Credits from Schedule CR, Section 5, Line 1,	A				25			00	0
26	Total payments and credits. Add Lines 19a through 25.								00	0
27	If Line 18 is larger than Line 26, enter the dif	erence. This is the INCC	ME TAX YOU C	OWE		27			00	0
28	If Line 26 is larger than Line 18, enter the dif	erence. This is the OVE	RPAYMENT AM	OUNT		28			00	0
29	Amount of overpayment on Line 28 to be CREI	DITED TO 2025 ESTIMA	TED INCOME T	AX		29			00	0
30	Commonwealth Savers (formerly Virginia529	and ABLE) Contribution	s from Schedule	VAC, Section I	Line 6	30			00	0
31	Other Voluntary Contributions from Schedule VAC, Section II, Line 14								00	0
32	Addition to Tax, Penalty, and Interest from <b>er</b> See instructions Encl	32			00	0				
33	Sales and Use Tax is due on Internet, mail or See instructions	· · ·	``	,		33			00	0
34	Add Lines 29 through 33.					34			00	0
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 YOU O	WE. Enclose pa	ayment or pay a		35			00	0
36	If Line 28 is larger than Line 34, subtract Line 3	84 from Line 28. This is the	e amount to be <b>R</b>	EFUNDED TO Y	OU.	36			00	0
If the	Direct Deposit section below is not completed,	your refund will be issue	ed by check.							
	CT BANK DEPOSIT Your Bank Routing T	Fransit Number	Your Bank A	ccount Number	Cheo	king		Savings		
	ernational Deposits									
Non	resident Allocation Percentage			A - All So	urces		B - \	/irginia So	urces	_
1.	Wages, salaries, tips, etc		1			00			00	)
2.	Interest income		2			00			00	)
3.	Dividends					00			00	)
4.	Alimony received.		4			00			00	)
5.	Business income or loss					00			00	_
6.	Capital gain or loss/capital gain distributions					00			00	_
7.	Other gains or losses		7			00			00	)

I (We) authorize the Dept. of Taxation to discuss this return with my (our) preparer.

Taxable pensions, annuities, and IRA distributions.

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.

TOTAL - Add Lines 1 through 13 and enter each column total here.....

percentage to one decimal place (e.g., 5.4%). Enter on Page 1, Line 16.....

15. Nonresident allocation percentage - Divide Line 14 B, by Line 14 A. Compute

I agree to obtain my Form 1099-G at **www.tax.virginia.gov**.

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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, both 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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