763Page1

2016 Virginia Nonresident Income Tax Return Due May 1, 2017



Е	nclose a comp	lete copy o	f your feder	al ta	x return and all	other required	d Virginia		es.					
First Name				MI	Last Name	Suffix Your Social Sec			Security Number				heck if eceased	
Spouse's First Name (Filing Status 2 Only)				MI	Last Name	Suffix Spouse's Social Securi			urity Numl	Number			heck if eceased	
Present Home Address (Number and Street or Rural Route)								ır Birth Date		_	_			
City. Tow	n or Post Office				State	1	nm-dd-yyyy) s Birth Date							
			ı			ZIP Code		nm-dd-yyyy)			_			
State of F	Residence		Important - I is located.	Name	e of Virginia City or	County in which	principal pl	ace of busine		_			ocality	Code
		□ Amor	adad Datum			Nama(a) ar	Addross F	Different		City O				
Check Applicable Boxes			nded Return k if Result of	NOL	- 🗆	Name(s) or note than Shown Return				Oversea	s on D	ue Date		
		Depe									claimed on federal return			
Fil	ing Status Ente	er Filing Statu	us Code in b	ox be	elow	Welchant Se		mptions Ac	\$_ dd Section	s 1 and 2	2. Ente	.0. er the sum		ine 13.
Code	_	_			old? YES			Spous						Section 1
	2 = Married, Filing Joint Return - bo 3 = Married, Spouse Has No Incom						-	1 + [j + [= [)	X \$930 =		
		•	parate Retur		Tom Any Source	•		u 65 Spouse 6	65 You	Spouse Blind			Total	Section 2
If Filing Status 3 or 4, enter spouse's SSN in the Spouse's Social Security Number							Blind +		<u> </u>	X \$800 =	Total	Dection 2		
box at top of form and, enter Spouse's Name + + + + +														
1	1 Adjusted Gross Income from federal return - Not federal taxable income													00
2											!			00
3	Add Lines 1 a	nd 2								3	-			00
4 Age Deduction (See instructions and the Age Deduction Worksheet)										ı			00	
	on Line 4a and Your Spouse's Age Deduction on Line 4b										·			00
5	•				ilroad Retiremer			-						00
6					dit reported as i	•								00
7					,									00
8														00
9	Virginia Adjus					00								
10	Itemized Dedu State and local					00								
11 12	If claiming item					00								
13	Exemption am					00								
14	Deductions fro					00								
15	Add Lines 12,					00								
16	Virginia Taxabl					00								
17														%
18	Nonresident Taxable Income. (Multiply Line 16 by percentage on Line 17)													00
19	9 Income Tax from Tax Table or Tax Rate Schedule										,			00
Va Der	ot, of Taxation	For Local Use							_					

2601044 Rev. 08/16

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2016 FORM 763 Page 2

2016	FORM 763 Page 2																
Your N	Name	,	Your SSN	١													
20a	Your Virginia income tax withheld. E	nclose Forr	ns W-2,	W-2G,	1099 a	nd VK-	1		_ 			20	а			00	
20b	Spouse's Virginia income tax withhe	ld. Enclose	Forms	W-2, W	-2G, 10	99 and	l VK-1.					20	b			00	
21	2016 Estimated Tax Payments											2	1			00	
22	2015 overpayment credited to 2016	estimated t	ах									2	2			00	
23	Extension Payment - submitted usin												3			00	
24	Credit for Low-Income Individuals or												4			00	
25	Total credits from Schedule OSC											2	5			00	
26	Credit for Political Contributions											2	6			00	
27	Credits from Schedule CR, Section 5	5. Line 1A										2	7			00	
28	Total payments and credits. Add												8			00	
29	If Line 19 is larger than Line 28, ente															00	
30	If Line 28 is larger than Line 19, enter															00	
31	Amount of overpayment on Line 30 to															00	
32	Virginia College Savings Plan Contri															00	
33	Other Voluntary Contributions from S															00	
34	Addition to Tax, Penalty and Interest		•	-												00	
35	Sales and Use Tax is due on Internet															+	
	See instructions. Do not leave blank	•														00	
36	Add Lines 31 through 35											3	6			00	
37	If you owe tax on Line 29, add Lines is larger than Line 30, enter the diffe virginia.gov. Check here if particular than the control of the control	rence. AMO	Y TNUC	OU OW	/E. End	lose pa	yment	or p	ay at	www.ta	х	3	7			00	
38 If the I	If Line 30 is larger than Line 36, subtra Direct Deposit section below is not comp						nt to be	REF	UND	ED TO Y	OU.	3	8			00	
DIRE	CT BANK DEPOSIT Your Bank	Routing Tra	ansit Nu	mber		You	ır Banl	< Acc	ount	Number	· C	hecking		Saving	s [
	stic Accounts Only ernational Deposits																
Nor	resident Allocation Percentage)								A - All So	ources		B - Vi	ginia	Source	s	
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 distr	ibutions					6					00				00	
7.	Other gains or losses						7					00				00	
8.	Taxable pensions, annuities and IRA	A distribution	าร				8					00					
9.	Rents, royalties, partnerships, estate	es, trusts, S	corpor	ations, e	etc		9					00				00	
10.	Farm income or loss											00				00	
11.	Other income						11					00				00	
12.	Interest on obligations of other state	s from Sche	edule 76	63 ADJ,	Line 1.		12					00					
13.	Lump-sum and accumulation distribu											00				00	
14.	TOTAL - Add Lines 1 through 13 and											00				00	
15.	Nonresident allocation percentage - percentage to one decimal place (e.															%	
	(We) authorize the Dept. of Taxation to d	iscuss this r	eturn wit	th my (o	ur) prepa	arer.		Ιag	gree t	o obtain ı	my For	m 1099-	G at www.ta	x.virgi	nia.gov	·.	
	the undersigned, declare under penalty proignature	vided by law	that I (we	e) have e	examined		urn and our Phon			of my (ou	ır) knov	vledge, it Date	is a true, corr	ect and	comple	<u>te returr</u>	
Spous	Spouse's Signature (If a joint return, both must sign)								Numb	er		Prepa	arer's PTIN	Vend	Vendor Code		
Prepa	rer's Name Fir	m's Name (or `	Pr	Preparer's Phone Number					Filing	Election Code	Office	Office Use Only					