Form 760PY

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2022 Virginia Part-Year Resident Income Tax Return



Due May 1, 2023 Page 1 See instructions before completing line items. **Dates of VA Residence** Enclose a complete copy of your federal tax return and all other required Virginia enclosures. (mm-dd-yyyy) A Your Social Security Number YOUR First Name Your Last Name Check if deceased Suffix You - To R Spouse's Social Security Number Suffix SPOUSE'S First Name (filing status 2 or 4) Spouse's Last Name Check if deceased Spouse - From Spouse - To Present Home Address (Number and Street, or Rural Route) VA Driver's License Information Customer ID City, Town or Post Office Issue Date (mm-dd-yyyy) State ZIP Code Locality Code You Spouse Combined Social Security for You and Amended Return Qualifying Farmer, Fisherman or Merchant Seaman Spouse reported as taxable income on Check Reason Code Federal Return **Applicable** Earned Income Credit Claimed on federal return Dependent on Another's Return **Boxes** Overseas on Due Date .00 I/we authorize the sharing of certain information from Form 760PY and Schedule HCI (as described in the instructions) with the Department of Medical Assistance Services (DMAS) and the Department of Social Services (DSS) for purposes of identifying persons who would like to newly enroll in medical assistance. **Exemptions** Enter the number of exemptions being claimed. Filing Status Enter Filing Status Code in box below. You/ 1 = Single (Column A) - Federal head of household? YES Spouse Dependents 65 or Over 2 = Married, Filing Joint return (Column A) A - You Enter the numbers for both You and Spouse if Filing Status 2 3 = Married, Filing Separate returns (Column A) 4 = Married, Filing Separately on this combined return (Columns A and B) B - Spouse If Filing Status 3, enter spouse's SSN in the Spouse's Social Security Number Filing Status 4 Only box at top of form and, enter Spouse's Name **DATE OF BIRTH** Spouse You Your Birth Date (mm-dd-yyyy) Filing Status 4 Include Spouse if ONLY Filing Status 2 Spouse's Birth Date (mm-dd-yyyy) Complete the Schedule of Income first and submit it with your Form 760PY. FEDERAL ADJUSTED GROSS INCOME from Schedule of Income, Part 1, იი 00 Line 7, Column 1. 2 Additions from Schedule 760PY ADJ, Line 3. 00 2 00 Add Lines 1 and 2. 3 00 00 Qualifying Age Deduction. Enter Birth Dates above. Complete Age Deduction 4a 00 Worksheet in instructions. Enter Spouse's Age Deduction on Line 4b, Column B when using Filing Status 4 ONLY. Otherwise, claim Your Age Deduction on 4b 00 00 Line 4a, Column A and Spouse's on Line 4b, Column A. 5 Social Security Act and equivalent Tier 1 Railroad Retirement Act benefits reported as taxable income on federal return and attributable to your period of 00 00 residence in Virginia. 6 State income tax refund or overpayment credit reported as income on your federal return and received while a Virginia resident. Claim in the same column 00 00 you reported adjusted gross income on Line 1..... Income attributable to your period of residence outside Virginia from Schedule of 00 00 Income, Part 1, Line 9, Column 3.

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12 If you do not from Standard	claim itemized of Deductions Wo	deductions orksheet in	s on Line 1 instruction	1, enter standard ded	duction	12		
Va. Dept. of Taxation 2601039 Rev. 07/22	For Local Use	LTD		\$				

Subtractions from Schedule 760PY ADJ, Line 7.

Add Lines 4a, 4b, 5, 6, 7, and 8.....

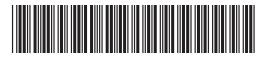
Virginia Adjusted Gross Income (VAGI). Subtract Line 9 from Line 3......

See Instructions.

Itemized Deductions from Virginia Schedule A paid while a Virginia resident.

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Your Name	Your SSN



		E	Filing Status 4		Α '	Filing Sta	
13	Prorated exemption amount from Schedule of Income, Part 2, Line 11. See instructions	13		00			00
14	Deductions from Schedule 760PY ADJ, Line 9.	14		00			00
15	Add Lines 11, 12, 13 and 14.	15		00			00
16	Virginia Taxable Income. Subtract Line 15 from Line 10	16		00			00
17	Tax amount from Tax Table or Tax Rate Schedule.	17		00			00
18	Total Tax. Add Line 17, Column A and Line 17, Column B			. 18			00
19a	9a Your Virginia income tax withheld. Enclose copies of Forms W-2, W-2G, 1099 and VK-1						00
19b	9b Spouse's Virginia income tax withheld. Enclose copies of Forms W-2, W-2G, 1099 and VK-1						00
20	Combined 2022 Estimated Tax Payments			. 20			00
21	2021 overpayment credited to 2022 estimated taxes			. 21			00
22	Extension Payment - Enter amount paid on Form 760IP			. 22			00
23	Tax Credit for Low-Income Individuals or Virginia Earned Income Credit fr	rom Schedule 76	60PY ADJ, Line 17.	. 23			00
24	Total credit for taxes paid to another state from Schedule OSC			. 24			00
25	25 Credits from Schedule CR, Section 5, Line 1A.						00
26	26 Total payments and credits. Add Lines 19a through 25.						00
27	If Line 18 is larger than Line 26, enter the difference. This is the INCOME	TAX YOU OWE		. 27			00
28	If Line 26 is larger than Line 18, enter the difference. This is the OVERPA	YMENT AMOUN	NT	. 28			00
29	29 Amount of overpayment on Line 28 to be CREDITED TO 2023 ESTIMATED INCOME TAX						00
30	Virginia529 and ABLE Contributions from Schedule VAC, Section 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 enclosed Schedule 760PY AD See instructions Enclose 760C or 760F and check	J, Line 21. here		32			00
33							00
34	Add Lines 29 through 33						00
35	If you owe tax on Line 27, add Lines 27 and 34 - OR - If Line 28 is an ove Line 28, enter the difference. Enclose payment or pay at www.tax.virgin Check here if paying by credit or debit card - See instructions	nia.govAMOl	JNT YOU OWE	35			00
36	If Line 28 is larger than Line 34, subtract Line 34 from Line 28			36			00
NDEC	If the Direct Deposit section below is not completed, your refund will be issued	-					00
	T BANK DEPOSIT Your Bank Routing Transit Number tic Accounts Only.	Your Bank Accor	unt Number Che	cking	∐ S	Savings	
lo Inte	rnational Deposits.						
I (We	Ve) authorize the Department of Taxation to discuss this return with my (our) pre), the undersigned, declare under penalty of law that I (we) have examined omplete return.	•	agree to obtain my Fo to the best of my (c			•	-
	our Signature Your Phone Number Date						
Spore	e's Signature (If a joint return, both must sign)	Spouse's Phone Nui	Data				
opouse	o organismo (ii a joint rotum, bosi must sign)	opouses Filone Nul	Date				
Prepar	er's Name	Preparer's Phone Nu	Date				
Firm's	Name (or Yours if Self-Employed)	Preparer's PTIN	Vendor Code	Filing Elec	ction Code	ID Theft PI	N