Form 760PY

2024 Virginia Part-Year Resident Income Tax Return Due May 1, 2025



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See instructions before completing line items. Enclose a complete copy of your federal tax return and all other required Virginia enclosures.									Dates of VA Residence (mm-dd-yyyy)							
YOUR First Name MI			Your Last Name	Che	eck if deceased		Suffix	A Your So	Your Social Security Number			١	∕ou - From	,	You - To	
SPOUSE'S First Name (filing status 2 or 4) MI			Spouse's Last Nar	ne Che	eck if deceased		Suffix	B Spouse	's Social	Security	Number	Sp	ouse - Fro	om I	Spouse - 1	Го
Present Home Address (Number and Street, or Rural Route)						VA Driver's License Information Customer ID				rmation						
City, Town or Post Office								You								
State			ZIP Code Locality Code				Code	You Issue Date (mm-dd-yyyy) You					-			
Appli	Amended Re Reasor Cable Xes Dependent o	Code		E	Qualifying arned Incor			erman, or N	Merchar	nt Seam	S		reported	Security tas taxable		
	Overseas on			\$				00			\$				00	
	authorize the sharing of certain SS), and the Virginia Health Ber															
1 = Single (Column A) - Federal head of household? YES 2 = Married, Filing Joint return (Column A) 3 = Married, Filing Separate returns (Column A) Enter the numbers for both You and Spouse if Filing Status 2					You Spou	J /		ons bein	_	ed.						
II FIIIIU SIAIUS S. EIILEI SUUUSE S SSIN III IIIE SUUUSE S SUUIAI SEUUIIIV INUIIIUEI						B - Spo ing Statu										
DATE	OF BIRTH Your Birth Date (n		Ĭ		-	-			В	Filing	ouse Status 4		A	Yo Include S	oouse if	
	Spouse's Birth Da	ite (m	m-dd-yyyy)			_					NLY	1		Filing St	atus 2	
	nplete the Schedule of I FEDERAL ADJUSTED 0 Line 7, Column 1	ROS	S INCOME fro	om Sch	nedule of I	nco	me, Par	t 1,				00				00
2 Additions from Schedule 760PY ADJ, Line 3.					. 2				00				00			
3 Add Lines 1 and 2										00				00		
4 Qualifying Age Deduction. Enter Birth Dates above. Complete Age Deduction Worksheet in instructions. Enter Spouse's Age Deduction on Line 4b, Column									00							
B when using Filing Status 4 ONLY. Otherwise, claim Your Age Deduction of Line 4a, Column A and Spouse's on Line 4b, Column A								00				00				
5	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 residence in Virginia.						d of				00				00	
6					Claim in th	in the same column						00				00
7	7 Income attributable to your period of residence Income, Part 1, Line 9, Column 3											00	0			00
8 Subtractions from Schedule 760PY ADJ, Line 7							. 8				00				00	
9 Add Lines 4a, 4b, 5, 6, 7, and 8							. 9				00				00	
10 Virginia Adjusted Gross Income (VAGI). Subtract Line 9 from					n Li	ne 3	. 10				00				00	
11 Itemized Deductions from Virginia Schedule A paid while a Virginia residen See Instructions					. ''				00				00			
12 If you do not claim itemized deductions on Line 11, enter standard deduction from Standard Deductions Worksheet in instructions					tion 12				00				00			

Va. Dept. of Taxation 2601039 Rev. 11/24

For Local Use

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Your Name	Your SSN



		E	Filing Status 4		Α '	Filing Stat				
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	Your Virginia income tax withheld. Enclose copies of Forms W-2, W-2G, 1	. 19a			00					
19b	Spouse's Virginia income tax withheld. Enclose copies of Forms W-2, W-2	. 19b			00					
20	Combined 2024 Estimated Tax Payments			. 20			00			
21	2023 overpayment credited to 2024 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 fro	. 23			00					
24	Total credit for taxes paid to another state from Schedule OSC	. 24			00					
25	Credits from Schedule CR, Section 5, Line 1A.	25			00					
26	Total payments and credits. Add Lines 19a through 25.	. 26			00					
27	If Line 18 is larger than Line 26, enter the difference. This is the INCOME	. 27			00					
28	If Line 26 is larger than Line 18, enter the difference. This is the OVERPA	. 28			00					
29	Amount of overpayment on Line 28 to be CREDITED TO 2025 ESTIMATED	. 29			00					
30	Commonwealth Savers (formerly Virginia529 and ABLE) Contributions fro	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 in	32			00					
33	Sales and Use Tax is due on Internet, mail order, and out-of-state purchase See instructions	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	35			00					
36	If Line 28 is larger than Line 34, subtract Line 34 from Line 28	Y	OUR REFUND	36	 		00			
VIDEO	If the Direct Deposit section below is not completed, your refund will be issued by						00			
	T BANK DEPOSIT Your Bank Routing Transit Number tic Accounts Only.	Your Bank Accou	unt Number Che	cking	S	Savings				
lo Inte	rnational Deposits.									
I (We)	I (We) authorize the Department of Taxation to discuss this return with my (our) preparer. I agree to obtain my Form 1099-G at www.tax.virginia.gov. I (We), the undersigned, declare under penalty of 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 S	gnature	Date								
Spelle					Dete					
Spouse's Signature (If a joint return, both must sign) Spouse's Phone Number					Date					
Prepar	er's Name	ımber	Date							
Firm's Name (or Yours if Self-Employed) Preparer's PTIN Vendor Co			Vendor Code	Filing Elec	tion Code	ID Theft PII	N			