Virginia Nonresident Income Tax Return



	Che	ck Applicable Boxes:	Due May 1, 2009)						
Amended Return - Check If Result Of NOL								chments.		
	Μ	ixed Date Conformity lodifications werseas On Due Date	Your First Name		Last Name			Your Social Se		
					MI Last Name Suffi			ix Spouse's Social Security Number		
	D				: al Route)			State of Reside	ence	
	E	Coalfield Employment Enhancement Tax Credit Earned in 2008					State	e ZIP Code		
	□ P In	ass-Through Withholding icluded With This Return	Important - Name of Virginia City or County income source is located	in whic	ch principal place	of business, emplo		Locality Code	from Instructions	
		(Attach Sch. VK-1) Interference of the output of the out					Total	-		Fotal
		You Dependents Section 1 65				orover Blind		ction 2		
	1		al head of household? YES 🗍)	1	+ =	X \$930= \$		- + - =	X\$800 = \$	
	2		bint Return (BOTH must have Virginia	2	+ 🔜 =	X \$930= \$		+ 🗆 =	X\$800 = \$	
	3	Married, Spouse (Enter spouse's SSN	Has No Income From Any Source	2	+ =	X \$930= \$		+ 🗆 =	X\$800 = \$	
	4	Married, Filing Se above)	eparate Returns (Enter spouse's SSN	1	+ 🔤 =	X \$930= \$		+ 🗆 =	X\$800 = \$	
		,						n 1 plus the Total of Section 2.		
ere.	_							um on Line 12		
and VK-1 here			her's Return (See the instructions for Line						Enter whole doll	
, Y		6 ADJUSTED GROSS INCOME from your federal return (not federal taxable income)								00
/ pr		 7 Additions from Line 32, Part I, on Page 2 8 Subtotal (Add Line 6 and Line 7) 								00
k ar	8									00
9-Е	9	Subtractions from Line 40, Part II, on Page 2								00
109	10									00
2G,	11									00
×	12	Enter the Exemption Amount computed above. Enter the sum of the dollar amounts from Sections 1 and 2 Deductions (Schedule NPY, Part II Line 2).								00
V-2,	13 14	Subtotal (Add Lines 11, 12 and 13)								00
Forms W-2, W-2G, 1099-R	15		axable income computed as a resident (Subtract Line 14 from Line 10)							00
orm		Percentage from Line 59, Part V, on Page 2 [Enter to one decimal place only. (For ex.: 5.4%)]								%
										00
Staple	18	Income Tax: From Tax Table or Tax Rate Schedule								00
S	19		me tax withheld (Attach Forms W-2, W-2							00
			income tax withheld (Attach Forms W-2							00
			x payments (Include credit from 2007)					. ,		00
			nt - Form 760IP							00
		(e) Tax Credit for Low	Income Individuals or VA Earned Incom	ne Cre	dit from Sched	ule NPY		(e)		00
_		(f) Credit for tax paid	to another state from Schedule NPY, Pa	art IV, I	_ine 8			(f)		00
		(g) Credits from attach	ned Schedule CR. If claiming Political Co	ntributi	on Credit only,	also check box				00
order here.	20	TOTAL PAYMENTS A	ND CREDITS [Add Lines 19(a) through	(g)]				20		00
der	21	If Line 18 is larger that	Line 18 is larger than Line 20, enter the difference. This is the INCOME TAX YOU OWE. Skip to Line 23. Line 20 is larger than Line 18, enter the difference. This is the OVERPAYMENT AMOUNT							00
or money	22	If Line 20 is larger that								00
	23		ty and interest from Schedule NPY, Part							00
	24		ent on Line 22 to be CREDITED TO 200							00
	25		chedule NPY, Part VI, Line 7							00
check	26		and Line 25					26		00
Staple ch	27	larger than Line 22, e	e 21, add Lines 21 and 26 - OR - If Line nter the difference. This is the AMOUN dit card payment has been made					27		00
Ste	28		n Line 26, subtract Line 26 from Line 22.	This is	the amount to	be REFUNDED	то уои			00

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FO	RM 76	63 (2008) Page 2								
Nam	е		SSN]				
PAR	TI-AD	DITIONS TO FEDERAL ADJUSTED GR								
		t on obligations of other states, exempt from		tax, but n	ot state tax			29 ●		00
	Other additions to federal adjusted gross income as provided in instructions (Attach explanation)									00
31										00
32	32 TOTAL ADDITIONS (Add Lines 29, 30 and 31). Enter here and on Line 7 on Page 1									00
		JBTRACTIONS FROM FEDERAL ADJU			-					<u>_</u>
33 Age Deduction: Enter the Adjusted Federal Adjusted Gross Income from Age Deduction Work Sheet, Line 8, if applicable										
	For Filing Status 4, enter spouse's birth date Col. A - Spouse						Col. B - You	7		
		er birth date (For Filing Status 2 and 3 bo uired even if only one qualifies for an age			h - Day - Year 		Month - Day - Year 			
	(b) Enter Age Deduction (See instructions)(b) 00 • 00									
	. ,	amounts on line 33(b) above and enter t								00
		ncome tax refund or overpayment credit re		,						00
35		on obligations or securities of the U.S. e	•							00
36		Security and equivalent Tier 1 Railroad Re					•	36 🗨		00
37	Disability income reported as wages (or payments in lieu of wages) on account of permanent and total disability							37 ●		00
		nnot claim an Age Deduction on Line 3		•						
	•	Fixed Date Conformity subtractions (See	,					38 🗨		00
39	Other S	Subtractions - refer to the instruction book								
			Enter 2 digit code in					39a 🔴		00
			Enter 2 digit code i					39b 🔴		00
			Enter 2 digit code in					39c 🔴		00
		SUBTRACTIONS (Add Lines 33 thru 390	,		•			40 🗨		00
		TANDARD DEDUCTION (Must be used u								
-	-	Status: 1 = \$3,000; 2 = \$6,000; 3 or 4 =			-			41	•	00
		EMIZED DEDUCTIONS (If you itemized				-		40		00
		deral itemized deductions								00
		nd local income taxes claimed on Schedu		-						00
-		VIRGINIA ITEMIZED DEDUCTIONS (Su DNRESIDENT ALLOCATION PERCENT				na on	=	44 🛡		00
PAR		osses or negative numbers in brackets.	AGE SCHEDULE	(See instr	uctions)		COLUMN A All Sources		COLUN Virginia S	
45		, salaries, tips, etc						00		00
	0	t income						00	_	00
47		nds					47	00	0	00
48		y received					48	00	-	00
49		ss income or loss						00	-	00
50		l gain or loss/capital gain distributions						00		00
51		gains or losses						00	_	00
52		e pensions, annuities and IRA distribution						00	_	
53								00	_	00
54		Rents, royalties, partnerships, estates, trusts, S corporations, etc							5 D	00
55		Farm income or loss							5 D	00
56		Other income 55 Interest on obligations of other states from Line 29 56								00
57		-						00		00
58	•	Lump-sum distributions/accumulation distributions included on Line 30								00
		ident allocation percentage - Divide Line						00		
- 59	percen	tage to one decimal place, showing no m	ore than 100% but	not less t	han 0%. Èxan	nple: {	5.4%.)	●59)	%
		ze the Department of Taxation to discuss this re dersigned, declare under penalty provided by law				best c	of my (our) knowledge, it is	a true,	correct and corr	plete return
		Your Signature	Date	Check if	Your Business Ph	none N	umber Your I	lome Ph	one Number	
Plea	ise Sign	X deceased •								
	Here	Spouse's Signature (If a joint rature, both must sign) Data Spouse's Ruisiness Phone Number FLC							aimed on federal	return
		X	Check if Spouse's Business Phone Number							
Der	naroria	Preparer's Signature Date Preparer's Phone Number Preparer's A						rer's FEII	N/PTIN/SSN	
	eparer's se Only	Firm's Name (or Yours if self-employed) and Address			L		I		Code	