763Page1

2018 Virginia Nonresident Income Tax Return * VA0763118888* Due May 1, 2019

Enclose a comp	olete copy of your feder	al ta	x return and all	l other required	l Virginia e	enclosure	s.				
First Name		MI	Last Name		Suffix	Your Socia	al Security N	lumber			Check if deceased
Spouse's First Name (Filin	g Status 2 Only)	МІ	Last Name		Suffix	Spouse's	Social Secu	rity Numb	ber		Check if deceased
Present Home Address (N	umber and Street or Rural Ro	oute)			1	Birth Date n-dd-yyyy)		-	-]
City, Town or Post Office			State	ZIP Code		Birth Date		-	-]
State of Residence	Important - is located.	Name	l e of Virginia City o	<u>l</u> r County in which բ			ess, employr	nent or in	ncome source	Local	ity Code
	10 10001001							City o	R County		
Check Applicable Boxes	Amended Return Check if Result of	NOL	- 🗆	Name(s) or A than Shown Return				Oversea	s on Due Date	•	
DOXES	Dependent on An	other	r's Return [Qualifying Fa		erman or	EIC \$	Claimed	d on federal re	turn .00	
Filing Status Ente	er Filing Status Code in b	ox be	elow.			Spous	se if		2. Enter the su	m or	Line 13.
	e. Federal head of hou				You	Filing St	tatus Denen	dents		Tota	I Section 1
3 = Marri	ed, Filing Joint Return - bed, Spouse Has No Incor	ne F			1	+	+	= [X \$930	=	
	ed, Filing Separate Retur		1.0.:10	70 AL 1	You 6 or ov	S5 Spouse 6 er or over		pouse Blind		Tot	al Section 2
	4, enter spouse's SSN in th nd, enter Spouse's Name_	ie Sp	ouse's Social Sec	curity Number		+	+	= [X \$800	=	
1 Adjusted Gross In	come from federal return	- No	nt federal taxable	e income				. 1			00
2 Additions from Sc	hedule 763 ADJ, Line 3							. 2	2		00
3 Add Lines 1 and	2							. 3	3		00
	ee instructions and the Agabove. Enter Your Age D			heet)			Yo	u 4a	1		00
on Line 4a and Yo	our Spouse's Age Deducti	on o	n Line 4b				Spous	e 4b			00
5 Social Security Ac	t and equivalent Tier 1 R	ailroa	ad Retirement A	ct benefits repor	rted on you	ır federal r	eturn	. 5	5		00
6 State income tax	refund or overpayment cr	edit r	reported as inco	me on your fede	eral return.			. 6	3		00
7 Subtractions from	Schedule 763 ADJ, Line	7						. 7	7		00
8 Add Lines 4a, 4b	, 5, 6 and 7							. 8	3		00
	d Gross Income (VAGI).										00
	ons. See instructions										00
	come taxes claimed from	_		_							00
	d deductions subtract Lin										00
	it. Enter the total amount Schedule 763 ADJ, Line 9										00
	, and 14										00
	ncome computed as a res										00
-	Nonresident Allocation Se										%
	ble Income. (Multiply Line										00
	Tax Table or Tax Rate Sch										00
Va. Dept. of Tayation	For Local Use							_			

Va. Dept. of Taxation 2601044 Rev. 10/18

or Local Use

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2018 FORM 763 Page 2

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	ame				'	our S		V																				
20a	Your Virginia income tax	x withh	neld. E	nclo	se Forr	ns V	V-2	., W-20	G, 109	99 ar	nd V	K-1.			∟ 						20)a					0	0
20b Spouse's Virginia income tax withheld. Enclose Forms W-2, W-2G, 10																			20)b -	00				0			
21 2018 Estimated Tax Payments																				2	21					0	0	
22 2017 overpayment credited to 2018 estimated tax																	2	22					0	0				
23 Extension Payment - submitted using Form 760IP																			2	23					0	0		
24 Credit for Low-Income Individuals or Virginia Earned Income Credit for																					2	24					0	0
25 Total credits from Schedule OSC.																					2	25					0	0
26	Reserved for future use)																			2	26						
27	Credits from Schedule (CR, Se	ection 5	5, Liı	ne 1A																2	27					0	0
28																					2	28					0	0
29																									0			
30	If Line 28 is larger than																					30						0
31	Amount of overpayment																					31					- -	0
32	Virginia529 and ABLEnd																					32					- -	0
33	Other Voluntary Contrib																					33						0
34	Addition to Tax, Penalty																					34					- -	0
35	Sales and Use Tax is du																		1	·····		· -						0
00	See instructions																					35						\dashv
36	Add Lines 31 through 3																				3	36					0	0
37	If you owe tax on Line 2 is larger than Line 30, e virginia.govChe	enter th	ne diffe	renc	e. AM	DUN	TI	YOU C	WE.	Encl	ose	payı	ment	or p	oay	at	ww	w.ta	ıx.) 	3	37					0	0
38	If Line 30 is larger than L			_	-														L		3	38					0	0
If the D	Direct Deposit section below																											
	T BANK DEPOSIT	Your	Bank F	Rout	ing Tra	nsit	Nu	mber			Υ	our l	Bank	Acc	ou	nt l	Num	ber		Che	cking			Sa	ving	S		
Domes	stic Accounts Only	1					_								_	_					_						- 1	
No Inte	ernational Deposits																											
No Inte	ernational Deposits resident Allocation P															A	- All	So	urce	s			B - \	Virgi	nia S	Sourc		<u> </u>
No Inte	ernational Deposits resident Allocation P Wages, salaries, tips, etc	c											1			A	- All	So	urce	s	00		B - \	Virgi	nia S	Sourc	00	-
No Inte	resident Allocation P Wages, salaries, tips, etc Interest income	c											2			A	- All	So	urce	s	00		B - \	Virgi	nia S	Sourc	00)
No Inte	resident Allocation P Wages, salaries, tips, etc Interest income	c											2			A	- All	So	urce	S	00		B - \	Virgi	nia S	Sourc	00)
No Inte	resident Allocation P Wages, salaries, tips, etc Interest income Dividends	C											2 3 4			A	- All	So	urce	s	00 00 00		B - \	Virgi	nia S	Sourc	00)
No Intellement Noni 1. 2. 3. 4. 5.	resident Allocation P Wages, salaries, tips, etc Interest income Dividends Alimony received Business income or loss	C											2 3 4 5			A	- All	So	urce	S	00 00 00 00		B - \	Virgi	nia S	Sourc	00)
No Intellement Noni 1. 2. 3. 4. 5. 6.	resident Allocation P Wages, salaries, tips, etc Interest income Dividends Alimony received Business income or loss Capital gain or loss/capit	c	n distril	butic	ons								2 3 4 5 6			A	- All	So	urce	S	00 00 00 00 00		B - \	Virgi	nia S	Sourc	000)
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