

2015 Virginia Nonresident Income Tax Return

Due May 2, 2016



Enclose a complete copy of your federal tax return and all other required Virginia enclosures.

First Name	MI	Last Name	Suffix	Your Social Security Number	<input type="checkbox"/> Check if deceased
Spouse's First Name (Filing Status 2 Only)	MI	Last Name	Suffix	Spouse's Social Security Number	<input type="checkbox"/> Check if deceased
Present Home Address (Number and Street or Rural Route)				Your Birth Date (mm-dd-yyyy)	- -
City, Town or Post Office		State	ZIP Code	Spouse's Birth Date (mm-dd-yyyy)	- -
State of Residence	Important - Name of Virginia City or County in which principal place of business, employment or income source is located.				Locality Code
					<input type="checkbox"/> City OR <input type="checkbox"/> County

Check Applicable Boxes

- ☐ Amended Return Check if Result of NOL ☐ ☐ Name(s) or Address Different than Shown on 2014 VA Return ☐ Overseas on Due Date
- ☐ Dependent on Another's Return ☐ Qualifying Farmer, Fisherman or Merchant Seaman EIC Claimed on federal return \$.00

Filing Status Enter Filing Status Code in box below.

Code

☐

- 1 = Single. Federal head of household? YES ☐
- 2 = Married, Filing Joint Return - both must have Virginia income
- 3 = Married, Spouse Has No Income From Any Source
- 4 = Married, Filing Separate Returns

If Filing Status 3 or 4, enter spouse's SSN in the Spouse's Social Security Number box at top of form and, enter Spouse's Name _____

Exemptions Add Sections 1 and 2. Enter the sum on Line 13.

You	Spouse if Filing Status 2 or 3	Dependents	Total Section 1	
1	+	+	=	X \$930 =
You 65 or over	Spouse 65 or over	You Blind	Spouse Blind	Total Section 2
+	+	+	+	= X \$800 =

1	Adjusted Gross Income from federal return - <i>Not federal taxable income</i>	1		00
2	Additions from Schedule 763 ADJ, Line 3.	2		00
3	Add Lines 1 and 2.	3		00
4	Age Deduction (See instructions and the Age Deduction Worksheet). You	4a		00
	Enter Birth Dates above. Enter Your Age Deduction on Line 4a and Your Spouse's Age Deduction on Line 4b..... Spouse	4b		00
5	Social Security Act and equivalent Tier 1 Railroad Retirement Act benefits reported on your federal return.	5		00
6	State income tax refund or overpayment credit reported as income on your federal return.	6		00
7	Subtractions from Schedule 763 ADJ, Line 7.	7		00
8	Add Lines 4a, 4b, 5, 6 and 7.	8		00
9	Virginia Adjusted Gross Income (VAGI). Subtract Line 8 from Line 3.	9		00
10	Itemized Deductions. See instructions.	10		00
11	State and local income taxes claimed from federal Schedule A, if claiming itemized deductions.	11		00
12	If claiming itemized deductions subtract Line 11 from Line 10 or enter standard deduction amount.	12		00
13	Exemption amount. Enter the total amount from the Exemption Sections 1 and 2 above.	13		00
14	Deductions from Schedule 763 ADJ, Line 9.	14		00
15	Add Lines 12, 13, and 14.	15		00
16	Virginia Taxable Income computed as a resident. Subtract Line 15 from Line 9.	16		00
17	Percentage from Nonresident Allocation Section on Page 2 (Enter to one decimal place only).....	17		%
18	Nonresident Taxable Income. (Multiply Line 16 by percentage on Line 17).	18		00
19	Income Tax from Tax Table or Tax Rate Schedule.....	19		00

LTD

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\$ _____

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Your Name	Your SSN
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20a Your Virginia income tax withheld. Enclose Forms W-2, W-2G, 1099 and VK-1. 20b Spouse's Virginia income tax withheld. Enclose Forms W-2, W-2G, 1099 and VK-1. 21 2015 Estimated Tax Payments..... 22 2014 overpayment credited to 2015 estimated tax..... 23 Extension Payment - submitted using Form 7601P..... 24 Credit for Low-Income Individuals or Virginia Earned Income Credit from Schedule 763 ADJ, Line 17. 25 Total credits from Schedule OSC. 26 Credit for Political Contributions 27 Credits from Schedule CR, Section 5, Line 1A..... 28 Total payments and credits. Add Lines 20a through 27. 29 If Line 19 is larger than Line 28, enter the difference. This is the INCOME TAX YOU OWE. 30 If Line 28 is larger than Line 19, enter the difference. This is the OVERPAYMENT AMOUNT. 31 Amount of overpayment on Line 30 to be CREDITED TO 2016 ESTIMATED INCOME TAX..... 32 Virginia College Savings Plan Contributions from Schedule VAC, Part I, Line 6 33 Other Voluntary Contributions from Schedule VAC, Section II, Line 14 34 Addition to Tax, Penalty and Interest from enclosed Schedule 763 ADJ, Line 21. 35 Consumer's Use Tax. You may be liable if sales tax was not paid on Internet or other purchases. See instructions. 36 Add Lines 31 through 35. 37 If you owe tax on Line 29, add Lines 29 and 36 - OR - If you have an overpayment on Line 30 and Line 36 is larger than Line 30, enter the difference. AMOUNT YOU OWE. Enclose payment or pay at www.tax.virginia.gov.Check here if paying by credit or debit card - See instructions. <input type="checkbox"/> 38 If Line 30 is larger than Line 36, subtract Line 36 from Line 30. This is the amount to be REFUNDED TO YOU. If the Direct Deposit section below is not completed, your refund will be issued by check.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 10px;">20a</td><td style="width: 80%;"></td><td style="width: 10px;">00</td></tr> <tr><td>20b</td><td></td><td>00</td></tr> <tr><td>21</td><td></td><td>00</td></tr> <tr><td>22</td><td></td><td>00</td></tr> <tr><td>23</td><td></td><td>00</td></tr> <tr><td>24</td><td></td><td>00</td></tr> <tr><td>25</td><td></td><td>00</td></tr> <tr><td>26</td><td></td><td>00</td></tr> <tr><td>27</td><td></td><td>00</td></tr> <tr><td>28</td><td></td><td>00</td></tr> <tr><td>29</td><td></td><td>00</td></tr> <tr><td>30</td><td></td><td>00</td></tr> <tr><td>31</td><td></td><td>00</td></tr> <tr><td>32</td><td></td><td>00</td></tr> <tr><td>33</td><td></td><td>00</td></tr> <tr><td>34</td><td></td><td>00</td></tr> <tr><td>35</td><td></td><td>00</td></tr> <tr><td>36</td><td></td><td>00</td></tr> <tr><td>37</td><td></td><td>00</td></tr> <tr><td>38</td><td></td><td>00</td></tr> </table>	20a		00	20b		00	21		00	22		00	23		00	24		00	25		00	26		00	27		00	28		00	29		00	30		00	31		00	32		00	33		00	34		00	35		00	36		00	37		00	38		00
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DIRECT BANK DEPOSIT	Your Bank Routing Transit Number	Your Bank Account Number	Checking <input type="checkbox"/>	Savings <input type="checkbox"/>
Domestic Accounts Only	<table border="1" style="width: 100%; height: 20px;"></table>	<table border="1" style="width: 100%; height: 20px;"></table>		
No International Deposits				

Nonresident Allocation Percentage

A - All Sources

B - Virginia Sources

1. Wages, salaries, tips, etc..... 2. Interest income..... 3. Dividends..... 4. Alimony received. 5. Business income or loss..... 6. Capital gain or loss/capital gain distributions..... 7. Other gains or losses..... 8. Taxable pensions, annuities and IRA distributions. 9. Rents, royalties, partnerships, estates, trusts, S corporations, etc..... 10. Farm income or loss..... 11. Other income..... 12. Interest on obligations of other states from Schedule 763 ADJ, Line 1..... 13. Lump-sum and accumulation distributions included on Sch. 763 ADJ, Line 3. . 14. TOTAL - Add Lines 1 through 13 and enter each column total here..... 15. Nonresident allocation percentage - Divide Line 14 B, by Line 14 A. <i>Compute percentage to one decimal place (e.g., 5.4%). Enter on Page 1, Line 17.....</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 10px;">1</td><td style="width: 10px;">00</td><td style="width: 10px;">00</td></tr> <tr><td>2</td><td>00</td><td>00</td></tr> <tr><td>3</td><td>00</td><td>00</td></tr> <tr><td>4</td><td>00</td><td>00</td></tr> <tr><td>5</td><td>00</td><td>00</td></tr> <tr><td>6</td><td>00</td><td>00</td></tr> <tr><td>7</td><td>00</td><td>00</td></tr> <tr><td>8</td><td>00</td><td></td></tr> <tr><td>9</td><td>00</td><td>00</td></tr> <tr><td>10</td><td>00</td><td>00</td></tr> <tr><td>11</td><td>00</td><td>00</td></tr> <tr><td>12</td><td>00</td><td></td></tr> <tr><td>13</td><td>00</td><td>00</td></tr> <tr><td>14</td><td>00</td><td>00</td></tr> <tr><td>15</td><td></td><td style="text-align: center;">%</td></tr> </table>	1	00	00	2	00	00	3	00	00	4	00	00	5	00	00	6	00	00	7	00	00	8	00		9	00	00	10	00	00	11	00	00	12	00		13	00	00	14	00	00	15		%
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☐ I (We) authorize the Dept. 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 provided by 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 Signature	Your Phone Number	Date	
Spouse's Signature (If a joint return, both must sign)	Spouse's Phone Number	Preparer's PTIN	Vendor Code
Preparer's Name	Firm's Name (or Yours if Self-Employed)	Preparer's Phone Number	Office Use Only