2019 Schedule VK-1 Consolidated PTE's Name	PTE's FEIN							
Check Box if Owner Amended Return and/or is Participating in an Individual Unified Nonresident Return Name, Address, City, State, Zip Code	FEIN or SSN (No Dashes)	Date Acquired Interest In The PTE (MM/DD/YYYY)	Owner's Entity Type	Owner's Part. Type	Owner's Part. % (Enter Decimal Point)	Amount Withheld by PTE for Owner	Owner Entity WH Exemp. Code	
Amended Return Nonresident Return		Line a.	Line b.	Line c.	Line d.	Line e.	Line f.	
Amended Return Nonresident Return								
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PTE's FEIN	PTE's Name									
FEIN or SSN (No Dashes)	Total Taxable Income Amounts	Total Deductions	Tax-Exempt Interest Income	Income Allocated to Virginia	Income Allocated Outside of Virginia	Apportionable Income	Virginia Apport. % (Enter Decimal Point)	Total Add.	Total Sub.	Total Refund. Credits
	Line 1.	Line 2.	Line 3.	Line 4.	Line 5.	Line 6.	Line 7.	Line 13.	Line 18.	Line 41.