

WEB **2023 Virginia Form 760**
Resident Income Tax Return
File by May 1, 2024 — USE BLACK INK

2601031
 Rev. 06/23



Your first name	M.I.	Last name including suffix
Spouse's first name (joint returns only)	M.I.	Last name including suffix
Number and Street - If this is a change, you must fill in oval		
City, town, or post office	State	ZIP Code

	Social Security Number	First 4 letters of last name
You	<input type="text"/>	<input type="text"/>
Spouse	<input type="text"/>	<input type="text"/>
	Birth Date (mm-dd-yyyy)	Deceased <input type="checkbox"/>
You	<input type="text"/>	<input type="checkbox"/>
Spouse	<input type="text"/>	<input type="checkbox"/>
		Locality Code <input type="text"/>

I/we authorize the sharing of certain information from Form 760 and Schedule HCI (as described in the instructions) with the Department of Medical Assistance Services (DMAS) and the Department of Social Services (DSS) for purposes of identifying persons who would like to newly enroll in medical assistance.

Fill in all ovals that apply:

<input type="checkbox"/> Name or Filing Status changed	<input type="checkbox"/> Overseas on due date
<input type="checkbox"/> Virginia return not filed last year	<input type="checkbox"/> Federal Schedule C filed
<input type="checkbox"/> Dependent on another's return	<input type="checkbox"/> Earned Income Credit on federal return
<input type="checkbox"/> Qualifying farmer, fisherman or merchant seaman	<input type="checkbox"/> Amount claimed: <input type="text"/>
<input type="checkbox"/> Amended Return - Reason Code <input type="text"/>	

	Customer ID	VA Driver's License Information	Issue Date
You	<input type="text"/>	<input type="text"/>	<input type="text"/>
Spouse	<input type="text"/>	<input type="text"/>	<input type="text"/>

Filing Status Enter in box (1 = Single, 2 = Joint, and 3 = Married Filing Separately)

Code Federal head of household? Filing Status 1 only YES

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

Exemptions Add Sections A and B. Enter the sum on Line 12.

You	Spouse if Filing Status 2	Dependents		Total Section A
<input type="text"/>	<input type="text"/>	<input type="text"/>	=	<input type="text"/>
1				X \$930 =
You 65 or over	Spouse 65 or over	You Blind	Spouse Blind	Total Section B
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			=	X \$800 =

--- Do you need to file? See Line 9 and Instructions ---

1. Adjusted Gross Income from federal return - <i>Not federal taxable income</i>	1	LOSS <input type="checkbox"/>	<input type="text"/>	.00
2. Additions from enclosed Schedule ADJ, Line 3.....	2		<input type="text"/>	.00
3. Add Lines 1 and 2.....	3	LOSS <input type="checkbox"/>	<input type="text"/>	.00
4. Age Deduction. See Instructions. Be sure to provide date of birth above.				
You <input type="text"/> .00 + Spouse <input type="text"/> .00 =	4		<input type="text"/>	.00
5. Social Security and equivalent Tier 1 Railroad Retirement benefits if taxable on federal return.....	5		<input type="text"/>	.00
6. State Income Tax refund or overpayment credit (reported as income on federal return).....	6		<input type="text"/>	.00
7. Subtractions from enclosed Schedule ADJ, Line 7.....	7		<input type="text"/>	.00
8. Add Lines 4, 5, 6 and 7.....	8		<input type="text"/>	.00
9. Virginia Adjusted Gross Income (VAGI) - Subtract Line 8 from Line 3. Enter the result on this line. Note: If less than \$11,950 for Filing Status 1 or 3; or \$23,900 for Filing Status 2, your tax is \$0.00....	9	LOSS <input type="checkbox"/>	<input type="text"/>	.00
10. Itemized Deductions from Virginia Schedule A. See instructions.....	10		<input type="text"/>	.00
11. If you do not claim itemized deductions on Line 10, enter standard deduction. See instructions.....	11		<input type="text"/>	.00
12. Exemptions. Sum of total from Exemption Section A plus Exemption Section B.....	12		<input type="text"/>	.00
13. Deductions from Schedule ADJ, Line 9.....	13	LOSS <input type="checkbox"/>	<input type="text"/>	.00
14. Add Lines 10, 11, 12 and 13.....	14	LOSS <input type="checkbox"/>	<input type="text"/>	.00
15. Virginia Taxable Income - Subtract Line 14 from Line 9.....	15	LOSS <input type="checkbox"/>	<input type="text"/>	.00

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