

Form 770 2024 Virginia Fiduciary Income Tax Return



Enter Fiscal Year: From _____ /2024 To _____, AND check here
 (if applicable) (mm/dd) (mm/dd/yyyy)

Name of Estate or Trust	Locality Code (See Instructions)		
Name and Title of Fiduciary	FEIN of the Estate or Trust		
Address of Fiduciary (Number and Street)	Check all that apply: <input type="checkbox"/> Resident or <input type="checkbox"/> Nonresident <input type="checkbox"/> Exempt - Charitable Remainder Trust <input type="checkbox"/> Grantor Trust <input type="checkbox"/> Amended Return - Reason Code <input type="checkbox"/> <input type="checkbox"/> Final Return		
City, Town or Post Office		State	ZIP Code
Calendar Year Returns Due May 1, 2025			

Schedule 1 — Computation of Taxable Income and Tax of Fiduciary

1. Federal taxable income federal return - OR - if a nonresident, the amount on Schedule 2, Line 8. 1	.00	
2. Fiduciary's share of Virginia modifications (Schedule 3 on Page 2) (a) if a net addition. 2(a)	.00	
Check box if additions include add back of state and local income tax paid by a Pass-Through Entity <input type="checkbox"/> [2FA _____ 2FS _____ See Schedule 3 on Page 2] (b) if a net subtraction. 2(b)		
3. Virginia taxable income of fiduciary. Line 1 plus Line 2(a) - OR - Line 1 minus Line 2(b). 3	.00	
4. Compute tax on Virginia taxable income. Use the tax rate schedule in the instructions. 4	.00	
5. PAYMENTS AND CREDITS: See instructions.		
(a) Virginia income tax withheld (attach withholding statements). (a)	.00	
(b) 2024 Virginia estimated tax payments. Include overpayment credit from 2023. . . . (b)	.00	
(c) Extension payments made with Form 770IP. (c)	.00	
(d) Credit for tax paid to another state from Schedule 4, Line 7.		
Enclose other state's return. (d)	.00	
(e) Neighborhood Assistance Act Tax Credit. (e)	.00	
(f) Enterprise Zone Act Tax Credit, See instructions (only carryover credit allowed). . . (f)	.00	
(g) Major Business Facility Job Tax Credit. (g)	.00	
(h) Historic Rehabilitation Tax Credit. (h)	.00	
(i) Reserved for future use. (i)	_____	
(j) Barge and Rail Usage Tax Credit. (j)	.00	
(k) Reserved for future use. (k)	_____	
(l) Reserved for future use. (l)	_____	
(m) Qualified Equity and Subordinated Debt Investments Tax Credit. (m)	.00	
(n) i) 100% Coalfield Employment Enhancement Credit from 2024 Form 306D, Part II, Section 1, Line 1. . . . (n)i	.00	
ii) Reserved for future use. (n)ii	_____	
iii) Full Coalfield Employment Enhancement Credit 2024 Form 306D, Part II, Section 2, Line 3. (n)iii	.00	
(o) i) 85% Coalfield Employment Enhancement Credit 2024 Form 306D, Part II, Section 3, Line 5. (o)i	.00	
ii) Reserved for future use. (o)ii	_____	
iii) Total Coalfield Employment Enhancement Credit - Add Lines (n)iii and (o)i. Enclose 2024 Form 306D. (o)iii	.00	
(p) Reserved for future use. (p)	_____	
(q) Land Preservation Tax Credit. (q)	.00	
(r) Reserved for future use. (r)	_____	
(s) Worker Training Tax Credit. (s)	.00	
(t) Virginia Housing Opportunity Tax Credit. (t)	.00	
(u) Pass Through Entity Elective Tax Payment Credit. (u)	.00	
Total payments and credits. Add Lines 5(a) through 5(m) and Lines (o)iii through (u). 5	.00	
6. BALANCE DUE If Line 4 is larger than Line 5, subtract Line 5 from Line 4. 6	.00	
7. OVERPAYMENT If Line 5 is larger than Line 4, subtract Line 4 from Line 5. 7	.00	
8. Amount of overpayment to be CREDITED to 2025 Estimated Income Tax. 8	.00	
9. AMOUNT TO BE REFUNDED Subtract Line 8 from Line 7. 9	.00	
10. Reserved for future use. 10	_____	
11. Amount from Form 760C or Form 760F. Enclose Form 760C or Form 760F and check box. <input type="checkbox"/> 11	.00	

Va. Dept of Taxation 2601047 Rev. 09/24

<input type="checkbox"/> Check here if farming, fishing, or being a merchant seaman accounts for at least two-thirds of the income.	For Local Use <input type="checkbox"/> LTD	<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:80%; text-align:right;">\$</td> <td style="width:20%; text-align:center;">00</td> </tr> </table>	\$	00
\$	00			



Schedule 2 — Virginia Taxable Income of a Nonresident Estate or Trust

	Net Virginia Source Income	
	A. Distributable	B. Nondistributable
1. Income from sources within Virginia..... 1	.00	.00
2. Federal deductions attributable to income from sources within Virginia..... 2	.00	.00
3. Net Virginia source income. Subtract Line 2 from Line 1..... 3	.00	.00

4. Virginia source income allocation schedule. When completing Column 4, multiply Line 3A above by the percentage in Column 3 below and enter the result in Column 4. Enter the amount from Line 3B above in Line 4b, Column 5.

Column 1	Column 2 Federal Distributable Net Income	Column 3 Percentage	Column 4 Virginia Source Distributable Net Income	Column 5 Virginia Source Nondistributable Net Income
a. Beneficiaries (Total for all beneficiaries)	.00	%	.00	_____
b. Fiduciary	.00	%	.00	.00
c. Total	.00	100%	.00	.00

5. Deduction for distributions to beneficiaries. Enter the amount in Line 4a, Column 4, or Line 4a, Column 2, whichever is less..... 5	.00
6. Fiduciary's share of Virginia source income. Sum of Line 4b, Column 4 <u>or</u> Line 4b, Column 2, whichever is less, plus Line 4b, Column 5..... 6	.00
7. Exemption from federal return..... 7	.00
8. Income taxable to fiduciary. Subtract Line 7 from Line 6. Enter here and on Schedule 1, Line 1..... 8	.00

Schedule 3 — Fiduciary's Modifications

PART I — Additions to Federal Taxable Income

1. Interest on obligations of other states..... 1	.00
2. Income taxes of this state or any other taxing jurisdiction..... 2	.00
3. Conformity Additions. See instructions. Enter here and on Line 2FA of Schedule 1..... 3	.00
4. Other additions to federal taxable income as provided in the instructions. Enclose explanation..... 4	.00
5. TOTAL ADDITIONS. Add Lines 1 through 4..... 5	.00

PART II — Subtractions from Federal Taxable Income

6. Income (interest, dividends or gains) on obligations or securities of the U.S..... 6	.00
7. Any state income tax refund or credit that was reported as "other income" on federal return..... 7	.00
8. Conformity Subtractions. See instructions. Enter here and on Line 2FS of Schedule 1..... 8	.00
9. Other subtractions from federal taxable income as provided in the instructions. Enclose explanation..... 9	.00
10. TOTAL SUBTRACTIONS. Add Lines 6 through 9..... 10	.00
11. Net Virginia modifications. Subtract Line 10 from Line 5..... 11	.00
<i>If Line 11 is a net addition, enter on Line 2(a) of Schedule 1.</i>	
<i>If Line 11 is a net subtraction, enter on Line 2(b) of Schedule 1.</i>	
12. Reserved for future use..... 12	_____

Schedule 4 — Computation of the Credit for Tax Paid to Another State (See Instructions)

1. Taxable income reported on the other state's fiduciary income tax return. Enclose a copy of the other return..... 1	.00
2. Virginia taxable income. Enter the taxable income from Schedule 1, Line 3..... 2	.00
3. Total income tax paid to another state. Enter the name of the other state: _____ 3	.00
4. Virginia income tax. Enter the tax from Schedule 1, Line 4..... 4	.00
5. Allowable percentage for credit. Compute to one decimal place (e.g., 10.5%). Maximum: 100% <i>Resident estate or trust:</i> Divide Line 1 by Line 2. <i>Nonresident estate or trust:</i> Divide Line 2 by Line 1..... 5	%
6. <i>Resident estate or trust:</i> Multiply Line 5 by Line 4. <i>Nonresident estate or trust:</i> Multiply Line 5 by Line 3..... 6	.00
7. Allowable credit. <i>Resident estate or trust:</i> Enter the smaller amount from Line 3 or Line 6. <i>Nonresident estate or trust:</i> Enter the smaller amount from Line 4 or Line 6. Also enter this amount on Schedule 1, Line 5(d)..... 7	.00

I declare under the penalties provided by law that this return, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is true, correct, and complete. I (we) authorize the Department of Taxation to discuss this return with my (our) preparer. If yes, check here.

Please Sign Here	Signature of Fiduciary or Officer Representing Fiduciary	Date	Daytime Phone Number
	X		
Preparer's Use Only	Signature of Preparer Other Than Fiduciary	Date	Daytime Phone Number
	X		
	Firm's Name (or Yours if Self-Employed) and Address	Vendor Code	Firm's SSN, FEIN or PTIN

Schedule 5 - BENEFICIARY'S INFORMATION

(Federal Schedule K-1 Equivalent)



Beneficiary Information

Estate or Trust Information

Beneficiary Name	Estate or Trust Name
SSN/FEIN	FEIN
Street Address	Street Address
City or Town, State, and ZIP Code	City or Town, State, and ZIP Code
Enter Fiscal Year (if applicable): From _____, 2024 To _____ AND check here <input type="checkbox"/> (mm/dd) (mm/dd/yyyy)	
Check Applicable Boxes <input type="checkbox"/> Nonresident <input type="checkbox"/> Final Return <input type="checkbox"/> Amended Return - Reason Code <input type="checkbox"/>	

	(a) Distributable share item	(b) Amount
1. Federal Distributable Net Income		
a. Federal Taxable Income	1a	.00
b. Beneficiary's Federal Distribution Percentage (enter the result to 6 decimal places)	1b	%
c. Estate or Trust Federal Distribution Percentage (enter the result to 6 decimal places)	1c	%
2. Additions		
a. Interest on obligations of other states	2a	.00
b. Income taxes of this state or any other taxing jurisdiction	2b	.00
c. Conformity additions	2c	.00
d. Other additions	2d	.00
e. Total Additions. Add Lines 2a through 2d.	2e	.00
3. Subtractions		
a. Income (interest, dividend, or gains) on obligations or securities of the U.S.	3a	.00
b. State income tax refund or credit that was reported as "other income"	3b	.00
c. Conformity subtractions	3c	.00
d. Other subtractions	3d	.00
e. Total Subtractions. Add Lines 3a through 3d.	3e	.00
4. Net Virginia Modifications Subtract Line 3e from Line 2e.	4	.00
5. Credit Allocation Information		
a. Beneficiary's distributive share of credits	5a	%
b. Neighborhood Assistance Act Tax Credit	5b	.00
c. Enterprise Zone Act Tax Credit. See instructions (only carryover credit allowed).	5c	.00
d. Major Business Facility Job Tax Credit	5d	.00
e. Historic Rehabilitation Tax Credit	5e	.00
f. Barge and Rail Usage Tax Credit	5f	.00
g. Qualified Equity and Subordinated Debt Investments Tax Credit	5g	.00
h. 100% Coalfield Employment Enhancement Tax Credit: Form 306D, Part II, Section 1, Line 1	5h	.00
i. Coalfield Employment Enhancement - Full Tax Credit: Form 306D, Part II, Section 2, Line 3	5i	.00
j. Coalfield Employment Enhancement - 85% Tax Credit: Form 306D, Part II, Section 3, Line 5	5j	.00
k. Total Coalfield Employment Enhancement Credit - Add Lines 5i and 5j	5k	.00
l. Land Preservation Tax Credit	5l	.00
m. Worker Training Tax Credit	5m	.00
n. Virginia Housing Opportunity Tax Credit	5n	.00
o. Total Credits. Add Lines 5b through 5g and Lines 5k through 5n	5o	.00
6. Nonresident Beneficiary Information		
a. Virginia source income	6a	.00
b. Virginia modifications as if a Virginia resident	6b	.00

NOTICE: You have received this Schedule because the above-named Estate or Trust earned income from Virginia sources and has allocated to you a portion of that Virginia source income based on your ownership of the Estate or Trust. A copy of this schedule has been filed with the Department. Everyone who receives Virginia source income is subject to taxation by Virginia regardless of state of residency or domicile. You may be required to file a Virginia tax return even though you may be a nonresident individual or a business domiciled outside of Virginia. To determine if you are required to file a Virginia income tax return, consult a tax professional. Information and forms may be obtained at www.tax.virginia.gov, or by calling the Department at (804) 367-8031.