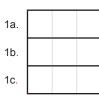
# Schedule NPY

### Schedule of Adjustments For Nonresident or Part-Year Resident Attach this Schedule to your Form 760PY or Form 763

Name(s) As Shown On Virginia Return Your Social Security Number B Spouse's Social Security Number Α Part I - Form 760PY ONLY - Age Deduction - Read instructions before completing Enter the Adjusted Federal Adjusted Gross Income 00 В Α Spouse You from Age Deduction Worksheet, Line 8, if applicable...... Month-Day-Year Month-Day-Year Month-Day-Year For Filing Status 3, enter spouse's birth date..... 1. Enter birth date (For Filing Status 2 and 4: Both birth dates are required even if only one qualifies for an age deduction) 1 00 00 2. Enter Age Deduction (See instructions) 2 3. Enter the amount from the Ratio Schedule for the date you moved into or out of Virginia. 3 4. Qualifying Age Deduction - Multiply Line 2 by Line 3 and enter here. 00 00 4 Filing Status 1 or 3 - Transfer amount from Line 4, Col. B to Form 760PY, Line 38, Col. B You may NOT claim both this deduction and the Filing Status 2 - Transfer the total of Line 4, Col. A & B to Form 760PY, Line 38, Col. B disability income subtraction on Form 760PY, Part III, Filing Status 4 - Transfer the amounts from Line 4 to Form 760PY, Line 38, Col. A & B Line 43. Claim the one that benefits you the most.

#### Part II - Deductions from Virginia Adjusted Gross Income

1. Refer to the Form 760PY or 763 instruction book for Deduction Codes .....



2.

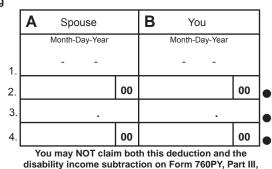
A SPOUSE **Β** YOU This column for 760 PY Filing Status 4 filers only 00 00 00 00 00 00

2. Total Deductions - Add Lines 1a - 1c. For Form 760PY filing status 4 filers, enter the total for Column A and Column B in the applicable column on Form 760PY Line 13. All other filers, enter the total from Column B on Line 13, Column B, of Form 760PY or Line 13 of Form 763

#### Part III - Tax Credit For Low Income Individuals or Virginia Earned Income Credit

- List below the name, Social Security Number (SSN) and Guideline Income for you, your spouse and each dependent.
- . If more room is needed, attach a schedule with the name, SSN and Guideline Income for each additional dependent.
- · Complete all of Part III. Failure to complete this Part may result in this credit being reduced or disallowed.

Family VAGI		Name	Social Security Number (SSN)			Guideline Inco		]
1.	Yourself						00	1
2.	Spouse						00	]
a.	Dependent						00	]
b.	Dependent						00	]
3.	Total Family Guid	otal Family Guideline (Be sure to include information from attached schedule, if applicable) 3.						]•
4.	Enter the total number of exemptions listed above and on any attached schedule. Based on this total, the total family Guideline Income from Line 3 and the poverty guidelines in the instructions, determine your eligibility. If you do not qualify for the Tax Credit for Low Income Individuals but claimed an Earned Income Credit on your federal return, enter 0 and proceed to Line 74.							•
5. 6. 7.	If eligible, enter the number of personal exemptions from Form 760PY or Form 763							-
	Income credit on your federal return, enter \$0							-
8.	Multiply Line 7 by 20% (.20)							-
9. 10.	<ul> <li>Enter the greater of Line 6 or Line 8</li></ul>							-





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## **Schedule NPY**

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Name(s) As Shown On Virginia Return			Social Security Number							
Part	IV - Credit For Tax Paid To Another State									
Attach copy of that state's return.		SPOUSE This column for 760 Filing Status 4 filers of					в	YO	U	
1.	Enter qualifying taxable income base for other state's taxes. (See Instructions.)					00			0	00
2. '	/irginia Taxable Income - Enter amount from Form 760PY, Line 15 or Form 763, Line 17. 2.					00			0	00
3.	Enter qualifying tax paid to other state. (See instructions.) Other state: 3.					00			0	00
4. '	/irginia Income Tax - Enter the amount from Form 760PY, Line 16 or from Form 763, Line 18. 4.					00			0	00
	ncome Percentage - If filing Form 760PY, divide Line 1 by Line 2. If filing Form 763, livide Line 2 by Line 1. Compute to 1 decimal place not to exceed 100% (For ex, 31.6%) 5.					%				%
6.	Form 760PY filers, multiply Line 4 by Line 5. Form 763 filers, multiply Line 3 by Line 5. 6.					00			0	00
<ol> <li>Credit - Form 760PY filers, enter the lesser of Lines 3 or 6. Form 763 filers, enter the lesser of Lines 4 or 6</li> <li>7.</li> </ol>						00			o	00
I	<b>Fotal</b> - Add Line 7, Col. A and Col. B. Also enter on Form 760PY, Line 18(f), or Form 763, Line <b>Note:</b> The sum of Line 10, Part III and Line 8, Part IV, cannot exceed your tax liability. Adjust Line ecessary to ensure sum does not exceed tax liability.			IV, if		8.			0	00
	V - Addition to Tax, Penalty and Interest See Instructions								_	
1.	Addition to Tax - Enter the amount from Form 760C or 760F, whichever is applicable				1.				0	9
2.	Penalty - See instructions. If owed, check one and enter amount: □ ● Late Filing Penalty or □ ● Extension Penalty				2.				0	
3.	Interest - Compute on amount from Form 760PV Line 20, or Form 763, Line 21, See Instruc	tions			3				0	의`
3. Interest - Compute on amount from Form 760PY, Line 20, or Form 763, Line 21. See Instructions									0	0
4.	Total - Add Lines 1, 2 and 3. Enter here and on Form 760PY, Line 22, or Form 763, Line 23.				4					_
Part	VI - Contributions and Consumer's Use Tax (See instructions)									
1.	<b>Voluntary Contributions From Overpaid Taxes</b> Enter the code for the organization and the contribution amount(s) in boxes 1a and1b. If you are donating to more than 2 qualifying organizations, enter the code "00" in the first box and the total amount of all donations. Attach a separate page indicating the amount you wish to contribute to each organization. See Instructions for contribution codes.			Co	de			Amoun		0
									0	0
0	Total Value and Contributions Additions do not de									
2.	Total Voluntary Contributions - Add Lines 1a and 1b This subtotal may not exceed the amount on Form 760PY, Line 21 minus the total of Lines 22 and 23; or Form 763, Line 22 minus the total of Lines 23 and 24				2				0	00
3.	Other Voluntary Contributions		.							
0.	Enter the code of the organization and the contribution amount(s) in boxes 3a and 3b.	3	3a.						0	00
	If you are donating to more than 2 qualifying organizations, enter the code "00" in the first box and the total amount of all donations. Attach a separate page indicating the amount you wish to contribute to each organization. See Instructions for contribution codes.								0	00
4.	Public School Foundations Enter the code of the foundation and the contribution amount in									<u> </u>
	boxes 4a and 4b 4a.								0	00
	If you are donating to more than 2 school foundations, enter "999999" in the first box and the total amount of donations. Attach a separate page indicating the amount you wish to contribute to each foundation. See Instructions for foundations codes.								0	00
5.	Total Contributions - Add Line 2, Lines 3a and 3b and Lines 4a and 4b				5				0	00
6.	Consumer's Use Tax									00
					0	·				<u> </u>
7.	lotal Contributions and Consumer's Use lay - Add Lines 5 and 6									