2010 Virginia Schedule 763 ADJ (Form 763 ADJ) Page 1

- 3 -	
Your Name	Your SSN



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Your	Name	Your SSN			# 18118 8181 11881 11811 88111 88111 88111 88111 1881
Ad	ditions to Adjusted Gross Incon	пе		_	
1	Interest on obligations of other states	s, exempt from federal incom	ne tax but not from	state tax. 1	00
2	Other additions to adjusted gross inc	ome.		_	
	2a. Fixed Date Conformity addition -	See instructions		2a	00
	2b - 2c Refer to the Form 763 instruction Addition Codes.	tions for Other	2b	2b	00
			2c	2c	00
3	Total Additions. Add Lines 1, 2a - 2c.	Enter here and on Form 763		3	00
Su	ubtractions from Adjusted Gross	Income			
4	Income (interest, dividends or gains) state income tax, but not from federal				00
5	Disability income reported as wages If claiming this subtraction you cann benefits you most.				
	5a Enter YOUR disability subtraction	ı on 5a		5a	00
	5b Enter <u>SPOUSE's</u> disability subtra	action on 5b, if claiming Filin	g status 2	5b	00
6	Other Subtractions as provided in ins	structions			
	6a. Fixed Date Conformity subtraction	ction. See instructions		6a	00
	6b - 6d Refer to the Form 763 ins	truction book for Other	6b	6b	00
	Subtraction Codes	6c	6c	00	
			6d	6d	00
7	Total Subtractions. Add Lines 4, 5a, 5	5b, and 6a - 6d. Enter here a	and on Form 763,	Line 7. 7	00
De	eductions from Virginia Adjusted	d Gross Income			
8	Refer to the Form 763 Instructions for	or Deduction Codes			00
			8a 🔲		00
			8b		
			8c	8c	00
9	Total Deductions. Add Lines 8a - 8c.	Enter here and on Form 763	3, Line 14	9	00

Avoid delays - If completed, attach Schedule 763 ADJ to Form 763

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Your Name	Your SSN



		· · · · · · · · · · · · · · · · · · ·				
Family VAGI Name Social Security Number		Social Security Number (SSN)		Virginia Adjusted G Income (VAGI)	ross	
	Yourself					00
	Spouse					00
	a. Dependent					00
	b. Dependent					00
10	0 If more than 4 exemptions, attach schedule listing the name, SSN & VAGI. Enter total Family VAGI here.			10		00
11	Enter the total Guideline Tabl credit	11				
12	If you qualify, e	12				
13	Multiply Line 12 by \$300. Enter the result on Line 13 and proceed to Line 14. 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 14					00
14	Enter the amount of Earned Income Credit claimed on your federal return. If you did not claim an Earned Income Credit on your federal return, enter \$0			14		00
15	15 Multiply Line 14 by 20% (.20)			15		00
16	16 Enter the greater of Line 13 or Line 15			16		00
17	17 Compare the amount on Line 16 above to the amount of tax on Form 763, Line 19. Enter the lesser of the two amounts here and on Form 763, Line 23. This is your credit amount			17		00
Adjı	ustments and V	oluntary Contributions				
_	Addition to tax.	18		00		
19	19 Penalty Late Filing Penalty Extension Penalty			19		00
20	20 Interest (interest accrued on the tax you owe).			20		00
21	21 Consumer's Use Tax			21		00
22	Voluntary Contributions. Enter the code for the contribution(s) and the contribution amount(s) in boxes 22a - 22c. If contributing to more than 3 Voluntary Contributions, see Form 763 instructions.	22a	22a		00	
		22b	22b		00	
			22c	22c		00
23	If contributing to a School Foundation or a Library Foundation, enter the code for the foundation(s) and the contribution amount(s) in boxes 23a - 23c. If contributing to more than 3 school or library foundations, see Form 763 instructions.	23a	23a		00	
		23b	23b		00	
		23c	23c		00	
24	Total Adjustme	ents (add Lines 18 - 23c). Enter here and or	n Form 763, Line 30	24		00