	2009		STAPLE HERE						
	δŎΡΎΥ	Virginia Part-Year Resid							
	k Applicable Boxes		Due May 3, 201						
- C	Check if Result	Attach a copy of federal return a	nd other required at	tachments	<u> </u>				
	NOL Ced Date	Your First Name	MI Last Name		Suffix	•B	Your Socia	I Security Number	
	onformity					• D			
	odifications Jalifying Farmer,	Spouse's First Name (if filing status 2 or 4)	MI Last Name		Suffix	•A	Spouse's S	Social Security Numb	ber
	sherman or								
	erchant Seaman	Present Home Address (Number and Street, or Re	ural Route)			Earne	d Income Cre	dit Claimed on Fede	ral Retu
Da	verseas on Due ate	Other Treasure and Depart Officer and Other				● ┌	۰ ۲		•
	alfield Employment	City, Town or Post Office, and State		State ZIP C	ode		\$.0
	hancement Tax edit Earned in 2009	Name of Virginia City or County Where You Were	a Resident on Jan 1 2010 IMP				Locality Co	de from Instructions	
	iss-Through	Nume of Virginia only of County Where for Were			County		•		,
	thholding (Attach I h. VK-1)						I		
Dat	es of Residence		To <u>/ /2009</u>	SPOUSE - F	rom		2009 To		009
	/irginia in 2009:	month/day/year	month/day/year		mont	h/day/y	ear	month/day/yea	ar
	FILING	STATUS (CHECK ONLY ONE)			TIONS (Ente	er Numb 65 or	per) —		
1		g federal Head of Household? YES □)	You Dependents	To X \$930 =	tal Section 1	over +	Blind =	Total	Sectio
2		g Joint Return				LI.			
-	(Even if only one		2 + =	X \$930 =		+	-	X \$800 =	
3		g Separate Returns							
	(Enter spouse's	,	1 + =	X \$930 =		└┛+		X \$800 =	
	Spouse's full na			— Г]	
4		g Separately Column B: Yourself		X \$930 =		⊢ †	╞┥╴	X \$800 =	
		ined Return Column A: Spouse		X \$930 =				X \$800 =	
	If both hust result in les	and and wife had income, using Filing Status 4 s tax than Filing Status 2 (see instructions).	Add the Total of	Section 1 plus the	Total of Secti	on 2. U	lse the sun	n when completin	g Line
					1	Spous	se	Yourse	elf
5	Dependent on An	other's Return (See the instructions for Li	ne 11.)	·····			when Filing	B For use b	
6	ADJUSTED GRO	SS INCOME (from Line 32, Col. A1 a	nd/or B1_Part L on Page	2)		Status 4	is checked.	other fi	liers.
		ne 36, Part II, on Page 2		,			00		
		es 6 and 7)					00		
		Line 45, Part III, on Page 2					00		
		TED GROSS INCOME (subtract Line					00		
11		uction from Line 46(e), Part IV, on Pag	,				00		
		ictions from Line 47(c), Part V, on Pag					00		
12		ion Amount (See instruction to prorat					00		
		NPY, Part II, Line 2).	-				00		
14	Subtotal (add Line	es 11(a) or 11(b), 12 and 13)			. 14		00		
		ncome (subtract Line 14 from Line 10)					00		
16	Income Tax: From	Tax Table or Tax Rate Schedule			. 16		00		
17	TOTAL TAX (add	column A and column B, Line 16)					17		
18	(a) Your Virginia	Income Tax Withheld (Attach Forms)	N-2, W-2G, 1099 and VI	<-1)			18(a))	
		ginia Income Tax Withheld (Attach For							
		009 Estimated Tax Payments (Include							
		ayment - Form 760IP							
		r Low Income Individuals or VA Earne							
	()	chedule NPY, Part IV, Line 8							
		attached Schedule CR. If claiming Po		•			,		-+
		IS AND CREDITS [add Lines 18(a) the							
	-	r than Line 19, enter the difference. The							
21	-	r than Line 17, enter the difference. The							
22		enalty and interest from Schedule NPY					00		
		ment on Line 21 to be CREDITED TO 2					<u> </u>		
24		Consumer's Use Tax from Schedule I							
		23 (Columns A and B) and Line 24						>	
26	It you owe tax on	Line 20, add Lines 20 and 25 - OR - If 1, enter the difference. This is the AM	Line 21 is an overpaym	ent and Line 25	IS		26	s	
		here if credit card payment has been		payment			20	´	$\neg \uparrow$
								1	
27		than Line 25, subtract Line 25 from Line	21. This is the amount to	be REFUNDED	TO YOU		27	,	

Form 760PY (2009) Name

Page 2

PART I - SCHEDULE OF INCOME AND ADJUSTMENTS (See instructions) -ALL FILERS MUST COMPLETE THIS SCHEDULE-

EN	ITER SPOUSE'S IN	R SPOUSE'S INCOME WHEN FILING STATUS 4 IS USED			FOR USE BY ALL OTHER FILERS			
28 Income:	Column A1 Income on Federal Return	Column A2 Income While Virginia Resident	Column A3 Income While NOT Virginia Resident		Column B1 Income on ederal Return	Column B2 Income While Virginia Resident	Column B3 Income While NOT Virginia Resident	
(a) Wages, salaries, tips and other compensation28(a)	00	00	00		00	00	00	
(b) Interest and dividends(b)	00	00	00		00	00	00	
(c) Pension and other income (attach explanation)(c)	00	00	00		00	00	00	
29 Gross income [add Lines 28 (a), (b) and (c)]29	00	00	00		00	00	00	
30 Adjustments to income: moving expenses	00	00	00		00	00	00	
31 Other income adjustments (attach explanation)	00	00	00		00	00	00	
32 Adjusted gross income (Line 29 less Lines 30 and 31)*32	00	00	00		00	00	00	
(a) Net fixed date conformity modifications(a)	00	00	00		00	00	00	
(b) Fixed date conformity FAGI [add Lines 32 and 32(a)](b)	00	00	00		00	00	00	

*Enter the amount from Line 32, Col. A1 on Page 1, Line 6 Col. A. Enter the amount from Line 32, Col. B1 on Page 1, Line 6, Col. B.

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PART II - ADDITIONS TO FEDERAL ADJUSTED GROSS INCOME	A Spouse -USE ONLY when Filing Status 4 is checked	B Yourself For use by all other filers
33 Fixed date conformity addition	00	00
34 Interest earned while a Virginia resident on obligations of other states exempt from federal tax	00	00
35 Other additions to federal adjusted gross income as provided in instructions - Attach explanation	00	00
36 TOTAL ADDITIONS (add Lines 33 through 35) Enter here and on Line 7 on Page 1	00	00
PART III - SUBTRACTIONS FROM FEDERAL ADJUSTED GROSS INCOME		
37 Fixed date conformity subtraction	00	00
38 Age deduction from Sch. NPY, Part I, Line 4	00	00
39 State income tax refund or overpayment credit reported as income on your federal return and received while a Virginia resident. (Claim in the same column you reported the income on Line 6.)	00	00
40 Income attributable to your period of residence outside Virginia from Part I, Columns A3 and B3, Line 32(b)40	00	00
41 Income (interest, dividends or gains) received while a Virginia resident on obligations or securities of the U.S. exempt from state income tax, but not from federal tax	00	00
42 Social Security and equivalent Tier 1 Railroad Retirement Act benefits reported as taxable income on your federal return and attributable to your period of residence in Virginia	00	00
43 Disability income received while a Virginia resident and reported as wages (or payment in lieu of wages) on account of permanent and total disability □ Spouse You cannot claim an Age Deduction on Line 38 and the disability subtraction. See instructions.	00	00
44 Other subtractions - refer to the instruction book for Other Subtraction Codes		
(a) Enter 2 digit code in box (a)	00	00
(b) Enter 2 digit code in box b	00	00
(c) Enter 2 digit code in box(c)	00	00
45 TOTAL SUBTRACTIONS - (add Lines 37 through 44c). Enter here and on Line 9 on Page 145	00	00
PART IV - STANDARD DEDUCTION (The standard deduction must be claimed unless itemized deductions were claimed on your fe	,	
46 (a) Fixed date conformity Federal ADJUSTED GROSS INCOME (total of Line 32(b), Columns A1 + B1 from Part I a	, ()	00
(b) Fixed date conformity income attributable to Virginia residence (total of Line 32(b), Columns A2 + B2 from Part	, ()	00
(c) Percentage of full standard deduction allowable [amount shown on Line 46(b) divided by amount shown on Line 46(a)]. Enter to only one decimal place (Ex.: 12.2%).		%
(d) Filing Status 1: Enter \$3,000; Filing Status 2 or 4: Enter \$6,000; Filing Status 3: Enter \$3,000	(d)	00
(e) Multiply Line 46(c) by Line 46(d). Enter here and on Line 11(a) on front. If using Filing Status 4, you may allocate this amount between husband and wife, as mutually agreed	(e)	00
PART V - ITEMIZED DEDUCTIONS (If you itemized deductions on your federal return, YOU MUST claim itemized deductions of 47 (a) Itemized deductions from Schedule A Worksheet paid while a Virginia resident	on your Virginia return.) 47(a)	00
(b) State and local income taxes claimed on Schedule A and included on Line 47(a)		00
(c) Allowable Virginia itemized deductions: Subtract Line 47(b) from Line 47(a). Enter here and on Line 11(b) on Pa If using Filing Status 4, you may allocate this amount between husband and wife, as mutually agreed		00
I (We) authorize the Department of Taxation to discuss this return with my (our) preparer.		

I (We), the undersigned, declare under penalty of law that I (we) have examined this return and to the best of my (our) knowledge, it is a true, correct and complete return. We agree that filing separately on this combined return makes us jointly and severally liable for the amount of tax shown to be due on this return and any refunds will be made payable to us jointly.

	Your Signature x	Date	Check if Deceased	Your Business Phone Number	•	Home Phone Number ●
Please Sign Here	Spouse's Signature (if filing status 2 or 4 both must sign) x	Date	Check if Deceased	Spouse's Business Phone Number	•	
	Preparer's Signature x	Date		Preparer's Phone Number		Preparer's FEIN/PTIN/SSN
Preparer's Use Only	Firm's Name (or Yours if Self-Employed)					Code

Attach A Complete Copy Of Your Federal Tax Return And All Other Required Virginia Attachments