

**Virginia  
Form REIT-3**

**Virginia Real Estate Investment Trust  
Investor Information Report**

**Calendar Year**

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Page 1 of \_\_\_\_

*Step 3 out of 3 to register and certify a Virginia REIT.*

**Important:** Forms REIT-1, REIT-2, and REIT-3 must be submitted before investors may claim a subtraction on their Virginia income tax return.

In order for an investor to claim a subtraction on their return for income attributable to an investment in a Virginia real estate investment trust (REIT), the investment must be registered with the Department by filing **Form REIT-3**. Submit this form by **January 31st** of the year following the year during which the investment was made. This documentation must be provided in order for the subtraction to be allowed on the Virginia income tax return. This is **STEP 3 OUT OF 3** to register and certify a Virginia REIT for the purpose of claiming the subtraction for income attributable to an investment in Virginia REIT.

**NOTE:** An investor cannot claim a subtraction for an investment in a trust that is managed by a family member or an affiliate of the taxpayer; cannot use the same investment to claim the subtraction for certain long-term gains; and cannot use the same investment to claim the Qualified Equity and Subordinated Debt Investment Tax Credit for individuals.

Section I – REIT Information			
Name as shown on Form REIT-1		FEIN	
Contact Name	Phone Number	Fax Number	
Investment Fund Name		Certificate Number	

**Section II – Investor Information**

**Instructions:** Enter one investor per row and provide complete information in each column. In **Column C**, enter one of the following entity types: (1) C Corporation; (2) S Corporation; (3) Partnership; (4) LLC; (5) Individual. If there are more than 12 investors in the Virginia REIT, submit multiple copies of this page.

	Column A Investor Name	Column B SSN / FEIN	Column C Entity Type	Column D Investment Amount
1.		<input type="checkbox"/> SSN <input type="checkbox"/> FEIN		\$ .00
2.		<input type="checkbox"/> SSN <input type="checkbox"/> FEIN		\$ .00
3.		<input type="checkbox"/> SSN <input type="checkbox"/> FEIN		\$ .00
4.		<input type="checkbox"/> SSN <input type="checkbox"/> FEIN		\$ .00
5.		<input type="checkbox"/> SSN <input type="checkbox"/> FEIN		\$ .00
6.		<input type="checkbox"/> SSN <input type="checkbox"/> FEIN		\$ .00
7.		<input type="checkbox"/> SSN <input type="checkbox"/> FEIN		\$ .00
8.		<input type="checkbox"/> SSN <input type="checkbox"/> FEIN		\$ .00
9.		<input type="checkbox"/> SSN <input type="checkbox"/> FEIN		\$ .00
10.		<input type="checkbox"/> SSN <input type="checkbox"/> FEIN		\$ .00
11.		<input type="checkbox"/> SSN <input type="checkbox"/> FEIN		\$ .00
12.		<input type="checkbox"/> SSN <input type="checkbox"/> FEIN		\$ .00

**Section III – Signature**

I (we) the undersigned declare, under the penalties provided by law, that this form (including any accompanying schedules, statements, and attachments) has been examined by me (us) and is, to the best of my (our) knowledge and belief, a true, correct, and complete application, made in good faith pursuant to the income tax laws of the Commonwealth of Virginia. If a person other than the taxpayer prepares this application, such declaration is based on all information of which he or she has knowledge.

Authorized Signature		Printed Name		Date
Email Address (Optional)		Phone Number	Fax Number	