

WEB **2015 Virginia Schedule ADJ**  
(Form 760-ADJ)

Your Social Security Number

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|



Name(s) as shown on Virginia return

**Additions to Federal Adjusted Gross Income**

1. Interest on obligations of other states, exempt from federal income tax but not from state tax..... 1
2. Other additions to federal adjusted gross income.
  - 2a. **FIXED DATE CONFORMITY ADDITION - SEE INSTRUCTIONS**..... 2a
  - 2b - 2c. Refer to the Form 760 instructions for Other Addition Codes.
 

| Code                    |
|-------------------------|
| 2b <input type="text"/> |
| 2c <input type="text"/> |
3. Total Additions. Add Lines 1 and 2a - 2c. Enter here and on Form 760, Line 2..... 3

**Dollar Amount**

|                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |     |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|-----|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | .00 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | .00 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | .00 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | .00 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | .00 |

**Subtractions from Federal Adjusted Gross Income**

4. Income (interest, dividends or gains) from obligations or securities of the U.S. exempt from state income tax, but not from federal tax. .... 4
5. Disability income reported as wages (or payments in lieu of wages) on your federal return.
  - 5a. Enter **YOUR** disability subtraction. .... 5a
  - 5b. Enter **SPOUSE's** disability subtraction. .... 5b
6. Other subtractions as provided in instructions.
  - 6a. **FIXED DATE CONFORMITY SUBTRACTION - SEE INSTRUCTIONS**..... 6a
  - 6b - 6d. Refer to the Form 760 instructions for Other Subtraction Codes.
 

| Code                    |
|-------------------------|
| 6b <input type="text"/> |
| 6c <input type="text"/> |
| 6d <input type="text"/> |
7. Total Subtractions. Add Lines 4, 5a, 5b and 6a - 6d. Enter here and on Form 760, Line 7. .... 7

|                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |     |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|-----|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | .00 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | .00 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | .00 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | .00 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | .00 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | .00 |

**Deductions from Virginia Adjusted Gross Income**

8. Refer to the Form 760 instructions for Deduction Codes.
 

| Code                    |
|-------------------------|
| 8a <input type="text"/> |
| 8b <input type="text"/> |
| 8c <input type="text"/> |
9. Total Deductions. Add Lines 8a - 8c. Enter here and on Form 760, Line 14. .... 9

|                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |     |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|-----|
| LOSS                 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | .00 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | .00 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | .00 |
| LOSS                 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | .00 |

Continue with Line 10 on Page 2.

**Avoid delays** - If completed, submit Schedule ADJ with Form 760.

Your Social Security Number

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|



**Credit for Low-Income Individuals or Virginia Earned Income Credit**

| Family VAGI   | Name  | Social Security Number | Virginia Adjusted Gross Income (VAGI)  |
|---|---|------------------------|--|
| You   |   |                        |  |
| Spouse  |   |                        |  |
| Dependent   |   |                        |  |
| Dependent   |   |                        |  |
| 10. Total   | If more than 4 exemptions, attach schedule listing the name, SSN & VAGI. Enter total <b>Family VAGI</b> here. |                        | LOSS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> .00 |
| 11. Enter the total number of exemptions reported in the table above. Next, refer to the Poverty Guidelines Table in the Form 760 instructions to see if you qualify for this credit.                   |   |                        | <input type="text"/> <input type="text"/> 11   |
| 12. If you qualify for this credit, enter the number of personal and dependent exemptions reported on your Form 760 (see instructions).   |   |                        | <input type="text"/> <input type="text"/> 12   |
| 13. Multiply Line 12 by \$300. Enter the result on Line 13. If you do not qualify for the Tax Credit for Low-Income Individuals but claimed the Earned Income Credit on your federal return, enter \$0. |   |                        | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> .00      |
| 14. Enter the amount of Earned Income Credit claimed on your federal return. If you did not claim the Earned Income Credit on your federal return, enter \$0.   |   |                        | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> .00      |
| 15. Multiply Line 14 by 20% (.20).  |   |                        | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> .00      |
| 16. Enter the greater of Line 13 or Line 15 above.  |   |                        | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> .00      |
| 17. Compare the amount on Line 16 above to the amount of tax on Line 19 of Form 760. Enter the lesser of the two amounts here and on Line 24 of Form 760. This is your credit amount.                   |   |                        | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> .00      |

**Addition to Tax, Penalty and Interest**

|  |    |   |
|--|----|---|
| 18. Addition to tax. Fill in oval if addition came from: <input type="radio"/> Form 760C <input type="radio"/> Form 760F | 18 | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> .00 |
| 19. Penalty <input type="radio"/> Late Filing Penalty <input type="radio"/> Extension Penalty                            | 19 | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> .00 |
| 20. Interest (accrued on the tax you owe)  | 20 | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> .00 |
| 21. Total Addition to Tax, Penalty and Interest (add Lines 18 through 20). Enter here and on Line 34 of Form 760.        | 21 | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> .00 |

**Use Schedule VAC to make contributions.**