

WEB **2014 Virginia Resident Form 760**
Individual Income Tax Return

2601031 08/14 File by May 1, 2015 - PLEASE USE BLACK INK



| | | |
|--|------|----------------------------|
| Your first name | M.I. | Last name including suffix |
| Spouse's first name (joint returns only) | M.I. | Last name including suffix |
| Number and Street - If this is a change, you must fill in oval <input type="radio"/> | | |
| City, town or post office and state | | ZIP Code |

| | | |
|-------------------------|----------------------|--------------------------------|
| Social Security Number | | First 4 letters of last name |
| You | <input type="text"/> | <input type="text"/> |
| Spouse | <input type="text"/> | <input type="text"/> |
| Birth Date (mm-dd-yyyy) | | Deceased <input type="radio"/> |
| You | <input type="text"/> | <input type="radio"/> |
| Spouse | <input type="text"/> | <input type="radio"/> |

Fill in all ovals that apply:

| | |
|---|--|
| <input type="radio"/> Name or Filing Status changed | <input type="radio"/> Overseas on due date |
| <input type="radio"/> Virginia return not filed last year | <input type="radio"/> Federal Schedule C filed |
| <input type="radio"/> Dependent on another's return | <input type="radio"/> Earned Income Credit on federal return |
| <input type="radio"/> Qualifying farmer, fisherman or merchant seaman | Amount claimed: <input type="text"/> |
| <input type="radio"/> Amended Return - Result of NOL? YES | |

Filing Status Enter in box (1 = Single, 2 = Joint, and 3 = Married Filing Separately)

Code Federal head of household? YES ☐

If Filing Status 3, enter spouse's SSN in the Spouse's Social Security Number box at top of form and, enter Spouse's Name _____

| | | |
|---|----------------------|----------------------|
| Last 5 Digits of VA Driver's License ID | | Locality Code |
| You | Spouse | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | |

Exemptions Add Sections A and B. Enter the sum on Line 13.

| | | | |
|-----------|---------------------------|----------------------|----------------------|
| You | Spouse if Filing Status 2 | Dependents | Total Section A |
| 1 | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| X \$930 = | | | <input type="text"/> |

| | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|
| You 65 or over | Spouse 65 or over | You Blind | Spouse Blind | Total Section B |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| X \$800 = | | | | <input type="text"/> |

| | | | |
|---|----|----------------------|-----|
| 1. Adjusted Gross Income from federal return - Not federal taxable income | 1 | <input type="text"/> | .00 |
| 2. Additions from attached Schedule ADJ, Line 3. | 2 | <input type="text"/> | .00 |
| 3. Add Lines 1 and 2 | 3 | <input type="text"/> | .00 |
| 4. Age Deduction. See Instructions. Be sure to provide date of birth above. | | | |
| You <input type="text"/> .00 + Spouse <input type="text"/> .00 = | 4 | <input type="text"/> | .00 |
| 5. Social Security and equivalent Tier 1 Railroad Retirement benefits if taxable on federal return | 5 | <input type="text"/> | .00 |
| 6. State Income Tax refund or overpayment credit (reported as income on federal return) | 6 | <input type="text"/> | .00 |
| 7. Subtractions from attached Schedule ADJ, Line 7 | 7 | <input type="text"/> | .00 |
| 8. Add Lines 4, 5, 6 and 7 | 8 | <input type="text"/> | .00 |
| 9. Virginia Adjusted Gross Income (VAGI) - Subtract Line 8 from Line 3 | 9 | <input type="text"/> | .00 |
| 10. Itemized Deductions from federal return | 10 | <input type="text"/> | .00 |
| 11. State and Local Income Taxes claimed on federal Schedule A | 11 | <input type="text"/> | .00 |
| 12. Subtract Line 11 from Line 10 if claiming itemized deductions. Otherwise, enter standard deduction: Filing Status: 1 = \$3,000; 2 = \$6,000; 3 = \$3,000 | 12 | <input type="text"/> | .00 |
| 13. Exemptions. Sum of total from Exemption Section A plus Exemption Section B | 13 | <input type="text"/> | .00 |
| 14. Deductions from Schedule ADJ, Line 9 | 14 | <input type="text"/> | .00 |
| 15. Add Lines 12, 13 and 14 | 15 | <input type="text"/> | .00 |
| 16. Virginia Taxable Income - Subtract Line 15 from Line 9 | 16 | <input type="text"/> | .00 |

☐ LAR
 ☐ DLAR
 ☐ DTD
 ☐ LTD
 \$

Office Use

Include Forms W-2, W-2G, 1099 and VK-1.

Include payment.

-

A diagram of a 1D lattice with two atoms per unit cell. The lattice is represented by a horizontal line with vertical bars indicating the positions of atoms. The atoms are arranged in a periodic pattern, with two atoms per unit cell. The unit cell is marked by vertical lines, and the atoms are represented by small circles. The lattice constant is indicated by the distance between the vertical lines.

[illegible]

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

A 2D grid with 2 rows and 8 columns. The top row has 2 shaded cells at columns 3 and 4. The bottom row has 2 shaded cells at columns 3 and 4. The grid is labeled with 'x' and 'y' axes.

[illegible][illegible][illegible]

A diagram of a bridge structure. It consists of a horizontal line representing the bridge deck, supported by two trapezoidal piers. Above the deck, there are several vertical lines representing the bridge's internal structure or cables. The entire diagram is rendered in a light gray color.

A diagram of a 1D lattice with 8 sites. The second and seventh sites from the left are highlighted in red.

Savings

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

[illegible]

☐ I agree to obtain my Form 1099-G at **www.tax.virginia.gov**.

| | | | |
|----------------|------|--------------------|------|
| Your Signature | Date | Spouse's Signature | Date |
|----------------|------|--------------------|------|

| Your Phone | | | | | | Spouse's Phone | | | | | | Office Use | | | | | |
|------------|--|--|--|--|--|----------------|--|--|--|--|--|------------|--|--|--|--|--|
| | | | | | | | | | | | | | | | | | |

Preparer's Name Firm Name Phone Number Filing Election Preparer's PTIN

[illegible]