2001 Virginia Resident Form 760-WEB
Individual Income Tax Return

PLEASE USE BLACK INK

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Place Label Here

First name and initial (if filing joint return enter both) Last name

Present home address (number and street)

Address continued

City, town or post office and state Zip Code

- Accelerated Refund: name, address & filing status same as last year
- Name, filing status or address has changed since last year
- Dependent on another's return and have unearned income
- Fiscal year filer ____ (beginning month/year) ____ (ending month/year)
- Amended Return
- Overseas on due date
- Qualifying farmer, fisherman or merchant seaman
- Coalfield Employment Enhancement Credit Earned

Your Social Security Number | First 4 letters of your last name | Spouse's Social Security Number | First 4 letters of spouse's last name | Locality Code See instructions

Filing Status
Fill in oval to indicate status

- (1) Single. Did you claim federal head of household? Yes
- (2) Married filing joint return (Enter spouse's SSN above)
- (3) Married filing separate return (Enter spouse's SSN above)

Spouse's Name_____

Exemptions

		65 or over	Blind	Dependents	Total Exemptions
You	1 +	+	+	+	=
Spouse if filing joint return	+	+	+		

Use Total Exemptions to complete Line 11

If an amount is negative, completely fill in rectangle..... LOSS ▬

1.	**Federal Adjusted Gross Income** *(from federal return - **NOT FEDERAL TAXABLE INCOME**)*	1
2.	Total Additions from attached Schedule ADJ, line 3	2
3.	**Subtotal - Add lines 1 and 2**	3
4.	Deduction for age on Jan 1, 2002. Each filer age 62-64: $6,000; each filer 65 or over: $12,000 You .00 + Spouse .00 =	4
5.	Social Security Act and equivalent Tier 1 Railroad Retirement Act benefits (reported as taxable on federal return)	5
6.	State Income Tax refund or overpayment credit (reported as income on federal return)	6
7.	Subtractions from attached Schedule ADJ, line 7	7
8.	**Total Subtractions - Add lines 4, 5, 6, and 7**	8
9.	**Virginia Adjusted Gross Income (VAGI) - Subtract line 8 from line 3**	9
10.	Deductions-**Enter Standard: Filing Status 1** = $3,000; **2** = $5,000; **3** = $2,500 **OR Itemized**: 10a. Total deductions from Federal Sch. A . minus 10b. State and Local Taxes claimed . =	10
	(YOU MUST USE ITEMIZED DEDUCTIONS IF YOU ITEMIZED ON YOUR FEDERAL RETURN)	
11.	Exemptions. Multiply number of Total Exemptions claimed above by $800	11
12.	Child and Dependent Care Expenses. See Instructions	12
13.	**Subtotal - Add lines 10, 11 and 12**	13
14.	**Virginia Taxable Income - Subtract line 13 from line 9**	14

Attach Forms W-2, W-2G and 1099-R here.

AR LTD TD $_____ Office Use **WB** MMDDYY

Your SSN

15. Amount of Tax (from Tax Table or Tax Rate Schedule) **15**

16. Spouse Tax Adjustment. For Filing Status 2 only. Enter VAGI in whole dollars below. See instructions.

16a - Enter Your VAGI below LOSS .00

16b - Enter Spouse's VAGI below LOSS .00 **16**

17. **Net Amount of Tax - Subtract line 16 from line 15** **17**

18. Virginia tax withheld for 2001.

18a. Your Virginia withholding **18a**

18b. Spouse's Virginia withholding (filing status 2 only) **18b**

19. Combined Estimated Tax Paid for tax year 2001 ..... **19**
(include overpayment credited from tax year 2000)

20. Combined Extension Payments (from Form 760E) **20**

21. Tax Credit for Low Income Individuals from attached Schedule ADJ, line 12 ..... **21**

22. Credit for Tax Paid to Another State from attached Schedule ADJ, line 19 ..... **22**

23. Other Credits (from attached Schedule CR, line 116) **23**

24. **Total payments and credits - Add lines 18a, 18b and 19 through 23** **24**
If you are filing an Amended Return, stop here and GO TO line 27 of Schedule ADJ

25. If line 24 is less than line 17, subtract line 24 from line 17. This is the Tax You Owe **25**
Skip to line 28

26. If line 17 is less than line 24, subtract line 17 from line 24. This is Your Tax Overpayment **26**

27. Amount of overpayment you want credited to next year's estimated tax **27**

28. Adjustments and Voluntary Contributions (from attached Schedule ADJ, line 26) **28**

29. Add line 27 and line 28 ..... **29**

30. If you owe tax on line 25, add lines 25 and 29. **OR**
If line 26 is less than line 29, subtract line 26 from line 29. **AMOUNT DUE** **30**

CREDIT CARD **FILL IN OVAL IF PAYMENT BY CREDIT CARD - SEE INSTRUCTIONS**

31. If line 26 is greater than line 29, subtract line 29 from line 26. **YOUR REFUND** **31**

Direct Deposit Information

Your bank's routing transit number

Your bank account number

Federal Schedule C

Gross Receipts or Sales

Depreciation and section 179 expense deduction

Business Activity Code

Business Locality Code

Primary taxpayer deceased

Spouse deceased

I authorize the Dept. of Taxation to discuss my return with my preparer.

Your Email Address: _____

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.

Your Signature | Date

Spouse's Signature | Date

Your business phone number

Home phone number

Spouse's business phone number

Preparer's Name (please print) | Date

Preparer's Phone Number _____

Preparer's Email Address _____