

2601031 8/07

# 2007 Virginia Resident Form 760 WEB Individual Income Tax Return

File by May 1, 2008 - PLEASE USE BLACK INK

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

Fill in all ovals that apply:

- Name or filing status has **changed** since last filing
- Virginia return was not filed last year
- Return adjusted for fixed date conformity
- Dependent on another's return
- Amended Return - Fill in oval if result of NOL

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
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

<b>Filing Status</b> Fill in oval to indicate status	<b>Exemptions</b>	<b>Dependents</b>	<b>Total</b>	Add the Dollar Amounts and Enter Total on Line 11
<input type="checkbox"/> (1) Single. Did you claim federal head of household? Yes <input type="checkbox"/>	<b>A</b> You <input type="checkbox"/> + Spouse <input type="checkbox"/> = <input type="text"/> x \$900 = _____	<input type="checkbox"/>	<input type="text"/>	
<input type="checkbox"/> (2) Married filing joint return (Enter spouse's SSN above)	<b>B</b> You <input type="checkbox"/> 65 or over + Spouse <input type="checkbox"/> 65 or over = <input type="text"/> x \$800 = _____	You <input type="checkbox"/> Blind + Spouse <input type="checkbox"/> Blind = <input type="text"/>	<input type="text"/>	
<input type="checkbox"/> (3) Married filing separate return (Enter spouse's SSN above) Spouse's Name _____				

1. Federal Adjusted Gross Income ..... 1	LOSS <input type="checkbox"/>	<input type="text"/>	<input type="text"/>
(from federal return - NOT FEDERAL TAXABLE INCOME)			
2. Total Additions from attached Schedule ADJ, Line 3 ..... 2		<input type="text"/>	<input type="text"/>
(You must attach Schedule ADJ)			
3. Add Lines 1 and 2 ..... 3	LOSS <input type="checkbox"/>	<input type="text"/>	<input type="text"/>
4. Deduction for age on Jan. 1, 2008. See Instructions.		<input type="text"/>	<input type="text"/>
You <input type="text"/> .00 + Spouse <input type="text"/> .00 = 4			
Your Birthday (mm-dd-yy) <input type="text"/> Spouse's Birthday (mm-dd-yy) <input type="text"/>			
5. Social Security Act and equivalent Tier 1 Railroad Retirement Act benefits ..... 5		<input type="text"/>	<input type="text"/>
(reported as taxable on federal return)			
6. State Income Tax refund or overpayment credit (reported as income on federal return) ..... 6		<input type="text"/>	<input type="text"/>
7. Subtractions from attached Schedule ADJ, Line 7 ..... 7		<input type="text"/>	<input type="text"/>
(You must attach Schedule ADJ)			
8. Add Lines 4, 5, 6 and 7 ..... 8		<input type="text"/>	<input type="text"/>
9. Virginia Adjusted Gross Income (VAGI) - Subtract Line 8 from Line 3 ..... 9	LOSS <input type="checkbox"/>	<input type="text"/>	<input type="text"/>
10. Deductions-Enter Standard: Filing Status 1 = \$3,000; 2 = \$6,000; 3 = \$3,000 OR Itemized:			
10a. Total Itemized Deductions		<input type="text"/>	<input type="text"/>
10b. State and Local Income Taxes claimed on Sch. A		<input type="text"/>	<input type="text"/>
<input type="text"/> .00 MINUS <input type="text"/> .00 = 10			
11. Exemptions. Sum of total from Exemption Section A multiplied by \$900 plus sum of total from Exemption Section B multiplied by \$800 ..... 11		<input type="text"/>	<input type="text"/>
12. Deductions from Virginia Adjusted Gross Income Schedule ADJ, Line 9 ..... 12	LOSS <input type="checkbox"/>	<input type="text"/>	<input type="text"/>
You must attach Schedule ADJ unless claiming Child and Dependent Care Expenses ONLY. Fill in oval if claiming Child and Dependent Care expenses only. See instructions. <input type="checkbox"/>			
13. Add Lines 10, 11 and 12 ..... 13	LOSS <input type="checkbox"/>	<input type="text"/>	<input type="text"/>
14. Virginia Taxable Income - Subtract Line 13 from Line 9 ..... 14	LOSS <input type="checkbox"/>	<input type="text"/>	<input type="text"/>

Forms W-2, W-2G, and 1099 reporting VA withholding here.

STAPLE

Staple payment here

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Your SSN

SSN input boxes

- 15. Amount of Tax from Tax Table or Tax Rate Schedule (round to whole dollars) ..... 15
16. Spouse Tax Adjustment. For Filing Status 2 only. Enter VAGI in whole dollars below. See instructions.
16a - Enter Your VAGI below
16b - Enter Spouse's VAGI below
17. Net Amount of Tax - Subtract Line 16 from Line 15 ..... 17
18. Virginia tax withheld for 2007.
18a. Your Virginia withholding ..... 18a
18b. Spouse's Virginia withholding (filing status 2 only) ..... 18b
19. Estimated Tax Paid for tax year 2007 (from Form 760ES) ..... 19
20. Extension Payments (from Form 760IP) ..... 20
21. Tax Credit for Low Income Individuals or Earned Income Credit from attached Sch. ADJ, Line 17 ..... 21
22. Credit for Tax Paid to Another State from attached Sch. OSC, Line 41 ..... 22
23. Other Credits from attached Schedule CR ..... 23
24. Add Lines 18a, 18b and 19 through 23 ..... 24
25. If Line 24 is less than Line 17, subtract Line 24 from Line 17. This is the Tax You Owe ..... 25
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 24 ..... 28
29. Add Lines 27 and 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 YOU OWE ..... 30
31. If Line 26 is greater than Line 29, subtract Line 29 from Line 26. YOUR REFUND ..... 31

Grid of input boxes for tax amounts, with some boxes containing '00'.

Direct Deposit Information

Please indicate type of account
Checking Savings

Your bank's routing transit number

Routing transit number input boxes

Your bank account number

Bank account number input boxes

Fill in all ovals that apply:

- Qualifying farmer, fisherman or merchant seaman
Coalfield credit earned
Overseas on due date
Federal Schedule C filed with your federal return
Earned Income Credit claimed on your federal return. Amount claimed:

Primary Taxpayer Deceased

Spouse Deceased

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.

Signature and Date lines for taxpayer and spouse.

Your business phone number

Business phone number input boxes

Home phone number

Home phone number input boxes

Spouse's business phone number

Spouse's business phone number input boxes

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

Preparer's Signature

Preparer's Name, Address & Phone Number (please print)

Code

Preparer's FEIN/PTIN/SSN

Preparer information input boxes