

# Schedule NPY      Schedule of Adjustments For Nonresident or Part-Year Resident

**Attach this Schedule to your Form 760PY or Form 763**

# 2005

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Name(s) As Shown On Virginia Return	<b>B</b>	Your SSN
	<b>A</b>	Spouse's SSN

**Part I - Form 760PY ONLY - Age Deduction** - Read instructions before completing

Enter the Adjusted Federal Adjusted Gross Income from Age Deduction Work Sheet, Line 8, if applicable.

For Filing Status 3, enter spouse's birth date. . . . .

1. Enter birthdate (For Filing Statuses 2 and 4 both birth dates are required even if only one qualifies for an age deduction.) . . . . .
2. Enter Age Deduction (See instructions.) . . . . .
3. Enter the Ratio Schedule amount for the date you moved into or out of Virginia
4. **Qualifying Age Deduction** - Multiply Line 2 by Line 3 and enter here. . . . .

	A	SPOUSE		B	YOU
		Month - Day - Year			Month - Day - Year
1.		- -			- -
2.		00			00
3.		.			.
4.		00			00

Filing Status 1 or 3 - Transfer amount from Line 4, Col. B to Form 760PY, Line 38, Col. B.  
 Filing Status 2 - Transfer the total of Line 4, Col. A & B to Form 760PY, Line 38, Col. B.  
 Filing Status 4 - Transfer amounts from Line 4 to Form 760PY, Line 38, Col. A & B.

**You may NOT claim both this deduction and the disability income subtraction on Form 760PY, Part III, Line 43. Claim the one that benefits you the most.**

**Part II - Computation For Tax Credit For Low Income Individuals**

- See instructions to compute.
- Please list below the name, Social Security Number (SSN) and Guideline Income for you, your spouse, and each dependent.
- If more room is needed, attach a schedule with the name, SSN and Guideline Income for each additional dependent.
- Failure to complete this Part may result in credit being reduced or disallowed.

Family VAGI	Name	Social Security Number (SSN)	Guideline Income
1.	Yourself		00
2.	Spouse		00
3.	Dependent		00
4.	Dependent		00
5.	Dependent		00
6.	Dependent		00
7.	Total Family Guideline Income (Be sure to include information from attached schedule, if applicable.)		00
8.	Enter the total number of exemptions listed above and on any attached schedule. Based on this total, the total family Guideline Income from Line 7 and the poverty guidelines in the instructions, determine your eligibility. . .		8.
9.	If eligible, enter the number of personal exemptions from Form 760PY or 763. (Do not include age or blindness exemption.) . . . . .		9.
10.	Multiply Line 9 by \$300 . . . . .		00
11.	Compare the amount of tax on Form 760PY, Line 17, or on Form 763, Line 18, to the amount on Line 10 above. Enter the lower amount here. This is your Tax Credit for Low Income Individuals. Enter on Form 760PY, Line 18(e), or Form 763, Line 19(e), . . . . .		00

**Part III - Credit For Tax Paid To Another State**

- Attach copy of that state's return.

	A	SPOUSE This column for 760PY Filing Status 4 filers only.		B	YOU
1.		00			00
2.		00			00
3.		00			00
4.		00			00
5.		. %			. %
6.		00			00
7.		00			00
8.	Total - Add Line 7, Col. A and Col. B. Also enter on Form 760PY, Line 18(f), or Form 763, Line 19(f). <b>Note:</b> The sum of Line 11, Part II, and Line 8, Part III, cannot exceed your tax liability. Lower Line 8, Part III, if necessary to ensure sum does not exceed.				00

Name(s) As Shown On Virginia Return	Social Security Number
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**Part IV - Addition To Tax, Penalty And Interest**

• See instructions.

1. Addition To Tax - Enter amount from Form 760C or Form 760F, whichever is applicable. . . . . 1.	00	●
2. Penalty - See instructions. If owed, check one and enter amount: <input type="checkbox"/> ● Late Filing/Late Payment Penalty or <input type="checkbox"/> ● Extension Penalty. . . . . 2.	00	●
3. Interest - Compute on amount from Form 760PY, Line 20, or Form 763, Line 21. See Instructions. . . . . 3.	00	●
4. <b>Total</b> - Add Lines 1, 2 and 3. Enter here and on Form 760PY, Line 22, or Form 763, Line 23. . . . . 4.	00	●

**Part V - Contributions And Consumer's Use Tax (See instructions.)**

**1. Voluntary Contributions From Overpaid Taxes**

Enter the code for the organization and the contribution amount(s) in boxes 1a through 1h.

*If you are donating to more than 8 qualifying organizations, enter the code "00" in the first box and the total amount of all donations. Attach a separate page indicating the amount you wish to contribute to each organization. See Instructions for contribution codes.*

	Code		Amount	
1a.			00	●
1b.			00	●
1c.			00	●
1d.			00	●
1e.			00	●
1f.			00	●
1g.			00	●
1h.			00	●

**2. Total Voluntary Contributions - Add Lines 1a -1h**

This subtotal may not exceed the amount on Form 760PY, Line 21 minus the total of Lines 22 and 23; or Form 763, Line 22 minus the total of Lines 23 and 24. . . . . 2.

	00	●
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**3. Other Voluntary Contributions**

Enter the code of the organization and the contribution amount(s) in boxes 3a through 3e.

*If you are donating to more than 5 organizations, enter the code "00" in the first box and enter the total amount of all donations. Attach a separate page indicating the amount you wish to contribute to each organization. See Instructions for contribution codes.*

3a.			00	●
3b.			00	●
3c.			00	●
3d.			00	●
3e.			00	●

**4. Public School Foundations**

Enter the code of the foundation and the contribution amount in boxes 4a through 4c.

*If you want to donate to more than 3 school foundations, enter "999999" and the total amount donated to school foundations on 4a, and attach a schedule showing the amount donated to each foundation. See Instructions for foundations codes.*

4a.			00	●
4b.			00	●
4c.			00	●

**5. Total Contributions - Add Line 2, Lines 3 a-e, and Lines 4 a-c. . . . . 5.**

	00	●
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**6. Consumer's Use Tax . . . . . 6.**

	00	●
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**7. Total Contributions And Consumer's Use Tax - Add Line 5 and Line 6  
Enter this amount on Form 760PY, Line 24, or Form 763, Line 25. . . . . 7.**

	00	●
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Be sure to attach Form NPY to your return.