

2021 Virginia Schedule 760PY ADJ

Page 1



| | |
|-----------|----------|
| Your Name | Your SSN |
|-----------|----------|

Additions to Adjusted Gross Income

1. Interest earned while a Virginia resident on obligations of other states, exempt from federal income tax, but not from state tax.
2. Other additions to adjusted gross income.
 - 2a Fixed date conformity addition. See instructions.
 - 2b - 2c Refer to Form 760PY Instructions for Other Addition Codes.

| | | |
|------|--|--|
| Code | | |
| 2b | | |
| 2c | | |
3. Total Additions. Add Lines 1, 2a - 2c. Enter here and on Form 760PY, Line 2.

| B Spouse <small>Filing Status 4 ONLY</small> | | A You <small>Include Spouse if Filing Status 2</small> | |
|--|----|--|----|
| 1 | 00 | | 00 |
| 2a | 00 | | 00 |
| 2b | 00 | | 00 |
| 2c | 00 | | 00 |
| 3 | 00 | | 00 |

Subtractions from Adjusted Gross Income

4. Income (interest, dividends or gains) received while a Virginia resident from obligations or securities of the U.S. exempt from state income tax, but not from federal tax.
5. Disability income received while a Virginia resident and reported as wages (or payments in lieu of wages) on your federal return. **If claiming this subtraction you cannot also claim Age Deduction.** Claim the one that benefits you most.
 - 5a Enter **YOUR** disability subtraction on Line 5a, Column A.
 - 5b Enter **SPOUSE'S** disability subtraction on Line 5b, Column B if claiming Filing Status 4 or Line 5b, Column A if claiming Filing Status 2.
6. Other subtractions as provided in instructions.
 - 6a Fixed date conformity subtraction.
 - 6b - 6d See Form 760PY Instructions for Other Subtraction Codes.

| | | | | | | | | | | | | |
|----------------------|--|--|--|--|--|--|--|--|--|------|--|--|
| Certification Number | | | | | | | | | | Code | | |
| 6b | | | | | | | | | | | | |
| 6c | | | | | | | | | | | | |
| 6d | | | | | | | | | | | | |
7. Total subtractions. Add Lines 4, 5a, 5b, and 6a - 6d. Enter here and on Form 760PY, Line 8.

| B Spouse | | A You | |
|-----------------|----|--------------|----|
| 4 | 00 | | 00 |
| 5a | | | 00 |
| 5b | 00 | | 00 |
| 6a | 00 | | 00 |
| 6b | 00 | | 00 |
| 6c | 00 | | 00 |
| 6d | 00 | | 00 |
| 7 | 00 | | 00 |

Deductions from Virginia Adjusted Gross Income

8. Deduction codes. See Form 760PY Instructions for Deduction Codes.

| | | | |
|------|--|--|--|
| Code | | | |
| 8a | | | |
| 8b | | | |
| 8c | | | |
9. Total Deductions. Add Lines 8a - 8c. Enter here and on 760PY, Line 14.

Use Schedule PY ADJS if you are claiming more additions, subtractions or deductions than the Schedule 760PY ADJ allows. Refer to the instructions for Other Codes.

Check this box.

| B Spouse | | A You | |
|-----------------|----|--------------|----|
| 8a | 00 | | 00 |
| 8b | 00 | | 00 |
| 8c | 00 | | 00 |
| 9 | 00 | | 00 |



| | |
|-----------|----------|
| Your Name | Your SSN |
|-----------|----------|

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

- List below the name, Social Security Number (SSN) and Guideline Income for you, your spouse and each dependent.
- If more room is needed, enclose a schedule with the name, SSN and Guideline Income for each additional dependent.
- Failure to complete Lines 10 - 17 may result in this credit being reduced or disallowed.

| Family VAGI | Name | Social Security Number (SSN) | Guideline Income |
|-------------|--|------------------------------|------------------|
| | You | - - | 00 |
| | Spouse | - - | 00 |
| | Dependent | - - | 00 |
| | Dependent | - - | 00 |
| 10. | Total Family Guideline Income (Be sure to include information from enclosed schedule, if applicable) | | 10 00 |
| 11. | Enter the total number of exemptions reported in the table above and on any enclosed schedule. Based on this total, the total Family Guideline Income from Line 10 and the poverty guidelines in the instructions, determine your eligibility..... | | 11 |
| 12. | If you qualify, enter the number of personal and dependent exemptions reported on your Form 760PY (see instructions)..... | | 12 |
| 13. | Multiply Line 12 by \$300. Enter the result on Line 13 and proceed to Line 14..... | | 13 00 |
| 14. | Enter the amount of Earned Income Credit claimed on your federal return. If you did not claim an Earned Income Credit on your federal return, enter \$0. If you are married filing separately, see the instructions. | | 14 00 |
| 15. | Multiply Line 14 by 20% (.20)..... | | 15 00 |
| 16. | Enter the greater of Line 13 or Line 15..... | | 16 00 |
| 17. | Compare the amount on Line 16 above to the amount of tax on Form 760PY, Line 18. Enter the lesser of the two amounts here and on Form 760PY, Line 23. This is your credit amount..... | | 17 00 |

Addition to Tax, Penalty and Interest

| | | | |
|-----|--|----|----|
| 18. | Addition to tax. Check if addition came from: <input type="checkbox"/> Form 760C <input type="checkbox"/> Form 760F..... | 18 | 00 |
| 19. | Penalty..... <input type="checkbox"/> Late Filing Penalty <input type="checkbox"/> Extension Penalty | 19 | 00 |
| 20. | Interest (accrued on the tax you owe)..... | 20 | 00 |
| 21. | Total Addition to Tax, Penalty and Interest (add Lines 18-20). Enter here and on Form 760PY, Line 32..... | 21 | 00 |

Health Care Coverage Contact Information

If you checked the box on the front of Form 760PY to authorize the sharing of information from this return with DMAS and have a preferred contact method, please provide the information below.

22. Indicate your preferred method of contact by checking the appropriate box below and providing your information.

| | | |
|----------------------------|-------|--|
| <input type="checkbox"/> | Email | Email address |
| <input type="checkbox"/> | Phone | Daytime number |
| <input type="checkbox"/> | Mail | Provide address if different from the information you provided on page one of your Virginia income tax return. |
| Number and Street | | |
| City, town, or post office | | State ZIP Code |