2009 Virginia Form 502

Department of Taxation P.O. Box 1500 Richmond, VA 23218-1500

Pass-Through Entity Return of Income and Return of Nonresident Withholding Tax



Check if: Initial return Name change Address change Change in fiscal year Ending Date Federal Employer ID Number Offical Use Only	(°
United Use Only	•
Entity Name	
Number and Chapt	
Number and Street	
Address continued	
City or Town, State and ZIP Code	`
Date of Formation Date Operations Began in Virginia State or Country Where Incorporated or Organized	
Entity Type (Enter Code - See instructions) NAICS Description of Business Activity	
Amended return Final return Unified nonresident return filed	
Electing large partnership Subject to bank franchise tax	
Subject to bank franchise tax	
Number And Types Of Owners	
Count all owners that were issued a federal Schedule K-1 for the taxable year and enter:	
a. The Total Number Of Owners (Include individuals and any other entity types)	
b. The Total Number Of Nonresident Owners (See Instructions)	
c. Total Amount Withheld for Nonresident Owners (Total of "line e" from all VK-1's with withholding amounts) c.	.00
d. If entity is exempt from withholding enter exemption code (see instructions)	
Distributive Or Pro Rata Income And Deductions	
See instructions.	
1. Total Of Taxable Income Amounts	
2. Total Of Deductions 2.	
3. Tax-exempt Interest Income	.00
Allocation And Apportionment	
4. Income Allocated To Virginia (From Schedule 502A, Part A, Line 2)	.00
5. Income Allocated Outside Of Virginia (From Schedule 502A, Part A, Line 3e)	
6. Apportionable Income (From Schedule 502A, Part A, Line 4)	
7. Virginia Apportionment Percentage (From Schedule 502 A, Part B or Part C or 100%)	<u>%</u>
Virginia Additions - See Schedule 502ADJ For Other Additions	
8. Fixed-date Conformity - Depreciation	
9. Fixed-date Conformity - Other	
10. Net Income Tax Or Other Tax Used As A Deduction In Determining Taxable Income (See Instructions)	
11. Interest On Municipal Or State Obligations Other Than From Virginia	
12. Total additions from attached Schedule 502 ADJ, Section A, line 5	
13. Total additions (Add lines 8-12)	.00
Virginia Subtractions - See Schedule 502ADJ For Other Subtractions	00.4
14. Fixed-date Conformity - Depreciation	.00

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Name _



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16.	Income From Obligations Of The United States	.00
17.	Total Subtractions from attached Schedule 502ADJ, Section B, line 5	.00
18.	Total Subtractions (Add lines 14-17)	.00
Vir	ginia Tax Credits And Related Information From Schedule 502ADJ	
19.	Total nonrefundable credits (From Section C, Line 26 from attached Schedule 502ADJ)	.00
20.	Total refundable credits (From Section C, line 32 from attached Schedule 502ADJ)	.00
Red	conciliation of Withholding, Penalties, Interest and Overpayment/Tax Due	
Sec	ction 1: Withholding Payment Reconciliation	
1.	Total withholding tax due for nonresident owners	.00
2.	Total withholding tax paid	.00
3.	Overpayment (If line 2 is greater than line 1, subtract line 1 from line 2)	.00
4.	Balance of tax due (If line 2 is less than line 1, subtract line 2 from line 1)	.00
Se	ction 2: Penalty and Interest Charges on Withholding Tax	
5.	Extension penalty (may apply if the difference between line 1 and line 2 is more than 10 percent of line 1)	.00
6	Late filing penalty (will apply if there is a balance due on line 4 and Form 502 is being filed more	.00
0.	than six months after the original due date)	.00
7.	Interest (may apply if there is a balance due on line 4)	.00
8.	Total penalty and interest charges due (add lines 5, 6, and 7)	.00
Sec	ction 3: Penalty for Late Filing of Form 502	
9.	If Form 502 is being filed more than six months after the original due date, or more than 30 days after the federal extended due date, enter \$1,200	.00
Sec	ction 4: Disposition of Overpayment	
10.	Net overpayment. Subtract lines 8 and 9 from line 3. If lines 8 and 9 exceed line 3, go to line 13 below	.00
11.	Amount of overpayment to be credited to 2010	
	Amount of overpayment to be refunded	
	ction 5: Total Payment Due With Form 502	
	Balance of tax due from line 4, or total of lines 8 and 9 less line 3, whichever is applicable	.00
14.	Penalty and interest charges on withholding tax from line 8 if not included on line 13	.00
	Late filing penalty from line 9 if not included on line 13	
	Total payment due (Add lines 13, 14, and 15)	
Вус	checking the box to the right, I (we) authorize the Department of Taxation to discuss this return with the undersigned prepare	er. → (
of m	ne undersigned owner and authorized representative of the pass-through entity for which this return is made, declare wided by law that this return (including any accompanying schedules, statements and attachments) has been examined by many knowledge and belief, a true, correct, and complete return, made in good faith, for the taxable year stated, pursuant to monwealth of Virginia. A preparer other than the authorized representative declares the same, and such declaration is base which he or she has any knowledge.	e and is, to the best the tax laws of the
(Sigi	nature and Phone Number of Owner or Authorized Representative) (Title)	(Date)
(Indi	ividual or Firm, Signature of Preparer, Phone Number, and Address)	(Date)
	Preparer's FEIN, PTIN or SSN Approved Vendor Code	e (