DRAFT FORM — NOT FOR FILING

This draft form has been updated to include the most recent changes effective for Tax Year 2025 Virginia returns. If legislative changes or issues arise, we will post a new version of this draft form.

Please continue to monitor <u>tax.virginia.gov/early-release-forms</u> for future drafts of this form. Once forms are final, we will post them on our website at <u>tax.virginia.gov/forms</u>.

WEB

2025 Schedule VACS Virginia Supplemental Contributions Schedule



			•				
Name(s) as shown on Virginia return					Γ	Social Security Number	
Ge	eneral Instru	ctions					
	this Schedule if yo additional Sched			nd to more	e than five Commonwea	Ith Savers (formerly Virginia529) accounts.	
contr For d	ributed to that proເ contributions to A	gram. For conti BLEnow, use	ibutions to Invest529®, Pre the ABLEnow account nu	epaid529 ^s mber. Co	[™] and CollegeWealth acontact your financial adv	name, account number and the amount accounts, use your program account number. visor to obtain the proper account number in more details. For more information, visit	
	Program Type	Codes:	1 = Invest529	;	3 = CollegeWealth	5 = ABLEnow	
			2 = Prepaid529		4 = CollegeAmerica or ABLEAmerica		
Ente	er the total contrib	ution amount	or all Commonwealth Sav	vers (forn	nerly Virginia529) accou	unts on Schedule VAC, Line 6.	
Sav	vings Prograi	n Informat	ion			Contribution Amount	
1.	Program Type	Beneficiary's Last Name					
						. 00	
	Account Number (For CollegeAmerica or ABLEAmerica, contact your financial advisor)				Routing Number (Required for CollegeAmerica or ABLEAmerica Only)		
2.	Program Type	Beneficiary's L	ast Name			. 00	
	Account Number (For CollegeAmeri	Account Number (For CollegeAmerica or ABLEAmerica, contact your financial advisor)			Routing Number (Required for CollegeAmerica or ABLEAmerica Only)		
3.	Program Type	Beneficiary's L	ast Name				
						. 00	
	Account Number (For CollegeAmeri	ca or ABLEAmeri	ca, contact your financial adviso	or)	Routing Number (Required for CollegeAme	erica or ABLEAmerica Only)	
4.	Program Type Beneficiary's Last Name				III .00		
	Account Number (For CollegeAmerica or ABLEAmerica, contact your financial advisor)				Routing Number (Required for CollegeAme	erica or ABLEAmerica Only)	
5.	Program Type Beneficiary's Last Name						
						. 00	
	Account Number (For CollegeAmerica or ABLEAmerica, contact your financial advisor)				Routing Number (Required for CollegeAme	erica or ABLEAmerica Only)	

6. Total Amount. Add the Contribution Amount from Lines 1 through 5 and enter the total here. Include this amount in the total reported on Schedule VAC.