WEB 2015 Schedule VAC

2601000 Rev. 08/15

Name(s) as shown on Virginia return

Your SSN

Contribution Amount

General Instructions

Complete Section I below to contribute all or part of your refund to one or more Virginia College Savings PlanSM (Virginia529SM) accounts. To contribute to other voluntary contribution organizations listed in the income tax instructions, complete Section II on page 2. Do not submit this form if you are filing an amended return.

Virginia Contributions Schedule

I - Virginia College Savings PlanSM (Virginia529SM) Contributions

For each contribution, provide the program type code (see codes below), beneficiary's last name, account number, and the amount contributed to that program. For contributions to Virginia529 inVESTSM, Virginia529 prePAIDSM, and CollegeWealth[®] accounts, use your Virginia529 account number. Contact your financial advisor to obtain the proper account number and routing number for a CollegeAmerica[®] account. See the instructions for more details. For information on Virginia529 visit www.Virginia529.com.

Program Type Codes:

- **1** = Virginia529 inVESTSM **2** = Virginia529 prePAIDSM
 - M **4** = Colle
- **3** = CollegeWealth[®] **4** = CollegeAmerica[®]

A Overpayment Balance Available

Enter the overpayment amount computed on your return less the amount credited to estimated tax for next year. The total contribution amount in Section B below may not exceed this amount.

B Savings Program Information

1.	Program Type	Beneficiary's Last Name		
				. 00
	Account Number (For College Amer	ica®, contact your financial advisor)	Routing Number (Required for CollegeAmerica [®] Only)	
2.	Program Type	Beneficiary's Last Name		
				. 00
	Account Number (For College Amer	ica®, contact your financial advisor)	Routing Number (Required for CollegeAmerica [®] Only)	
3.	Program Type	Beneficiary's Last Name		
				. 00
	Account Number (For College Amer	ica®, contact your financial advisor)	Routing Number (Required for CollegeAmerica [®] Only)	
4.	Program Type	Beneficiary's Last Name		
				. 00
	Account Number	·	Routing Number	
	(For College Amer	ica [®] , contact your financial advisor)	(Required for CollegeAmerica [®] Only)	
5.	Program Type	Beneficiary's Last Name		
				. 00
	Account Number	·	Routing Number	
	(For College Amer	ica®, contact your financial advisor)	(Required for CollegeAmerica [®] Only)	
6.	Total Amount. Enter the total contribution amount for all Virginia529 accounts here and on Form 760, Line 32; Form 760PY, Line 32; or Form 763, Line 32. If contributing			
	to more than 5 accounts, use the supplemental Schedule VACS and fill in this oval.			

2015 Schedule VAC Page 2 Virginia Contributions Schedule







II - Other Voluntary Contributions

Complete this section to contribute to one or more of the voluntary contribution organizations listed in the income tax instructions.

Α Overpayment balance available. Enter the overpayment amount computed on your return less the amount credited to estimated tax for next year and the amount of Virginia College Savings PlanSM contributions from Section I. The total of Lines 2 through 7 below may not exceed this amount. 1. Code **Contribution Amount** Voluntary Contributions to be made from your refund. В See instructions for a list of qualifying organizations and codes. 2. 3. 4. 5. 6. 7. Voluntary Contributions to be made from your refund or С tax payment. See instructions for details. 8. 9. 10. 11. 12. 13. Total Voluntary Contributions (add the contribution amounts on Lines D 2 through 13). Enter this amount here and on Line 33 of Form 760, 14. Line 33 of Form 760PY, or Line 33 of Form 763.