FORM 500X

□ Address Change □ Consolidated Return

□ Combined Return

☐ Capital Loss Carryback

2007 Amended Virginia Corporation Income Tax Return

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

	r
Federal Audit	**************************************
Coalfield Credit (laimed IMPORTANT: ATTACH A COPY OF FEDERAL FORM 1120X
or Formed	LICE FORM FOR NOLD FOR NET OPERATING LOCK CARRYDACKS

FOR TAX YEAR ENDING IN
>
(Enter month and year.)

Coalfield Credit Claimed or Earned USE FORM 500-NOLD FOR NET OPERATING LOSS CARRYBACKS MPORTANT: ATTACH A COPY OF FEDERAL FORM 1120X						
Name		Federal Employer Identification Number				
Number and Street			Virginia Corporation Account Number			
City or Town, State and ZIP			Office Use Only			
	Α.		В.	C.		
Part I - Income and Virginia Modifications Fill in applicable items and use Part II to explain any changes.		ally Or As See ist.)	Net Change (Increase or decrease; explain in Part II.)	Correct Amount		
1 Federal Taxable Income 1						
2 (a) Net Virginia Fixed Date Conformity Modifications (Depreciation) 2(a)						
(b) Net Virginia Fixed Date Conformity Modifications (Other) 2(b)						
(c) Taxable Addition for Interest and Intangible Expenses (Schedule 500AB) 2(c)						
(d) Other Net Virginia Modifications (Exclude Lines 2a,2b,2c) 2(d)						
3 Virginia Taxable Income [Total of Lines 1, 2(a), 2(b), 2(c) and 2(d)] 3						
4 (a) Income Of A Multistate Corporation Subject To Virginia Tax (Schedule 500A)			4(a)			
(b) Apportionment Factor From Schedule 500A, Line 2, 3, 4, 5 or 10 4(b)						
(c) Nonapportionable Investment Function Income 4(c)						
(d) Nonapportionable Investment Function Loss 4(d)						
5 Income Tax [6% of Line 3, Column C or Line 4(a)] 5						
6 Tax Credits: Total Nonrefundable Tax Credit Amount From Form 500CR (Attach Form 500CR.) 6						
7 Adjusted Tax: Line 5 Less Line 6 7						
8 Payment Credits: (a) Tax Paid On Original Return Or As Later Adjusted	Payment Credits: (a) Tax Paid On Original Return Or As Later Adjusted 8					
(b) Refundable Credit Claimed On Original Or As Later Adjusted 8(b)						
(c) Total Tax Paid And Refundable Credits [Line 8(a) plus Line 8(b)] 8(c)						
(d) Less: Previous Refunds 8(d)						
Total Payment Credits [Line 8(c) less 8(d)] 8						
9 If Line 7 Is Greater Than Line 8, Then Subtract Line 8 From Line 7 - This Is Your Tax Due 9						
10 If Line 8 Is Greater Than Line 7, Then Subtract Line 7 From Line 8 - This Is Your Refund 10						
11 Coalfield Employment Enhancement Tax Credit Earned		11				

I, the undersigned president, vice-president, treasurer, assistant treasurer, chief accounting officer, or other officer duly authorized to act, of the corporation for which this return is made, declare under the penalties provided by law that this return (including any accompanying schedules and statements) has been examined by me and is, to the best of my knowledge and belief, a true, correct, and complete return, made in good faith, for the taxable year stated, pursuant to the income tax laws of the Commonwealth of Virginia. If prepared by a person other than taxpayer, their declaration is based on all information of which they have any knowledge.

, , ,						
Signature of Officer	Phone Number	Title				
Individual or Firm, Signature of Preparer	Phone Number					
	Preparer's SSN or FEIN					
	Signature of Officer	Signature of Officer Phone Number Individual or Firm, Signature of Preparer Phone Number				