

**VERMONT****Corporate Income Tax
Affiliation Schedule****SCHEDULE
BA-410****REQUIRED FOR COMBINED AND CONSOLIDATED RETURNS.**
☐ Check here if any address below is an INTERNATIONAL address

Name of Principal Vermont Corporation

Federal ID Number

Federal ID Number <input type="text"/>	Affiliate's group type (Check ONE)			Vermont Consolidated Group <input type="checkbox"/>	Check if Nexus in VT <input type="checkbox"/>
	<input type="checkbox"/> Water's Edge Combined Group Member	<input type="checkbox"/> Excluded from VT Water's Edge Combined Group as nonunitary member	<input type="checkbox"/> Excluded Qualified Overseas Business Organization		

Affiliate Name

Mailing Address, Line 1

Mailing Address, Line 2

City or Town

State

Zip Code

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Continue on back, if necessary

Schedule BA-410

Rev. 10/12

Principal VT Corporation Name _____

Federal ID Number



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Attach additional pages, if necessary