



* 1 2 1 1 3 1 1 9 9 *

Nonresidents and Part-Year Residents Must Complete Parts I and II
Full-Year Residents with Adjustments Complete Part II only

Please PRINT in BLUE or BLACK INK

ATTACH TO FORM IN-111

Taxpayer's Last Name	First Name	Initial
----------------------	------------	---------

Taxpayer's Social Security Number

	-		-	
--	---	--	---	--

PART I. Enter figures as they appear on your federal return or recomputed federal return in Column A and list the VT portion in Column B. See instructions starting on page 12.

Dates of VT residency in 2012: From

Month	Day	Year
-------	-----	------

 to

Month	Day	Year
-------	-----	------

Name of state(s), Canadian province or country during non-VT residency

--

	A. Federal Amount \$	B. VT Portion \$				
INCOME						
1. Wages, salaries, tips, etc.	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00
	. 00					
	. 00					
2. Taxable interest	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00
	. 00					
	. 00					
3. Ordinary dividends	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00
	. 00					
	. 00					
4. Taxable refunds of state and local income taxes	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00
	. 00					
	. 00					
5. Alimony received	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00
	. 00					
	. 00					
6. Business income or loss <input type="checkbox"/> ← Check to indicate loss	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00
	. 00					
	. 00					
7. Capital gain or loss <input type="checkbox"/> ← Check to indicate loss	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00
	. 00					
	. 00					
8. Taxable IRA distributions	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00
	. 00					
	. 00					
9. Taxable pensions and annuities	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00
	. 00					
	. 00					
10. Partnerships/S Corporations, and LLCs <input type="checkbox"/> ← Check to indicate loss	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00
	. 00					
	. 00					
11. Rents, royalties, estates, trusts, etc. <input type="checkbox"/> ← Check to indicate loss	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00
	. 00					
	. 00					
12. Farm income or loss <input type="checkbox"/> ← Check to indicate loss	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00
	. 00					
	. 00					
13. Unemployment compensation	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00
	. 00					
	. 00					
14. Taxable social security	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00
	. 00					
	. 00					
15. Other: Specify _____ <input type="checkbox"/> ← Check to indicate loss (See instructions on page 13)	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00
	. 00					
	. 00					
16. TOTAL INCOME (Add Lines 1–15) <input type="checkbox"/> ← Check to indicate loss	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00	<table border="1"><tr><td> </td><td>. 00</td></tr></table>		. 00
	. 00					
	. 00					

Please be sure to print your name and Social Security number at the top of this page.

continued on back



* 1 2 1 1 3 1 2 9 9 *

Carried forward from

	Line 16A		Line 16B	
	A. Federal Amount \$		B. VT Portion \$	
17. IRA (1040-Line 32; 1040A-Line 17); Keogh/SEP/SIMPLE (1040- Line 28): Self _____ Spouse _____	17.	<input type="text"/> . 00	17.	<input type="text"/> . 00
18. Student Loan Interest (1040-Line 33; 1040A-Line 18)	18.	<input type="text"/> . 00	18.	<input type="text"/> . 00
19. Employee Deductions: Reservists, Performing Artists, Fee-basis Gov't Officials (1040-Line 24)	19.	<input type="text"/> . 00	19.	<input type="text"/> . 00
20. Self-Employment Deductions: Tax (1040-Line 27), and Health Insurance (1040-Line 29)	20.	<input type="text"/> . 00	20.	<input type="text"/> . 00
21. Health Savings Account (1040-Line 25)	21.	<input type="text"/> . 00	21.	<input type="text"/> . 00
22. Moving Expenses (1040-Line 26)	22.	<input type="text"/> . 00	22.	<input type="text"/> . 00
23. Penalty on Early Withdrawal of Savings (1040-Line 30)	23.	<input type="text"/> . 00	23.	<input type="text"/> . 00
24. Alimony Paid (1040-Line 31a)	24.	<input type="text"/> . 00	24.	<input type="text"/> . 00
25. Domestic Production Activities (1040-Line 35)	25.	<input type="text"/> . 00	25.	<input type="text"/> . 00
26. Educator Expenses (1040-Line 23; 1040A-Line 16), and Tuition & Fees (1040-Line 34; 1040A-Line 19)	26.	<input type="text"/> . 00	26.	<input type="text"/> . 00
27. Deductions not listed above but included on 1040-Line 36.	27.	<input type="text"/> . 00	27.	<input type="text"/> . 00
28. TOTAL ADJUSTMENTS (Add Lines 17 – 27)	28.	<input type="text"/> . 00	28.	<input type="text"/> . 00
29. Adjusted Gross Income (Subtract Line 28A from Line 16A)	<input type="checkbox"/>	← Check to indicate loss	29.	<input type="text"/> . 00
30. VT Portion of AGI (Subtract Line 28B from Line 16B)	<input type="checkbox"/>	← Check to indicate loss	30.	<input type="text"/> . 00
31. Non-VT Income (Subtract Line 30 from Line 29). Also enter on Part II, Line 33 below	<input type="checkbox"/>	← Check to indicate loss	31.	<input type="text"/> . 00

PART II. Adjustment for VT Exempt Income

32. Adjusted Gross Income If Part I completed, enter Line 29. Otherwise, enter amount from Form IN-111, Line 10.	<input type="checkbox"/>	← Check to indicate loss	32.	<input type="text"/> . 00
33. Non-VT Income (Line 31 above)	33.	<input type="text"/> . 00	(Full-year VT residents enter 0 on Line 33)	
Part-Year Residents: For Lines 34-40, enter only income included in Part I, Line 30				
34. Military pay. Number of months on active duty _____ (See instructions)	34.	<input type="text"/> . 00		
35. Federal Employment Opportunity income adjustment	35.	<input type="text"/> . 00		
36. Railroad Retirement income	36.	<input type="text"/> . 00		
37. VT State payments to a family for support of developmentally disabled person(s) (See instructions on page 13).	37.	<input type="text"/> . 00		
38. Americans with Disabilities Credit	38.	<input type="text"/> . 00		
39. Nonresident Commercial Film Income	39.	<input type="text"/> . 00		
40. Bond/note interest income from	40.	<input type="text"/> . 00		
<input type="checkbox"/> VSAC <input type="checkbox"/> Build America <input type="checkbox"/> VT Telecom Authority <input type="checkbox"/> VT Public Power Supply Authority				
41. Total (Add Lines 33-40)	<input type="checkbox"/>	← Check to indicate loss	41.	<input type="text"/> . 00
42. VT income (Subtract Line 41 from Line 32).	<input type="checkbox"/>	← Check to indicate loss	42.	<input type="text"/> . 00
43. INCOME ADJUSTMENT % (Divide Line 42 by Line 32). Also enter on Form IN-111, Line 21. (See instructions)			→ 43.	<input type="text"/> . <input type="text"/> %