

# Vermont Income Adjustment Calculations

## 2018 Schedule IN-113



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

Please PRINT in BLUE or BLACK INK  
INCLUDE WITH 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 Vermont portion in Column B. See instructions.

Dates of Vermont residency in 2018

From (MMDDYYYY):  To (MMDDYYYY):  Name of State(s), Canadian province or country during non-Vermont residency (use standard 2-character abbreviation)

	A. Federal Amount \$		B. Vermont Portion \$	
1. Wages, salaries, tips, etc. ....	1	.00	1	.00
2. Taxable interest. ....	2	.00	2	.00
3. Ordinary dividends ....	3	.00	3	.00
4. Taxable IRAs, pensions, and annuities ....	4	.00	4	.00
5. Taxable Social Security. ....	5	.00	5	.00
6. Taxable refunds of state and local income taxes ....	6	.00	6	.00
7. Alimony received. ....	7	.00	7	.00
8. Business income or loss ....	<input type="checkbox"/> ← Check to indicate loss	8	.00	<input type="checkbox"/> ← Check to indicate loss
9. Capital gain or loss ....	<input type="checkbox"/> ← Check to indicate loss	9	.00	<input type="checkbox"/> ← Check to indicate loss
10. Rents, royalties, partnerships, S corporations, trusts, etc. ....	<input type="checkbox"/> ← Check to indicate loss	10	.00	<input type="checkbox"/> ← Check to indicate loss
11. Farm income or loss ....	<input type="checkbox"/> ← Check to indicate loss	11	.00	<input type="checkbox"/> ← Check to indicate loss
12. Unemployment compensation. ....		12	.00	
13. Other: Specify ....	<input type="checkbox"/> ← Check to indicate loss	13	.00	<input type="checkbox"/> ← Check to indicate loss
14. TOTAL INCOME (Add Lines 1-13) . .	<input type="checkbox"/> ← Check to indicate loss	14	.00	<input type="checkbox"/> ← Check to indicate loss

Taxpayer's Last Name \_\_\_\_\_ Social Security Number \_\_\_\_\_



A. Federal Amount \$

B. Vermont Portion \$

	A. Federal Amount \$	B. Vermont Portion \$
15. IRA, Keogh/SEP/SIMPLE (Reported on federal Form 1040) . . . . . Self _____ Spouse _____	15 .00	15 .00
16. Student Loan Interest (Reported on Form 1040) . . . . .	16 .00	16 .00
17. Employee Deductions: Reservists, Performing Artists, Fee-basis Gov't Officials (Reported on Form 1040) . . . . .	17 .00	17 .00
18. Self-Employment Deductions: Tax and Health Insurance (Reported on Form 1040) . . . . .	18 .00	18 .00
19. Health Savings Account (Reported on Form 1040) . . . . .	19 .00	19 .00
20. Moving Expenses (Reported on Form 1040) . . . . .	20 .00	20 .00
21. Penalty on Early Withdrawal of Savings (Reported on Form 1040) . . . . .	21 .00	21 .00
22. Alimony Paid (Reported on Form 1040) . . . . .	22 .00	22 .00
23. Domestic Production Activities (Reported on Form 1040) . . . . .	23 .00	23 .00
24. Educator Expenses and Tuition & Fees (Reported on Form 1040) . . . . .	24 .00	24 .00
25. Deductions not listed above but reported on Form 1040 . . . . .	25 .00	25 .00
26. TOTAL ADJUSTMENTS (Add Lines 15-25) . . . . .	26 .00	26 .00
27. Adjusted Gross Income (Subtract Line 26A from Line 14A) . . . . .	← Check to indicate loss	27 .00
28. Vermont Portion of AGI (Subtract Line 26B from Line 14B) . . . . .	← Check to indicate loss	28 .00
29. Non-Vermont Income (Subtract Line 28 from Line 27) Also enter on Part II, Line 31 below . .	← Check to indicate loss	29 .00
<b>PART II. Adjustment for Vermont Exempt Income</b>		
30. Adjusted Gross Income. If Part I completed, enter Line 27 amount. Otherwise, enter amount from Form IN-111, Line 1 . . . . .	← Check to indicate loss	30 .00
31. Non-Vermont Income (Line 29 above) . . . . .	← Check to indicate loss	31 .00
32. Military pay. Number of months on active duty _____ (See instructions) .	32 .00	
33. Railroad Retirement income . . . . .	33 .00	
34. Bond/note interest income from . . . . .	34 .00	
<input type="checkbox"/> VSAC <input type="checkbox"/> Build America <input type="checkbox"/> Vermont Telecom Authority <input type="checkbox"/> Vermont Public Power Supply Authority		
35. Total (Add Lines 31-34) . . . . .	← Check to indicate loss	35 .00
36. Vermont Income (Subtract Line 35 from Line 30) . . . . .	← Check to indicate loss	36 .00
37. INCOME ADJUSTMENT % (Divide Line 36 by Line 30 out to the fourth decimal place) Also enter on Form IN-111, Line 15 (See instructions) . . . . .		37 %