



* 1 7 1 1 3 1 1 0 0 *

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 2017		Name of state(s), Canadian province or country during non-Vermont residency (use standard 2-character abbreviation)
From (MM DD YYYY)	To (MM DD YYYY)	

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

SCHEDULE IN-113 Income Adjustment

WHO MUST FILE IN-113

You must file Schedule IN-113 if you are either:

- a nonresident or part-year resident and had Vermont income,

OR

- a Vermont resident claiming income exempt from Vermont income tax

Nonresident: Complete both Parts I and II to determine the allocation of Vermont income. Visit our website for definition of nonresident income.

Resident: Complete Part II to adjust for the following income exempt from Vermont income tax: military pay, federal railroad retirement income, or bond/note income from qualified investments.

Part-Year Resident: Part-year residents may, in some cases, be able to adjust Vermont income by both the Vermont percentage of income and claim a credit for income tax paid to another tax jurisdiction. The income tax paid must be for income earned in Vermont while a Vermont resident. Visit our website for information.

For Married Filing Separately or Civil Union Filing Separately, all income of the individual filing must be included in Column A, not just Vermont income. The adjustment calculation excludes non-Vermont income.

Supporting Documents Required: Copies of pages 1 and 2 of the federal income tax return and any federal schedules reporting Vermont income or loss.

Dates of Vermont Residency in 2017 Enter the dates you lived in Vermont in 2017.

Name of State(s) During Non-Vermont Residency Write the names of the other states, Canadian provinces, or countries where you were a resident in 2017.

PART I (For Nonresidents and Some Part-Year Vermont Residents)

Unless otherwise indicated in the line instruction, the Vermont portion is the income received from Vermont or received while a Vermont resident.

Lines 1 - 15, Column A Enter the income for these categories as shown on your federal income tax return.

NOTE: For Line 3A - Use amount from federal Form 1040, Line 9a, or 1040A, Line 9a.

For Line 10A - Use amount from federal Schedule K-1 (Form 1065) *before* recalculation for exclusion of bonus depreciation.

For Line 13A - Use amount reported on federal income tax return.

For Line 15A - Use amounts from 1040, Lines 14 and 21.

Nonresidents: Use Line 15A to adjust for non-Vermont state and local obligations and U.S. obligation interest.

Line 15, Column A Examples of other income: gambling winnings including lotteries, raffles, or lump-sum payment from sale of right to receive future lottery annuity; reimbursement this year for items itemized last year such as medical expenses; interest; income from rental of personal property; taxable distributions from Coverdell Education Savings Account or Qualified Tuition Plan, medical savings account or Archer Medical Savings Account.

Lines 1 - 15, Column B Enter the Vermont portion for these categories from your federal income tax return.

NOTE: For Line 3B - Use the amount of ordinary dividends received while a Vermont resident.

For Line 7B - Include amount from Line 2 of Vermont Schedule K-1VT plus all additional Vermont-sourced capital gains.

For Line 10B - Use sum of Line 1 and Line 3 of Schedule K-1VT *before* recalculation for exclusion of bonus depreciation.

For Line 13B - Enter total amount received for Vermont unemployment.

For Line 15B - Use the amount of other income earned or received from Form 1040, Lines 14 and 21 from Vermont sources.

Nonresidents: Do not include tax-exempt interest here to adjust for non-Vermont state and local obligations and U.S. obligation interest.

Lines 17 - 25 Column A Enter the amount for these categories as shown on your federal income tax return.

Lines 17 - 25, Column B Enter the portion of the deductions paid or incurred during your Vermont residency or resulting from Vermont income earned or received.

Line 26, Column A Enter the combined amounts of Educator Expenses from Form 1040, Line 23, or 1040A, Line 16, and Tuition and Fees from Form 1040, Line 34, or 1040A, Line 19.

Line 26, Column B The Vermont portion of Educator Expenses and Tuition and Fees during Vermont residency.

Line 27, Column A Enter deduction(s) to adjusted gross income that are included in the total on federal Form 1040, Line 36.

Line 27, Column B Enter the portion of the deductions paid or incurred during your Vermont residency or resulting from Vermont income earned or received.

PART II Adjustment for Vermont Exempt Income

Line 32 If Part I is completed, enter the amount from Line 29. Otherwise, enter Adjusted Gross Income from Form IN-111, Line 10.

Line 33 **Part-Year Residents and Nonresidents:** Enter the amount from Part I, Line 31. **Full-Year Residents:** Enter -0-.

Line 34 Enter the amount of Vermont exempt military pay received in 2017 that is included in your federal adjusted gross income. Exempt military pay is:

- I.** Wages earned from the armed services for full-time active duty outside of Vermont. **You may be asked to provide the Required Supporting Documents:** Copy of active duty orders.
- II.** Up to \$2,000 for National Guard or U.S. Reserve training pay earned in Vermont if your adjusted gross income for tax year 2017 is less than \$50,000. **You may be asked to provide the Required Supporting Documents:** Copy of DFAS form or certification statement from unit that all training was completed during the calendar year.
- III.** Student loan repayment can be taken only if the amount is included in your adjusted gross income. Enter the repayment benefit made under 10 U.S.C. Chapters 109 and 1609 for **2017**. **You may be asked to provide the Required Supporting Documents:** Certification statement from armed services showing your name, address, Social Security Number, amount of student loan repayment, and payment date.

Line 35 Enter the amount you received in 2017 for Regular Railroad Retirement Benefits (Tier 1) and Supplemental Railroad Annuity Payments (Tier 2). This income is taxable at the federal level, but exempt from Vermont income tax. If you receive Social Security that includes Tier 1 or Tier 2 benefits, enter only the portion included in your federal adjusted gross income. **You may be asked to provide the Required Supporting Documents:** Copies of 1099, 1099RB, WP-4, or any other document you received showing payment of these benefits.

Line 36 The interest or income from a bond or note of: **(1)** Vermont Student Assistance Corporation, **(2)** Build America, **(3)** Vermont Telecommunications Authority, or **(4)** Vermont Public Power Supply Authority is exempt from Vermont income tax to the extent the interest or income is included in federal adjusted gross income. Enter the amount of interest or income from these sources that is also included in your federal adjusted gross income.

Line 37 Add Lines 33 through 36 and enter result. This is the total amount of income not subject to Vermont income tax. No entry is needed on this line if you did not have entries on Lines 33 through 36.

Line 38 Subtract Line 37 from Line 32. This is the Vermont income subject to tax.

Line 39 Divide Line 38 by Line 32. Also enter on Form IN-111, Line 21. Carry out to two decimal places. *Example:* XX.XX%

Dealing with negatives:

- If Line 32 or 33 is a negative, enter 100%
- If Line 38 is a negative, enter 0%
- If Lines 32 and 38 are negative, enter 0%

Taxpayer's Last Name	Social Security Number
----------------------	------------------------



* 1 7 1 1 3 1 2 0 0 *

Carried forward from

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

PART II. Adjustment for Vermont Exempt Income

VERMONT EXEMPT INCOME	32. Adjusted Gross Income If Part I completed, enter Line 29 amount. Otherwise, enter amount from Form IN-111, Line 10.	<input type="checkbox"/>	Check to indicate loss	32.	.00
	33. Non-Vermont Income (Line 31 above)	<input type="checkbox"/>	Check to indicate loss	33.	.00 (Full-year Vermont residents enter -0- on Line 33)
	Part-Year Residents: For Lines 34-36, enter only income included in Part I, Line 30				
	34. Military pay. Number of months on active duty _____ (See instructions)			34.	.00
	35. Railroad Retirement income			35.	.00
	36. Bond/note interest income from			36.	.00
	<input type="checkbox"/> VSAC <input type="checkbox"/> Build America <input type="checkbox"/> Vermont Telecom Authority <input type="checkbox"/> Vermont Public Power Supply Authority				
	37. Total (Add Lines 33-36)	<input type="checkbox"/>	Check to indicate loss	37.	.00
	38. Vermont income (Subtract Line 37 from Line 32)	<input type="checkbox"/>	Check to indicate loss	38.	.00
	39. INCOME ADJUSTMENT % (Divide Line 38 by Line 32). Also enter on Form IN-111, Line 21. (See instructions)			39.	. %