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2003 VT Income Tax Return FORM IN-111

CHECK HERE if Fiscal Year Filer from _____ to _____

1 Taxpayer's Social Security Number

Spouse or CU Partner Social Security Number

Taxpayer's Last Name

First Name Initial

Spouse or CU Partner Last Name

First Name Initial

Mailing Address (Number and Street/Road or PO Box)

City/Town State Zip Code

1 VT School District Code

2 City/Town of Legal Residence on 12/31/2003 State

Check here if this is an AMENDED return
Check if taxpayer died during 2003
Check if Spouse or CU Partner died during 2003

2 TAX FILING INFORMATION

FILING STATUS: 3 Single, 4 Head of Household, 5 Married Filing Jointly, 6 CU Partner Filing Jointly, 7a Married Filing Separately, 7b CU Partner Filing Separately, 8a Qualifying Widow(er), 8b (year Spouse or CU Partner died)

9. EXEMPTIONS CLAIMED (From Federal Form 1040-Line 6d; 1040A-Line 6d; 1040EZ/Telefile-enter 0, 1, or 2) 9.

10. ADJUSTED GROSS INCOME (From Federal Form 1040-Line 34; 1040A-Line 21; 1040EZ-Line 4; Telefile-Line I) 10. 00

3 TAXABLE INCOME

11. FEDERAL TAXABLE INCOME If the Federal amount is zero, see instructions on page 7. (From Federal Form 1040-Line 40; 1040A-Line 27; 1040EZ-Line 6; Telefile-Line K(1)) 11. 00

12. ADDITIONS TO FEDERAL TAXABLE INCOME Income from Non-VT State and Local Obligations (from Form IN-112, VT Schedule A, Part I, Line 3) 12. 00

13. FEDERAL TAXABLE INCOME WITH ADDITIONS (Add Lines 11 and 12) 13. 00

14. SUBTRACTIONS FROM FEDERAL TAXABLE INCOME 14a. Interest Income from U.S. Obligations 14a. 00

14b. 00 x 40% 14c. 00

Capital Gains (from Worksheet, Line M, page 8)

14d. Angel Venture Capital Gain Deferral (see instructions on page 8) 14d. 00

14e. TOTAL SUBTRACTIONS (Add Lines 14a, 14c, and 14d) 14e. 00

15. VT TAXABLE INCOME (Subtract Line 14e from Line 13) 15. 00

4 VT INCOME TAX

16. VT INCOME TAX FROM VT TAX TABLE OR TAX RATE SCHEDULE (on Line 15 amount) 16. 00

17. ADDITIONS TO VT INCOME TAX (from Form IN-112, VT Schedule A, Part II, Line 8) 17. 00

18. VT INCOME TAX WITH ADDITIONS (Add Lines 16 & 17) 18. 00

19. SUBTRACTIONS FROM VT INCOME TAX (from Form IN-112, VT Schedule A, Part II, Line 15) 19. 00

20. VT INCOME TAX (Subtract Line 19 from Line 18) but cannot be less than zero 20. 00

21. INCOME ADJUSTMENT (from Form IN-113, Line 40 OR 100.00%) 21. %

22. ADJUSTED VT INCOME TAX (Multiply Line 20 by Line 21) 22. 00

Staple W-2/1099's here



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5 CREDITS AND USE TAX

23. . 00 + 24. . 00 = 25. . 00
CREDIT FOR INCOME TAX PAID TO OTHER STATE OR PROVINCE (From Form IN-112, VT Schedule B, Line 6) **VT TAX CREDITS** (From Form IN-112, VT Schedule D, Line 17) **TOTAL VT CREDITS** (Add Lines 23 and 24)

26. . 00
VT INCOME TAX AFTER CREDITS (Subtract Line 25 from Line 22, but not less than zero)

27. . 00
USE TAX (See page 8 for instructions and chart)

28. . 00
TOTAL VT TAXES (Add Lines 26 and 27)

6 VOLUNTARY CONTRIBUTIONS

Nongame Wildlife Fund Children's Trust Fund Vermont Campaign Fund

29a. . 00 + 29b. . 00 + 29c. . 00 = 29d. . 00

30. . 00
TOTAL OF VT TAXES & CONTRIBUTIONS (Add Line 28 and Line 29d)

7 PAYMENTS AND CREDITS

31a. . 00
VT Tax Withheld (attach state copy of W-2, 1099, etc.)

31b. . 00
2003 Estimated Tax or Extension Payments

31c. . 00
Earned Income Tax Credit (from Form IN-112, VT Schedule C)

31d. . 00
Homeowner Rebate (from Form HS-139, Line 21)

31e. . 00
Renter Rebate (from Form PR-141, Line 9)

31f. . 00
VT Real Estate Withholding (See Instructions on page 9)

31g. . 00
Business Entity Payments for Nonresident Partner, Member, or Shareholder (from VT Form WH-435)

31h. . 00
Low Income Child & Dependent Care Credit (See Instructions on page 9)

31i. . 00
TOTAL PAYMENTS AND CREDITS (Add Lines 31a through 31h)

8 REFUND

32. . 00
OVERPAYMENT If Line 30 is less than Line 31i, subtract Line 30 from Line 31i

33. . 00
LINE 32 AMOUNT CREDITED TO 2004 ESTIMATED TAX PAYMENT
Amounts on 31d & 31e cannot be used for 2004 estimated tax payments.

34. . 00
REFUND AMOUNT (Subtract Line 33 from Line 32)

9 AMOUNT YOU OWE

35. . 00
If Line 30 is more than Line 31i, subtract Line 31i from Line 30. If \$500 or more, see page 5.

36. . 00 **Interest and Penalty on Underpayment of Estimated Tax** (Worksheet IN-152)

37. . 00
Add Lines 35 and 36

For amended returns only Original refund received _____ Refund due now _____ Original payment _____ Amount due now _____

10 SIGN HERE Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct and complete. Preparers cannot use return information for purposes other than preparing returns.

Keep a copy for your records.	Signature	Date	Occupation	Check if age 65 or older	Telephone Number (optional)
	Signature. If a joint return, BOTH must sign.	Date	Occupation		

Check here if authorizing the VT Department of Taxes to discuss this return and attachments with your preparer.

Preparer's Use Only

Preparer's signature	Date	Check if self-employed	Preparer's SSN or PTIN
Firm's name (or yours if self-employed) and address			EIN
			Preparer's Telephone Number