



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

PRINT in BLUE or BLACK INK

ATTACH TO FORM IN-111

Form with fields for Taxpayer's Last Name, First Name, and Initial.

Form with fields for Taxpayer's Social Security Number.

SCHEDULE I. Enter figures as they appear on your federal return in Column A and list the VT portion in Column B. See instructions.

ATTACH COPY OF FEDERAL RETURN

Table with 3 columns: Description, A. Federal Amount \$, and B. VT Portion \$. Rows include Wages, salaries, tips, etc.; Taxable Interest; Ordinary Dividends; Taxable refunds of state and local income taxes; Alimony received; Business income or loss; Capital gain or loss; Taxable IRA distributions; Taxable pensions and annuities; Partnerships/S Corporations & LLCs; Rents, royalties, estates, trusts, etc.; Farm income or loss; Unemployment compensation; Taxable social security; Other: Specify; and TOTAL INCOME.

Be sure to put your name and Social Security number at the top of this page. Attach copies of pages 1 and 2 of your federal tax return and these adjustment schedules to your Vermont return.



* 0 3 1 1 3 1 2 9 9 *

Carried forward from

Line 16A

Line 16B

A. Federal Amount \$

B. VT Portion \$

ADJUSTMENTS TO INCOME

17. IRA/Keogh/SEP/SIMPLE deduction:							
Self _____							
Spouse _____	17.						00
18. Federal Education Deductions (Form 1040, Lines 23, 25, & 26 OR Form 1040A, Lines 16, 18, & 19) . . .	18.						00
19. Medical Savings Account Deduction	19.						00
20. Deduction for Self-Employment Tax	20.						00
21. Self-Employment Health Insurance Deduction	21.						00
22. Moving Expenses	22.						00
23. Penalty on Early Withdrawal of Savings	23.						00
24. Alimony Paid	24.						00
25. TOTAL ADJUSTMENTS (Add Lines 17 - 24)	25.						00
26. Adjusted Gross Income (Subtract Line 25A from Line 16A)							00
27. VT Portion of AGI (Subtract Line 25B from Line 16B)							00
28. Non-VT Income (Subtract Line 27 from Line 26. Enter result here and on Schedule II, Line 30 below) . .							00

Dates of VT residency in 2003: From _____ to _____

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

SCHEDULE II. Adjustment for VT Exempt Income

VT EXEMPT INCOME

29. Adjusted Gross Income If Schedule I completed, enter Line 26. Otherwise, enter Line 10 from IN-111 Section 2.							00
30. Non-Vermont Income (Enter amount from Line 28 above)	30.						00
<i>(Part-Year Residents: For Lines 31-37, enter only income included in Line 27, Schedule I)</i>							
31. Military pay. Number of months on active duty ____ (See Instructions) .	31.						00
32. Lottery prizes from Vermont state-run lottery	32.						00
33. Federal Employment Opportunity income adjustment	33.						00
34. Railroad Retirement income	34.						00
35. VT State payments for support of developmentally disabled person(s) .	35.						00
36. Americans with Disabilities Credit	36.						00
37. Nonresident Commercial Film Income	37.						00
38. Total (Add Lines 30-37)	38.						00
39. VT income (Subtract Line 38 from Line 29)	39.						00
40. INCOME ADJUSTMENT % (Divide Line 39 by Line 29) Enter here and on Form IN-111, Section 4, Line 21. See instructions.	40.						%