

2020 Schedule IN-113



Vermont Income Adjustment Calculations

Please PRINT in BLUE or BLACK INK

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

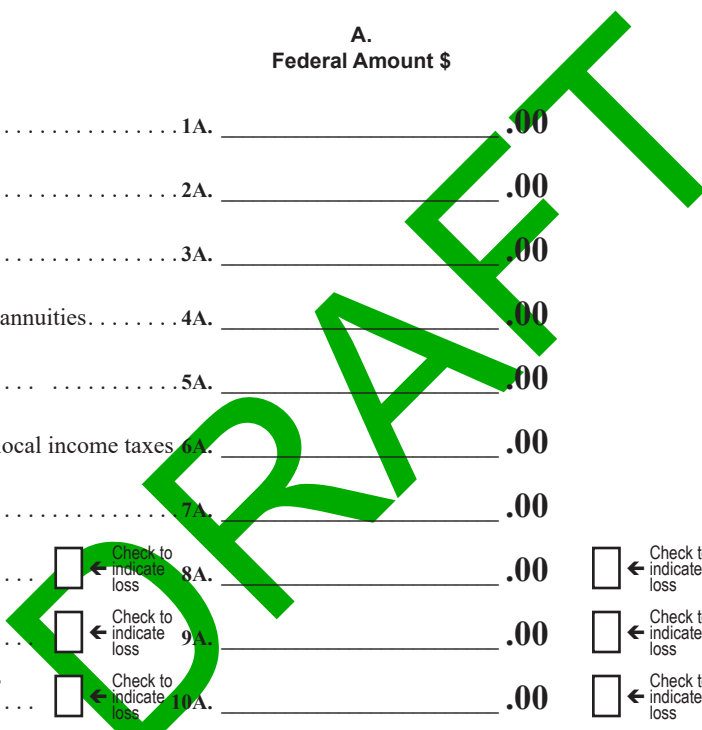
INCLUDE WITH FORM IN-111

Taxpayer's Last Name	First Name	MI	Taxpayer's Social Security Number
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**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 2020		Name of State(s), Canadian province, or country during non-Vermont residency (use standard 2-character abbreviation)
From (MMDDYYYY): / /	To (MMDDYYYY): / /	

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



Taxpayer's Last Name	Social Security Number
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	Column A. Federal Amount \$	Column B. Vermont Portion \$
15. IRA, Keogh/SEP/SIMPLE (Reported on federal Form 1040) . . . . . 15A. _____	.00	15B. _____ .00
Self _____ Spouse _____		
16. Student Loan Interest (Reported on Form 1040) . . . . . 16A. _____	.00	16B. _____ .00
17. Employee Deductions: Reservists, Performing Artists, Fee-basis Gov't Officials (Reported on Form 1040) . . . . . 17A. _____	.00	17B. _____ .00
18. Self-Employment Deductions: Tax and Health Insurance (Reported on Form 1040) . . 18A. _____	.00	18B. _____ .00
19. Health Savings Account (Reported on Form 1040) . . . . . 19A. _____	.00	19B. _____ .00
20. Moving Expenses (Reported on Form 1040) . 20A. _____	.00	20B. _____ .00
21. Penalty on Early Withdrawal of Savings (Reported on Form 1040) . . . . . 21A. _____	.00	21B. _____ .00
22. Alimony Paid (Reported on Form 1040) . . . 22A. _____	.00	22B. _____ .00
23. Domestic Production Activities (Reported on Form 1040) . . . . . 23A. _____	.00	23B. _____ .00
24. Educator Expenses and Tuition & Fees (Reported on Form 1040) . . . . . 24A. _____	.00	24B. _____ .00
25. Deductions not listed above but reported on Form 1040 . . . . . 25A. _____	.00	25B. _____ .00
26. <b>TOTAL ADJUSTMENTS</b> (Add Lines 15-25) . . . . . 26A. _____	.00	26B. _____ .00
27. Adjusted Gross Income (Subtract Line 26A from Line 14A) . . . . . <input type="checkbox"/> ← Check to indicate loss		27. _____ .00
28. Vermont Portion of AGI (Subtract Line 26B from Line 14B) . . . . . <input type="checkbox"/> ← Check to indicate loss		28. _____ .00
29. Non-Vermont Income (Subtract Line 28 from Line 27) Also enter on Part II, Line 31 below. . . . . <input type="checkbox"/> ← Check to indicate loss		29. _____ .00

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**PART II. Adjustment for Vermont Exempt Income and Military Exempt Income**

30. Adjusted Gross Income. If Part I completed, enter Line 27 amount. Otherwise, enter amount from Form IN-111, Line 1 . . . . . <input type="checkbox"/> ← Check to indicate loss		30. _____ .00
31. Non-Vermont Income (Line 29 above) . . . . . <input type="checkbox"/> ← Check to indicate loss	.00	31. _____ .00
32. Military pay. Number of months on active duty _____ (See instructions) . . . . . 32. _____	.00	
33. Total (Add Lines 31 and 32) . . . . . <input type="checkbox"/> ← Check to indicate loss		33. _____ .00
34. Vermont Income (Subtract Line 33 from Line 30) . . . . . <input type="checkbox"/> ← Check to indicate loss		34. _____ .00
35. <b>INCOME ADJUSTMENT %</b> (Divide Line 34 by Line 30 out to the fourth decimal place) Also enter on Form IN-111, Line 15 (See instructions) . . . . . 35. _____ %		