

2021 Form IN-111

Vermont Income Tax Return

DEPT USE ONLY



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FILE YOUR RETURN ELECTRONICALLY FOR A FASTER REFUND. GO TO TAX.VERMONT.GOV FOR MORE INFORMATION.

Please PRINT in BLUE or BLACK INK

Form with fields for Taxpayer's Last Name, First Name, MI, Social Security Number, Spouse's/CU Partner's Last Name, First Name, MI, Social Security Number, Mailing Address, City, State, ZIP Code, Foreign Country, Vermont School District Code, Enter Healthcare Coverage Code, Check all that apply, AMENDED Return, RECOMPUTED Return, EXTENDED Return, Filing Status and Standard Deduction.

1. Federal Adjusted Gross Income (federal Form 1040, Line 11) 1. _____ .00
2. Net Modifications to Federal AGI (Schedule IN-112, Part I, Line 17) 2. _____ .00
3. Federal AGI with Modifications (ADD Lines 1 and 2) 3. _____ .00
4. 2021 Vermont Standard Deduction from filing status section above. 4. _____ .00
5. Personal Exemptions:
5a. Enter "1" for yourself if no one can claim you as a dependent 5a. _____
5b. Enter "1" for your jointly filed spouse or CU partner if no one can claim them as a dependent or if you are a qualifying widow(er) 5b. _____
5c. Enter number of other dependents claimed on federal Form 1040. This includes any dependents other than yourself and/or your spouse. 5c. _____
5d. ADD Lines 5a through 5c 5d. _____
5e. MULTIPLY Line 5d by \$4,350 (2021 Personal Exemption) 5e. _____ .00
6. ADD Lines 4 and 5e 6. _____ .00
7. Vermont Taxable Income (SUBTRACT Line 6 from Line 3. If less than zero, enter -0-) 7. _____ .00
8. Vermont Income Tax from tax table or tax rate schedule (If Line 1 is greater than \$150,000, see instructions) 8. _____ .00
9. Net Adjustment to Vermont Tax (Schedule IN-119, Part I, Line 16) 9. _____ .00
10. Vermont Income Tax with Adjustment (ADD Lines 8 and 9. If less than zero, enter -0-) 10. _____ .00
11. Tax-Deductible Charitable Contribution (See instructions) 11. _____ .00
12. Multiply Line 11 by 5% (0.05) 12. _____ .00
13. Charitable Contribution Deduction (Enter the lesser of Line 12 or \$1,000) 13. _____ .00
14. Vermont Income Tax (Line 10 MINUS Line 13. If less than zero, enter -0-) 14. _____ .00
15. Income Adjustment (Schedule IN-113, Line 36, or 100.0000%) 15. _____ %
16. Adjusted Vermont Income Tax (MULTIPLY Line 14 by Line 15) 16. _____ .00

Taxpayer's Last Name	Social Security Number



Amount from Line 16 **.00**

Other State Credit (Schedule IN-117, Line 21) **.00** + Vermont Tax Credits (Schedule IN-119, Part II) **.00** = Total Vermont Credits (Add Lines 17 and 18) **.00**

17. **.00** + 18. **.00** = 19. **.00**

20. Vermont Income Tax after credits (SUBTRACT Line 19 from Line 16. If Line 19 is greater than Line 16, enter -0-). 20. **.00**

21. Use Tax for taxable items on which no sales tax was charged, including online purchases. (See instructions, worksheet, and chart). . . Check to certify no Use Tax is due. **OR** 21. **.00**

22. Total Vermont Taxes (ADD Lines 20 and 21) 22. **.00**

Vermont Veterans Fund Green Up Vermont Nongame Wildlife Fund Children's Trust Fund Total Contributions

23a. **.00** + 23b. **.00** + 23c. **.00** + 23d. **.00** = 23e. **.00**

24. Total of Vermont Taxes and Voluntary Contributions (ADD Lines 22 and 23e) 24. **.00**

25a. 2021 Vermont Tax Withheld from W-2, 1099 25a. **.00**

25b. 2021 Estimated Tax payments, amount carried forward from 2020, and/or payment made with 2021 extension. 25b. **.00**

25c. Refundable Credits (Schedule IN-112, Part II, Line 11) 25c. **.00**

25d. 2021 Vermont Real Estate Withholding from Form RW-171 25d. **.00**

25e. 2021 Nonresident Estimated Tax payments (nonresident withholding) allocated on Schedule K-1VT, Line 5 25e. **.00**

25f. Total Payments and Credits (ADD Lines 25a through 25e) 25f. **.00**

26. Overpayment. If Line 24 is less than Line 25f, SUBTRACT Line 24 from Line 25f 26. **.00**

27a. Refund to be credited to 2022 Estimated Tax Payment 27a. **.00**

27b. Refund to be credited to 2022 Property Tax Bill 27b. **.00**

28. REFUND AMOUNT (SUBTRACT Lines 27a and 27b from Line 26) 28. **.00**

29. If Line 24 is more than Line 25f, subtract Line 25f from Line 24. See instructions on tax due 29. **.00**

30. Interest and Penalty on Underpayment of Estimated Tax. . 30. **.00** 31. AMOUNT DUE (ADD Lines 29 and 30) 31. **.00**
(Worksheet IN-152 or IN-152A)

For Amended Returns Only:	Original refund received .00	Refund due now .00	Original payment .00	Amount due now .00
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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.

Signature	Date (MM/DD/YYYY)	Date of Birth (MM/DD/YYYY) / /	Daytime Telephone Number
Signature (If a joint return, BOTH must sign.)	Date (MM/DD/YYYY)	Date of Birth (MM/DD/YYYY) / /	Daytime Telephone Number
Paid Preparer's Signature		Date / /	Preparer's Telephone Number
Firm's Name (or yours if self-employed) and address		Preparer's SSN or PTIN	FEIN

Check if the Department of Taxes may discuss this return with the preparer shown.
5454

Keep a copy for your records.