SCHEDULE BI-473 Instructions Composite Schedule

Please print in BLUE or BLACK ink only.

Do not complete this form if all shareholders are VT residents, or if owners are maintaining pass-through tax treatment for Vermont income tax.

General Information

Form BI-473 is used to determine the amount of Vermont-sourced income and related tax due for business income tax filers who have elected or are required to file a composite return.

An entity may elect to file a composite return on behalf of its non-Vermont-resident owners, calculating and paying tax at the entity level. Owners are thereby relieved of their obligation to file their own Vermont income tax return, provided they have no other income or activity in Vermont.

Entities with more than 50 non-Vermont-resident owners are required to file composite returns.

All non-Vermont-resident owners and their income must be included in the composite return. "Partial composite" returns are not allowed.

See 32 V.S.A. § 5914 and § 5920 for more information.

Line-by-Line Instructions

Vermont has to design forms and schedules prior to IRS publication of forms. Please review the line description as well as references to federal form line numbers, as line numbers may differ from those referenced. In the event of conflict, use the line descriptions.

Header Information Enter the name of the Principal Vermont Corporation and its Federal Employer Identification Number (FEIN). For each of the following (as applicable) enter an "X" in the box left of the line number to indicate a negative (or loss) amount **NOTE:** For Lines 1-6, include only items of income or loss that are part of the **apportionable** income base. Do not include items of income or loss that are directly allocated to Vermont or elsewhere. Income/loss allocated directly to Vermont will be reported on Lines 10-13. (For information regarding apportioned vs. allocated income, see Reg. § 1.5833.) Line 1 Ordinary Business Income: Enter the amount from Federal Form 1120S, Line 21, or Federal From 1065, Line 22, as applicable. Line 2 Net Real Estate Income: Enter the amount from Federal Form 1120S, Schedule K, Line 2, or Federal From 1065, Schedule K, Line 2, as applicable. Line 3 Other Net Rental Income: Enter the amount from Federal Form 1120S, Schedule K, Line 3, or Federal From 1065, Schedule K, Line 3, as applicable. Line 4 Guaranteed Payments (Partnerships only): If this entity is a partnership, enter the amount from Federal Form 1065 Line 10/Schedule K, Line 4. Line 5 Section 179 Deduction: Enter the amount from Federal Form 1120S, Schedule K, Line 11, or Federal From 1065, Schedule K, Line 12, as applicable. Line 6 **Deduction for Charitable Contributions:** Enter the amount from Federal Form 1120S, Schedule K, Line 12a, or Federal From 1065, Schedule K, Line 13a, as applicable.

Line 7	Apportionable income: Add Lines 1-4, then subtract Lines 5 & 6.
Line 8	Apportionment percentage: Enter the amount from BA-402, Line 22, or 100%. Express as a percentage with 6 digits to the right of the decimal.
Line 9	Business Income apportioned to Vermont: Multiply Line 7 by Line 8.
Line 10	Income directly allocable to Vermont generated by this entity: Enter the amount of income directly allocable to Vermont generated by this entity - for example, capital gain on real estate and physical assets located in Vermont, royalties on property located in Vermont, etc.
	Composite income deduction: Also, if (1) this entity is a shareholder, partner, or member of a different pass-through business, and (2) that business filed a composite return and paid tax on income that flows through to this business, but (3) this business is required to file an income tax return due to other Vermont income or activity, then: in order to avoid double taxation of the composite-taxed income, use this line to deduct the income upon which composite tax was paid. Enter as a negative number. Include a statement with the name(s), FEIN(s), and amount(s) of income and tax paid on this company's behalf.
Line 11	Vermont business income distributed to this entity by a different entity via Schedule K-1VT: Enter the amount of Vermont business income distributed to this entity by a different entity via Schedule K-1VT. Include a statement with the name(s), FEIN(s), and amount(s).
Line 12	Vermont sourced capital gain distributed to this entity by a different entity via Schedule K-1VT: Enter the amount of Vermont sourced capital gain distributed to this entity by a different entity via Schedule K-1VT. Include a statement with the name(s), FEIN(s), and amount(s).
Line 13	Other Vermont sourced income distributed to this entity by a different entity via Schedule K-1VT: Enter the amount of other Vermont sourced income distributed to this entity by a different entity via Schedule K-1VT. Include a statement with the name(s), FEIN(s), and amount(s).
Line 14	Total Vermont Net Income: Add Lines 9-13.
Line 15	Percentage of income from Line 13 passed through to nonresidents: Enter the percent of VT-source income or loss passed through to non-Vermont-resident shareholders, partners, or members. "Various" is not a valid entry. While the proportion of ownership may have changed over the year, an exact amount of income would have been reported to nonresidents. You may need to "back into" this number from Line 15. Express as a percentage with 6 digits to the right of the decimal.
	See also Line 16 Note.

Line 16 Total nonresident income: Multiply Line 13 by Line 14.

NOTE: If any owners are exempt entities not subject to income taxation, or if some or all of the income is exempt from taxation (such as an ESOP or nonprofit to which this income is not characterized as unrelated business income), exclude the amount of income from Line 16. Provide a statement of the name(s), FEIN(s), percentage(s) and amount(s) of income, and description of why or authority by which they are exempt from income taxation.

Vermont Net Operating Loss: If Line 16 is negative, you have incurred a Vermont Net Operating Loss (VNOL), available to carry forward to offset Vermont net taxable composite income for up to 10 years. Include a statement/schedule to track the availability of the VNOL. The schedule must detail loss years, utilization years, expiration years, and available carryover.

For business income tax, VNOL applies only to income attributable to non-Vermont-Residents who are part of a composite return - i.e., the composite tax. For Vermont residents, or nonresidents who are maintaining pass-through tax treatment, any net operating loss would be applied according to the facts and rules of their income tax return.

Vermont Net Operating Loss may not be carried back to a prior year return. VNOL remains available to carry forward even if the company/owners have elected to carry back the operating loss for federal purposes.

Line 17 Vermont net operating loss deduction applied: Starting with 2014, composite business income tax filers may calculate and utilize a Vermont net operating loss, parallel to corporate income tax filers. Enter any deduction taken for a Vermont net operating loss (VNOL). VNOL would have been incurred as a negative amount after apportionment and allocation of VT composite income in 2014 or later. Provide a schedule detailing the origin and utilization of the VNOL.

Line 17 cannot be greater than Line 16; VNOL cannot reduce Vermont net taxable composite income below \$0.

Line 18 Vermont taxable composite income: Subtract Line 17 from Line 16. This is the basis amount for required quarterly estimated payments for non-residents. The current rate is 6.8%. If total Form WH-435 payments (including "catch-up" payments) are less than 6.8% of the amount on Line 15, the company will be subject to assessment for the underpayment, interest, and penalty.

Line 19 Composite Tax: Multiply Line 18 by the composite tax rate, currently 7.8%. If negative, enter 0.

Line 20 Tax credits available for composite shareholders/partners/members: Attach Forms BA-404 and BA-406. Enter the amount from Form BA-404, Line 15. Note: Tax Credits may not reduce your tax liability to less than the minimum tax.

Line 21 Net Vermont Composite Tax due: Subtract Line 20 from Line 19. Enter this amount on BI-471, Line 3.