



VT Schedule BA-406	CREDIT ALLOCATION SCHEDULE
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**Attach to Form BI-471
 or Form BI-476**

PRINT in BLUE or BLACK INK

Entity Name (same as on Form BI-471 or Form BI-476)	Fiscal Year Ending (YYYYMMDD)	Federal ID Number
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Individual Last Name (Shareholder, Partner, or Member)	First Name	Initial	Social Security Number
OR Entity Name (Shareholder, Partner, or Member)			OR Federal ID Number

Entity TYPE. Enter I, C, S, L, P, or T (see instructions)

Name of Credit	Amount earned in current year
1. Total EATI Credits	1. NOT AVAILABLE
2. Research and Development	2. _____
3. Charitable Housing	3. _____
4. Affordable Housing	4. _____
5. Qualified Sale of Mobile Home Park	5. _____
6. Vermont Entrepreneur's Seed Capital Fund	6. _____
7. Code Improvement	7. _____
8. Historic Rehabilitation	8. _____
9. Facade Improvement	9. _____
10. Investment Tax Credit	10. _____
11. Business Solar Energy	11. NOT AVAILABLE
12. Machinery and Equipment	12. NOT AVAILABLE
13. Total credits for this shareholder, partner, or member (Add Lines 1 through 12)	13. _____