2016 VERMONT

**Income Tax Return** 

FORM IN-111

DEF 1 OOL ONE!	DEPT	USE	ONL	Y.
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						<u> </u>					
1		payer's Last Name MBERT	First Name  JAMES	! !				Taxpayer's Social Security Number			
		use's or CU Partner's Last Na	First Name					Spouse's or CU Partner's Social Security Number			
Taxpayer Information	Mai	ling Address (Number and St	Taxpayer's Driver's License Number Sta								
er Info	City				State	ZIP Code	·····		Spouse's/CU's Driver's License Numb	VT per State	
храу	ļ	Check here if this is	Chast	k if taxpayer	VT	0544 Check if Spous			Check here if using RECOMP	PUTED	
Ţ	L	an AMENDED return	died o	during 2016		Partner died du	ring 201		Federal Return information	OIED	
	I. '	VT School District Code 2.	911 street add	ress on 12/31/20	)16 - Nun	iber, street/road	ı name (I	o not use	e "PO Box", "same", or Town name)		
2	F-71	FILING S	STATUS					Fnte	er Spouse or		
mation	3. Sin	gle 4. Head of 5. Married	6. CU Partner	7. Qualifying		8a. Married	<b>∐</b> <b>8b</b> . CU		Partner full name		
g Infor	5	Household Filing Jointly	Filing Jointly	Widow(er) with dependent chi		Filing Separately	Filing Separate		er Spouse or CU Partner ial Security Number		
Tax Filing Information	9.	•	ral Form 1040–	•		1040EZ/1040I	NR-EZ-e	enter 0, 1,	or 2)	90	
3	10.	Adjusted Gross Income (Fede	ral Form 1040-I	Line 37; 1040A-l	Line 21; 10	)40EZ-Line 4).		← indic loss	i 10.	0.00	
	11.	Federal Taxable Income (F 1040EZ-Line 6) If the Feder				•		Che ← indic loss	eck to cate	0.00	
	ADD	TIONS: 12a. Income from Non-Ver	mont State and	d Local Obligat	tions (Sch	edule IN-112, I	Part I, Lin	ne 3)	12a.	0.00	
		12b. Bonus Depreciation A	llowed under l	Federal law for	2016				12b	0.00	
_		12c. Addback of State and	Local Income	Taxes (Schedu	le IN-155	, Line 8)		■ If no	regative ack 12c.	0.00	
Taxable Income									12d.	0.00	
		13. Federal Taxable Incom	e with Addition	s (Add Lines 11,	12a, 12b,	12c, and 12d)		Che ← indic loss	eck to cate 13	0.00	
	SUB	TRACTIONS: 14a. Interest Income from								0.00	
		14b. Capital Gains Exclusi								0.00	
		14c. Adjustment for Prior	Years' Bonus	Depreciation.					. 14c.	0.00	
		14d. Add Lines 14a, 14b, an		_						0.00	
	15.	Vermont Taxable Income			is more than Line 13, enter -0)					0.00	
4	16.	Vermont Income Tax from	<del></del>			<del></del>				0.00	
	17.	(If Line 10 is greater than \$1	50,000, see inst	tructions)					17.	0.00	
×	18.	Vermont Income Tax with		0.00							
VT Income Tax	19.	Subtractions from Vermon	(Schedule IN-1	12, Part II	, Line 15)			19	0.00		
7 7	20.	Vermont Income Tax (Subt	tract Line 19 fro	om Line 18. If l	Line 19 is	e 18, ente	er -0-)	20.	0.00		
	21.	Income Adjustment (Sched	ule IN-113, Lir	ne 39 OR 100.00	0%)				21. 100	.00 %	
	22.	22. Adjusted Vermont Income Tax (Multiply Line 20 by Line 21)							22	0.00	

axpayer's Last Name	Social Security Number	Keep a copy for
LAMBERT		your records.

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Ente	er am	ount from	n Line 22								*	1 6	1 1 3	11:	20(	) *
5	23.			o <b>.0</b>	0 +	24.			C	00.	<b>=</b> 25.				0	.00
se Tax		State or C	r Income Tax Canadian Pro IN-117, Line		-			Credits (S 5 OR Sched		,		Total Ver (Add Line				
D Du	26.	`	•	ter Credits (Subtr	act Line 25 f	from Line 2	2. If Line 2	25 is more th	an Line 22	2, enter -0	) <b>26</b> .				0	.00
Credits and Use Tax	27.	Use Tax (	See instruction	ns and chart) ere to certify that	no Uso Tex	in dual					<b>27</b> .	·			0	.00
ਹ	28.	Total Ve		Add Lines 26 and			-				28.	•			0	.00
6	1141	Children's	Trust Fund	Verm	ont Veterans	s Fund	<u></u>	Green Up Ver	mont		1 Nongam	e Wildlife Fur	nd			
utions	29a.		.00	₽ 29b	.00	_			00		29d		=	29e		.00
Contributions	30.	Total of V	ermont Taxes	and Voluntary	Contributi	ions (Add l	Lines 28 aı	nd 29e)			30					.00
7							·····			<del></del>	202.00					
		<b>31b.</b> From	n Vermont Fo	etc. <b>Vermont Ta</b> rm IN-114 <b>Estim</b>	ated Tax fo	or 2016					0.00					
				1, Extension wit												
edits				Tax Credit (Scheo							0.00					
Σp		210 Eng.	m Varmant Fa	orm PR-141, Lin rm RW-171 <b>Ver</b> r	mont Dool	Fatata	_									
nts a:		Wit	hholding (see	instructions)			31e.				0 .00					
Payments and Credits				rm WH-435 Esti y Business Entity r, or Shareholde	e br	• • •	316				0.00	1				
ď		31g. Lov	v Income Chil	id & Dependent	Care Cred	it					0 00					
	31h.	,		redits (Add Line											1202	.00
8				· · · · · · · · · · · · · · · · · · ·		······································						·····			1202	00
	ı			0 is less than Lind 5 <b>2017 Estimated</b> 3			) from Lin	e 31h						<del></del>	1202	.00
Refund		Amount of	n 31d cannot be	credited to 2017 es	stimated tax p	payment	33a.	•			0.00					
8	33Ь.	Refund to	o be Credited	to 2017 Property	Tax Bill		33Ь.				0.00					
	34.	REFUND	AMOUNT (S	ubtract Lines 33a	and 33b fr	om Line 3	2)				34	·	·		1202	.00
9	35.	If Line 30	is more than I	ine 31h, subtract	Line 31h fr	rom Line 3	0. See ins	tructions on	tax due.		35	<b>i.</b>			0	.00
Dee	36.		0 .(	O Interest an	d Penalty o	n Underp	ayment of	3	7. AMOU	JNT DUE					0	.00
	rame	nded		Estimated				2A)						,		
10	urns o	nder pena	iginal refund r Ities of perjui	ry, I declare that	t I have ex	efund due i amined th	nis return	and accom	panying	inal pay schedu	les and state	ements, and	to the b	due now est of n		ledge
Γ	an	d belief, t	hey are true,	correct and cor	nplete. Pre	eparers ca	nnot use	return info	rmation							
	Ι,	Signatur	е			Dat	e	Occupatio	n	Dat	e of Birth (MM	DD YYYY)	Telephon	e Number	•	
	9	> 		DOTU		Date Occupation		Date of Birth (MM DD YYYY)			T.1	- N1h				
_	4	Signatur	e. It a joint retu	rn, BOTH must sigr	1.	Dat	e	Occupatio	n	Date	e oi birtii (MiMi	ן וזיז טט	releption	e Number		
Signatures	<u> </u>	Γ	Check here	e if authorizing t	he Vermo	nt Depart	ment of T	axes to dis	scuss thi	is return	and attach	ments with	your pr	eparer.		
Preparer's signature								]	Date		<del>,, ,</del>	Preparer's				
	1	eparer's	<i>&gt;&gt;</i>					ļ				SSN or PTIN				
	Us	e Only	Firm	lress					EIN							
		5454										Preparer's	Telephone	Number	· · · · · ·	
1		7474										l				

## Form **4852**

(Rev. September 2014)

Department of the Treasury Internal Revenue Service

## Substitute for Form W-2, Wage and Tax Statement, or Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

► Attach to Form 1040, 1040A, 1040-EZ, or 1040X.

▶ Information about Form 4852 is available at www.irs.gov/form4852.

OMB No. 1545-0074

1	Name(s) shown on return		2 Your so	cial security i	number
Jame	es M Lambert				
3	Address				
4	Enter year in space provided and check one box. For the tax	Y VA	ar ending December 31, 2016		
	I have been unable to obtain (or have received an incorrect)			'	
	I have notified the IRS of this fact. The amounts shown on line			all wades or na	wmente
	made to me and tax withheld by my employer or payer named			all wages of pa	ayments
5	Employer's or payer's name, address, and ZIP code			6 Employer's of identification	or payer's n number (if known)
Tridy	rne Process Systems Inc, 80 Allen Rd, South Burlington VT 05403			2743	330379
7	Form W-2. Enter wages, tips, other compensation, and taxes	wit	hheld.	•	
		f	State income tax withheld .		1201.89
	b Social security wages	- )	(Name of state) . VERMONT		
		g	Local income tax withheld .		O
	d Social security tips	-	(Name of locality)		
	e Federal income tax withheld	h	Social security tax withheld .		2451.44
		i	Medicare tax withheld	<u>-</u>	573.32
8	Form 1099-R. Enter distributions from pensions, annuities, re	tire	ment/profit-sharing plans, IRAs, i	nsurance cont	racts, etc.
	a Gross distribution	f	Federal income tax withheld		
	<b>b</b> Taxable amount	g	State income tax withheld .	<u> </u>	
	c Taxable amount not determined .	h			
	d Total distribution	i	Employee contributions		
	e Capital gain (included in line 8b) .	į	Distribution codes		
RECO "INCO WITH	How did you determine the amounts on lines 7 and 8 above? ORDS PROVIDED BY PARTY IDENTIFIED AS "PAYER" ON LINE 5. OME" FROM THE 'PAYER' AS DEFINED IN THE STATUTORY LANG HELD AS TAX ARE CORRECT	UAC	GE FOUND IN IRC SECTIONS 3401(a	a) AND 3121(a).	
10	Explain your efforts to obtain Form W-2, Form 1099-R, or Form	ı W-	2c, Corrected Wage and Tax Sta	tement.	
NON	E. 'PAYER' ISSUED A W-2 BEFORE "WAGES," ERRORS WERE NO	TED.	. 'THE PAYERS' "WAGES." ORIGIN	ALLY ISSUED,	IS BAD PAYER

## **General Instructions**

Section references are to the Internal Revenue Code.

**Future developments.** The IRS has created a page on IRS.gov for information about Form 4852, at *www.irs.gov/form4852*. Information about any future developments affecting Form 4852 (such as legislation enacted after we release it) will be posted on that page.

**Purpose of form.** Form 4852 serves as a substitute for Forms W-2, W-2c, and 1099-R and is completed by you or your representatives when (a) your employer or payer does not issue you a Form W-2 or Form 1099-R or (b) an employer or payer has issued an incorrect Form W-2 or Form 1099-R. Attach this form to the back of your income tax return, before any supporting forms or schedules.

You should always attempt to get Form W-2, Form W-2c, or Form 1099-R from your employer or payer before contacting the IRS or filing Form 4852. If you do not receive the missing or corrected form from your employer or payer by February 14, you may call the IRS at 1-800-829-1040 for assistance. You must provide your name, address (including ZIP code), phone number, social security number, and dates of employment, and your employer's or payer's name, address (including ZIP code), and phone number. The IRS will contact your employer or payer and request the missing form. The IRS also will send you a Form 4852. If you do not receive the missing form in sufficient time to file your income tax return timely, you may use the Form 4852 that the IRS sent you.

If you received an incorrect Form W-2 or Form 1099-R, you should always attempt to have your employer or payer issue a corrected form before filing Form 4852.

Note. Retain a copy of Form 4852 for your records. To help **protect your social security benefits**, keep a copy of Form 4852 until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year. After September 30 following the date shown on line 4, you may use a *my* Social Security online account to verify wages reported by your employers. Please visit *www.ssa.gov/myaccount*. Or, you may contact your local SSA office to verify wages reported by your employer.

Will I need to amend my return? If you receive a Form W-2, Form W-2c, or Form 1099-R after your return is filed with Form 4852, and the information differs from the information reported on your return, you must amend your return by filing Form 1040X, Amended U.S. Individual Income Tax Return.

**Penalties.** The IRS will challenge the claims of individuals who attempt to avoid or evade their federal tax liability by using Form 4852 in a manner other than as prescribed. Potential penalties for the improper use of Form 4852 include:

- Accuracy-related penalties equal to 20 percent of the amount of taxes that should have been paid,
- Civil fraud penalties equal to 75 percent of the amount of taxes that should have been paid, and