

**Schedule BA-410**

**Vermont Corporate and Business  
Income Tax Affiliation**



\* 2 1 4 1 0 1 1 0 0 \*

**Attach to Form CO-411  
or Form BI-471**

**REQUIRED FOR COMBINED AND CONSOLIDATED RETURNS**

**Please provide information only for affiliates/subsidiaries with nexus in Vermont.**

Entity Name (same as on Form CO-411 or Form BI-471)	Fiscal Year Ending (YYYYMMDD)	FEIN
12345678901234567890123456789012(36)	20211231	123456789

Affiliate Name	FEIN				
12345678901234567890123456789012(36)	123456789				
Address	For Department Use Only				
12345678901234567890123456789012(36)					
Address (Line 2)					
12345678901234567890123456789012(36)					
City				State	ZIP Code
12345678901234567(21)				12	1234567890
Foreign Country				123456789012345678(32)	
Affiliate Name	FEIN				
12345678901234567890123456789012(36)	123456789				
Address	For Department Use Only				
12345678901234567890123456789012(36)					
Address (Line 2)					
12345678901234567890123456789012(36)					
City				State	ZIP Code
12345678901234567(21)				12	1234567890
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12345678901234567(21)				12	1234567890
Foreign Country				123456789012345678(32)	

**USE ADDITIONAL SCHEDULES, IF NECESSARY**