

Taxpayer's Last Name	Social Security Number



Amount from Line 16 **.00**

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

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**

For Amended Returns Only:	Original refund received <b>.00</b>	Refund due now <b>.00</b>	Original payment <b>.00</b>	Amount due now <b>.00</b>
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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.**