Vermont Form
8879-VT-C

VERMONT
Corporate or Business Income Tax Declaration for Electronic Filing

(See instructions in the Handbook on Corporate and Business Income Tax Modernized e-File (MeF) for Tax Year 2023)

For office use only
Date Received

Part I

Entity Name			Federal ID Number
Address			Fiscal Year END Date (YYYYMMDD)
Address, Line 2			
City	State	ZIP Code	Telephone Number ( )
Foreign Country	Email Address		

Part II *Tax Return Information (whole dollars only)*

1. Form being filed. . . . . ☐ BI-471 ☐ BI-476 ☐ CO-411
2. Refund credited to next year . . . . . 2. _____
3. Refund amount. . . . . 3. _____
4. Amount due . . . . . 4. _____

➔ DO NOT MAIL THIS FORM – KEEP THIS FORM AND REQUIRED ATTACHMENTS ON FILE FOR 3 YEARS ←

Part III ☐ Direct Deposit of Refund ☐ ACH Debit Payment Amount $_____ Payment Date ____/____/____

Routing transit number (RTN) |_|_|_|_|_|_|_|_|_| The first two digits of the RTN must be 01 through 12 or 21 through 32.

Depositor account number (DAN) |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_| Type of account: ☐ Savings ☐ Checking

Part IV *Declaration of Taxpayer* *By signing below, you agree that:*

- Under penalties of perjury, I declare the information I provided to my Electronic Return Originator (ERO) and the amounts shown in Part II agree with the amounts shown on the corresponding lines of my Vermont Corporate or Business Income tax return noted above, and is, to the best of my knowledge and belief, true, accurate and complete.
- If making an ACH Debit Payment, I authorize the Department to withdraw funds from my account in the amount and on the date specified.
- I consent to have the ERO forward my return, including this declaration and accompanying schedules and statements, to the Vermont Department of Taxes upon the Department's request.
- If the Vermont Department of Taxes does not receive full and timely payment of the amount due, I am liable for the tax and any applicable charges.

Please Sign Here ▶ Your Signature _____ Date _____ Printed Name _____ Title _____

Part V *Declaration of Electronic Return Originator (ERO) Only*

As an ERO, I am not responsible for review of the taxpayer's return but declare this form accurately reflects the data on the return. The taxpayer(s) signed this form before I submitted the return. I will give the taxpayer a copy of all forms and information to be filed with Vermont.

Electronic Return Originator's Use Only			
ERO's signature ▶		Date	Check if: paid preparer ☐ self-employed ☐
Firm's name (or yours if self-employed) and address ▶		EIN	
		Phone Number	
	Email Address:		

Part VI *Declaration of Paid Preparer*

Under penalties of perjury, I declare that I have examined the above taxpayer's return and accompanying schedules and statement. To the best of my knowledge and belief, they are true, correct and complete. This declaration is based on all information of which I have knowledge.

Paid Preparer's Use Only			
Preparer's signature ▶		Date	Check if self-employed ☐
Firm's name (or yours if self-employed) and address ▶		EIN	
		Phone Number	
	Email Address:		