

Form BI-476



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Vermont Business Income Tax Return For Resident Only

Check Appropriate Box(es) Name Change, Address Change, Accounting Period Change, Extended Return, Initial Return, Pro Forma - Cannabis, Final Return. Entity Name, FEIN, Primary 6-digit NAICS number, Address, Tax year BEGIN date, Tax year END date, Address (Line 2), Federal tax return filed, City, State, ZIP Code, Foreign Country.

- A. Were any shareholders, partners, or members nonresidents of Vermont during this reporting tax year?
B. Did this entity have income or losses derived from at least one state other than Vermont?
C. Total number of Vermont shareholders, partners, or members

TAX COMPUTATION (see instructions) Enter all amounts in whole dollars.

Table with 2 columns: Description and Amount. Rows include Vermont minimum entity tax, Payments previously made, Balance Due, Overpayment, and Overpayment to be Refunded.

I hereby certify that I am an officer or authorized agent responsible for the taxpayer's compliance with the requirements of Title 32 of the Vermont Statutes and that this return is true, correct, and complete to the best of my knowledge.

Signature of Responsible Officer, Date (MMDDYYYY), Daytime Telephone Number, Printed Name, Email Address (optional).

Check if the Department of Taxes may discuss this return with the preparer shown.

Signature of Paid Preparer, Date (MMDDYYYY), Preparer's Telephone Number, Preparer's Printed Name, Email Address (optional).

Firm's Name (or yours if self-employed), EIN, Preparer's SSN or PTIN, Firm's Address (or yours if self-employed) (Street, City, State, ZIP Code), Check if self-employed.