2022 Form FIT-161 **Vermont Fiduciary Return of Income**



	Name of Estate or Trust	FEIN	Date of Death (MMDDYYYY)	
	123456789012345678901234567890123456	123456789	MM / DD / YYYY	
	Name of Fiduciary	Title of Fiduciary	Tax year BEGIN date (MMDDYYYY)	
<u> </u>	123456789012345678901234567890123456	123456789012345	MM / DD / YYYY	
_	Mailing Address of Fiduciary (Number and Street/Road or PO Box)	State of Domicile at Death	Tax year END date (MMDDYYYY)	
<u> </u>	12345678901234567890123456	and/or Creation of Trust 12	MM / DD / YYYY	
-	Additional Line for Mailing Address of Fiduciary, if needed L2345678901234567890123456	Check ONE X Estate X Revocable Trust X Bank Esta	rruptcy X Grantor X Irrevocable te Trust	
\vdash	City State ZIP Code	Trust Esta	te 🔼 Trust 🔼 Trust	
-	L2345678901234567890123 12 1234567890	Observation of the second of t	d have William Obasid have William	
	Foreign Country		ck here if this AMENDED X is your FINAL	
	12345678901234567890123456789012	return return	n return	
A.	Were any distributions reported on federal Form 1041, Line 18, made to non	resident beneficiaries?		
	Did the estate or trust have non-Vermont municipal bond income? If "Yes,"			
υ.	Line 2a and Schedule FIT-166, Part I		B. X Yes X No	
C.	Are any present or future trust beneficiaries skip persons?		C. X Yes X No	
			77v., 77v.	
D.	Is this return for a Qualified Settlement Fund (federal Form 1120-SF)?		D. X Yes X No	
_	E 1 1 1 1 1 C E 1041 I 20 1 I C I	0		
1.	Federal taxable income from Form 1041, Line 23, or modified gross income Qualified Settlement Fund (from federal Form 1120-SF)	Check to ★ indicate	12345678901234 nn	
	Quantica Setticinent Fund (from federal Form 1120-51)	loss 1	00	
2a.	Income from Non-Vermont state and local obligations (from Schedule FIT-1	66 Part I Line 3) 2a	12345678901234.00	
2b.	Bonus Depreciation allowed under federal law for 2022		12345678901234.00	
2c.	State and local income taxes included on federal Form 1041, Line 11. (See in	nstructions) 2c	123456/8901234.00	
	Federal Taxable Income with Additions (Add Lines 1, 2a, 2b, and 2c.)	Check to	12345678901234	
3.	Federal Taxable Income with Additions (Add Lines 1, 2a, 2b, and 2c.)	3	.00	
4.	I. C. HOOH, C.	4	12345678901234.00	
4a.	Interest income from U.S. Obligations		.00	
4b.	Capital Gains Exclusion (from Schedule FIT-162, Line 21. If less than zero,	enter_() Ah -	12345678901234 00	
чи.	Capital Gains Exclusion (from Schedule 111-102, Ellie 21. 11 less than zero,	, cinci -0)	•00	
4c.	Adjustment for prior years' Bonus Depreciation		12345678901234.00	
4d.	Add Lines 4a, 4b, and 4c.		12345678901234.00	
5.	Vermont taxable income (Line 3 minus Line 4d)	X ← indicate loss 5	12345678901234.00	
		-	10245670001024 00	
6.	Vermont Tax from the tax rate schedule on page 2 of this form		12343676901234.00	
-	Additions to Vermont Tax (from Schedule FIT-166, Part II, Line 1c)		12345678901234 00	
7.	Additions to Vermont Tax (from Schedule F11-166, Part II, Line 1c)		.00	
8.	Subtractions from Vermont Tax (from Schedule FIT-166, Part II, Line 2e) .	0 -	12345678901234 nn	
0.				
9.	Vermont Tax with Additions and Subtractions (Add Lines 6 and 7, then subt	ract Line 8) 9	12345678901234.00	
•	(124 2 me)	-,		
10.	Income Adjustment (from Schedule FIT-166, Part III, Line 10, or 100%)		101231234 %	
			Form FIT-161	
	5454		Page 1 of 2 Rev. 10/22	
	5/15/1		Pav 10/22	

Rev. 10/22

5454

Name of Estate or Trust		
123456789012345678901234567890123456		
FEIN		
123456789		



11.	Adjusted tax (Multiply Line 9 by Line 10)				
12.	Other states credit (from Schedule FIT-167, Line 21)				
13. 14.	Total Vermont taxes (Line 11 minus Line 12)				
	14b. Estimated Tax or Extension Payments				
	14c. Vermont Real Estate Withholding				
	14d. Nonresident Payments from Form WH-435				
	14e. 2021 Overpayment Applied				
14f.	Total Payments (Add Lines 14a, 14b, 14c, 14d, and 14e)				
15.	Overpayment: If Line 13 is less than Line 14f, subtract Line 13 from Line 14f				
16.	Amount of overpayment to be credited to 2023 taxes				
17.	Amount of overpayment to be REFUNDED (Line 15 minus Line 16)				
18.	BALANCE DUE: If Line 14f is less than Line 13, subtract Line 14f from Line 13				

Vermont 2022 Tax Schedule						
If Taxable income is over	But not over	The Vermont Tax is	of the amount over			
\$0	\$2,850	3.35%	\$0			
\$2,850	\$6,600	\$95.00 + 6.60%	\$2,850			
\$6,600	\$10,150	\$343.00 + 7.60%	\$6,600			
\$10,150		\$613.00 + 8.75%	\$10,150			

If filing for a Qualified Settlement Fund, tax is 8.95% of taxable income.

File this return no later than the 15th day of the fourth month following the close of the operating or income year. Attach a legible copy of the federal Form 1041, U.S. Income Tax Return for Estates and Trusts, or federal Form 1120-SF for the same taxable period.

I declare under the penalties of perjury, this return is true, correct, and complete to the best of my knowledge. If prepared by a person other than the taxpayer, this declaration further provides under 32 V.S.A. §§ 5901-5903 that this information has not been and will not be used for any other purpose or made available to any other person other than for the preparation of this return unless a separate valid consent form is signed by the taxpayer and retained by the preparer.

Signature of Responsible Officer		Date	Daytime Telephone Number	
		MMDDYYYY	123-123-1234	
Printed Name				
Paid Preparer's Signature	Check if self-employed	Date	Preparer's Telephone Number	
	self-employed	MMDDYYYY	123-123-1234	
Preparer's Printed Name				
1234567890123456789012345678901	012345678901 12345678901234567890123456789012345678		67890123456789	
Firm's Name (or yours if self-employed) and address		Preparer's SSN or PTIN	FEIN	
123456789012345678901234567890123456789012		123456789	123456789	

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

For Department Use Only Ck. Amt.

Form FIT-161 Page 2 of 2 Rev. 10/22