

2022 Schedule FIT-167



Tax Year End Date (MMDDYYYY)

Vermont Credit for Tax Paid to Another State or Canadian Province for Fiduciaries

Attach to Form FIT-161

FEIN

For Residents and Some Part-Year Residents Only

Name of Estate or Trust

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You	must complete a separate Schedule FIT-167 for each state or Canadian province and attach a copy of t	he other sta	te return. See i	nstructions.
1.	Name of state or Canadian province. Use standard two-letter abbreviation			1.
2.	Enter total income taxed in another state or Canadian province and also subject to Vermont tax	00		
3.	2022 Bonus Depreciation add back taxed in another state or Canadian province AND taxed in Vermont			
4.	Non-Vermont state/local obligations taxed in another state or Canadian province AND taxed in Vermont			
5.	Add Lines 2 through 4. If negative, enter -0	5,		.00
	Bonus Depreciation subtracted from income in another state or Canadian province in TY 2022			
7.	U.S. Government interest income	00		
8.	Add Lines 6 and 7	8		00
9.	Modified total income for income taxed in another state or Canadian province AND taxed in Vermont (Line 5 minus Line 8)			.00
	Total income (from federal Form 1041, Line 9)	00		
11.	Non-Vermont state/local obligations from Form FIT-161, Line 2a	00		
12.	Bonus Depreciation from Form FIT-161, Line 2b	00		
13.	Add Lines 10 through 12. If negative, enter -0-	13		.00
14.	U.S. Government interest income from Form FIT-161, Line 4a . 14	00		
15.	Bonus Depreciation from Form FIT-161, Line 4c	00		
16.	Add Lines 14 and 15	16		.00
17.	Line 13 minus Line 16	17		.00
18.	Vermont income tax from Form FIT-161, Line 6	00		
19.	Computed tax credit (Divide Line 9 by Line 17, and multiply result by Line 18.) Result cannot be more Line 9	re than 100	% of Vermont to	ax.
	Line 9 Line 17 x Line 18 Income tax paid to another state or Canadian province based on modified adjusted gross	19		.00
	income from Line 9 above			
21.	VERMONT CREDIT for income tax paid to another state or Canadian province. Enter the lesser of Line 19 or Line 20. Also enter on Form FIT-161. Line 12.	21.		.00