Vermont Department of Taxes 133 State Street Montpelier, VT 05633-1401 Phone: (802) 828-5860

**VT Form** 

## **VERMONT LAND GAINS** WITHHOLDING TAX RETURN

*	1	6	1	7	7	1	1	$\cap$	$\cap$	*	

	10 be c	ompieted by	Transferee (Bu	iyer)				
۱.	TRANSFEROR'S (Seller's) II	NFORMATIO						
	Entity TRANSFEROR Name	Ο ΙΝΙΑΙΙΟΙ	•				Federal ID N	lumber
OR	Individual TRANSFEROR Last Name	ndividual TRANSFEROR Last Name First Name				Initial	OR Social Secur	rity Number
TRAI	NSFEROR Mailing Address Following	Transfer					Daytime Telephor	ne Number
							Daytime releption	ic Number
Line	2 for Mailing Address Following Transi	fer (if needed)					For Depa	rtment Use Only
City				State	ZIP Code			
Forei	ign Country (if not United States)			Email A	ddress			
	TRANSFEREE'S (Buyer's) II	NFORMATION	N					
	Entity TRANSFEREE Name						Federal ID N	lumber
DR	Individual TRANSFEREE Last Name		First Name	Initial			OR Social Secui	rity Number
TRAI	NSFEREE Mailing Address Following	Transfer					Daytime Telephor	ne Number
Line	2 for Mailing Address Following Transi	fer (if needed)					For Depa	rtment Use Only
City				State	ZIP Code			
Forei	ign Country (if not United States)			Email A	ddraes			
1 0161	ight country (if not officed States)			Lillali A	uuless			
	PROPERTY INFORMATION erty Physical Location - Number and S	Street or Poad Na	ıma				Land Size (in acre	20)
		or cot or read ive					·	
City	City or Town			Check if property is located in multiple cities or towns			SPAN	
							'	
	HOLDING PERIOD							
Date	Acquired by Transferor (mm dd yyyy)	Date of this C	Closing (mm dd yyyy)		Time Held	Υe	ears	Months
					_			
	EXEMPTIONS							
	<b>E1.</b> If transfer is exempt	from Land	Gains Tax, enter	r exemp	otion number (see	quick refe	erence guide)	E1
	<b>E1a.</b> If Line E1 is	"08," enter d	lescription		E1a			
	<b>E2.</b> If transferee fails to	comply with	all necessary re	equiren	nents for exemption	n		

transferee will be liable for the tax as shown on Form LGT-178, Line I5a ..... E2.



F.	TRAN	SFER INFORMATION	
	F1.	How did the Transferor acquire this property? (see quick reference guide)	F1
		F1a. If Line F1 is "04," enter description F1a.	
	F2.	Interest conveyed in this transfer (see quick reference guide)	F2.
		<b>F2a.</b> If Line F2 is "07," enter percent of interest here	F2a
		<b>F2b.</b> If Line F2 is "08," enter description <b>F2b.</b>	
	F3.	Type of building construction at time of transfer (see quick reference guide)	. F3
		<b>F3a.</b> If Line F3 is "05," enter number of units transferred	F3a
		<b>F3b.</b> If Line F3 is "06," enter number of dwelling units transferred	F3b.
		<b>F3c.</b> If Line F3 is "20," enter description <b>F3c.</b>	
	F4.	Value paid or Transferred (from Form PTT-172, Line J10)	. <b>F4.</b>
G.	SALE	S PRICE ATTRIBUTABLE TO TAXABLE LAND	
	<b>G1.</b>	Total number of acres transferred G1.	-
	G2.	Number of taxable acres transferred (see instructions)	
	G3.	Divide Line G2 by Line G1	
	G4.	Value paid or Transferred attributable to land (see instructions)	
	G5.	Multiply Line G3 by Line G4	. G5
Н.	INSTA	ALLMENT SALES	
	Н1.	Amount of this principal payment H1.	
	Н2.	Divide Line G5 by Line F4	
	Н3.	Amount of this payment subject to withholding (Multiply Line H1 by Line H2)	. Н3

(continued on next page)

Transferee's Name_	
Property Location _	
Date of this Closing	I



l.	TAX C	ALCULATION								
	I1.	Enter the amount from Line G5 or Line H3								
	I2.	Withholding tax rate	10.00_%							
	13.	<b>TAX DUE</b> (Multiply Line I1 by Line I2). If a Common was issued for this transfer enter the withholding am Make check payable to <b>Vermont Departmen</b>	ount required	3						
	I4.	If a Commissioner's Certificate was issued in advance enter the certificate number								
		<b>I4a.</b> Check here if certification has been applied for but not yet received.								
	15.	Is the transferor simultaneously filing a Vermont Lar (Form LGT-178) and paying the full amount of tax d		5. Yes	No					
<b>J.</b> We her		ATURES ify this return is true, correct, and complete to the best of our know	vledge.							
	Signat	ure of Primary Transferee	Printed name		Date					
	May	the Dept. of Taxes discuss this return with the prepare	rer shown? Yes	No						
		Preparer's signature		Date						
Prepa	arer's	Preparer's printed name		Preparer's Teleph	none Number )					
Use (		Firm's name (or yours if self-employed) and address			-					
		Preparer's email address								

## **Send completed return to:**

Vermont Department of Taxes 133 State Street Montpelier, VT 05633-1401