Vermont Department of Taxes

Form IN-116



Vermont Income Tax Payment Voucher

Please PRINT in BLUE or BLACK INK

Taxpayer's Last Name	First Name		MI	Taxpayer's Social Security Number
Spouse's/CU Partner's Last Name	First Name		MI	Spouse's or CU Partner's Social Security Number
Mailing Address (Number and Street/Road or PO Box)			Tax Year	
City	State	ZIP Code or Postal Code		
Foreign Country (if not United States)			Amount of this payment	

Mail to: Vermont Department of Taxes PO Box 1779 Montpelier, VT 05601-1779 If you electronically filed, DO NOT include a copy of the filed return with this payment.

Form IN-116 Rev.10/23