| Business Name |  | Federal ID Number |  |
| :--- | :--- | :--- | :--- |
| Address | State | ZIP Code | Contact Person Name |
| City |  | Contact Person's Telephone Number |  |
| Email Address | Reporting Period YEAR (yyyy) | Reporting Period (check ONE) <br> $\square$ |  |


| A. <br> Town Name | B. <br> Town \% of Track | C. <br> Track Value in Town | D. Improvement Value | E. <br> Sum Track Value and Improvements (Col. C + D) |
| :---: | :---: | :---: | :---: | :---: |
| Town \#1 |  |  |  |  |
| Town \#2 |  |  |  |  |
| Town \#3 |  |  |  |  |
| Town \#4 |  |  |  |  |
| Town \#5 |  |  |  |  |
| Town \#6 |  |  |  |  |
| Town \#7 |  |  |  |  |

(Continue table on page 2, if necessary)

1. Appraisal Value
2. $\qquad$ .
3. Total Annual Tax (Multiply Line 1 by .01)
4. $\qquad$ .
5. Tax Due (Current Installment) (Divide Line 2 by 2 ) . . . . . . . . . . . . . . . . . . . . . . .
6. $\qquad$ .

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, his/her declaration further provides under 32 V.S.A. $\S \S 5901-5903$ 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.

|  | Responsible Officer |  | Date |  | Daytime telephone number (optional) ( ) | May the Dept. of Taxes discuss this return with the preparer shown? $\square$ Yes No |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Printed name |  |  | Email address (optional) |  |  |  |
| Paid <br> Preparer's <br> Use Only | Preparer's signature |  |  |  | Date | Check if self-employed $\square$ |
|  | Preparer's printed name |  |  |  | Preparer's Social Security No. or PTIN |  |
|  | Firm's name (or yours if self-employed) and address |  |  |  |  |  |
|  | EIN | Preparer's Telephone Number ( ) |  | Preparer's e | address (optional) |  |


| Business Name |  |  | Reporting Period (yyyy mmm) | Federal ID Number |
| :---: | :---: | :---: | :---: | :---: |
| A. <br> Town Name | B. <br> Town \% of Track | C. <br> Track Value in Town | D. Improvement Value | E. <br> Sum Track Value and Improvements (Col. C + D) |
| Town \#8 |  |  |  |  |
| Town \#9 |  |  |  |  |
| Town \#10 |  |  |  |  |
| Town \#11 |  |  |  |  |
| Town \#12 |  |  |  |  |
| Town \#13 |  |  |  |  |
| Town \#14 |  |  |  |  |
| Town \#15 |  |  |  |  |
| Town \#16 |  |  |  |  |
| Town \#17 |  |  |  |  |
| Town \#18 |  |  |  |  |
| Town \#19 |  |  |  |  |
| Town \#20 |  |  |  |  |
| Town \#21 |  |  |  |  |
| Town \#22 |  |  |  |  |
| Town \#23 |  |  |  |  |
| Town \#24 |  |  |  |  |
| Town \#25 |  |  |  |  |
| Town \#26 |  |  |  |  |
| Town \#27 |  |  |  |  |
| Town \#28 |  |  |  |  |
| Town \#29 |  |  |  |  |
| Town \#30 |  |  |  |  |
| Town \#31 |  |  |  |  |
| Town \#32 |  |  |  |  |
| Attach additional pages, if necessary |  |  |  | Form RCT-331 <br> Page 2 of 2 <br> Rev. 02/20 |
| Clear ALL fields | Save and | o Important Pr | nting Instructions | Save and Print |

