

State of Rhode Island and Providence Plantations  
**RI-1120C - CGM Schedule**  
 Combined Group Member Listing



18113799990101

<b>Name</b>	<b>Federal employer identification number</b>

**This schedule is to be filed with Form RI-1120C.**

If this filing is based on a Federal Consolidated return, check the "Federal consolidated election" checkbox to the right.

**List the name, federal employer identification number and address for each Combined Group Member.**

	Combined Group Member (CGM)	CGM FEIN	CGM Address Top row: street address Bottom row: city, state, ZIP
1			
	If this Combined Group Member has nexus, check this box: <input type="checkbox"/>		
2			
	If this Combined Group Member has nexus, check this box: <input type="checkbox"/>		
3			
	If this Combined Group Member has nexus, check this box: <input type="checkbox"/>		
4			
	If this Combined Group Member has nexus, check this box: <input type="checkbox"/>		
5			
	If this Combined Group Member has nexus, check this box: <input type="checkbox"/>		
6			
	If this Combined Group Member has nexus, check this box: <input type="checkbox"/>		
7			
	If this Combined Group Member has nexus, check this box: <input type="checkbox"/>		
8			
	If this Combined Group Member has nexus, check this box: <input type="checkbox"/>		
9			
	If this Combined Group Member has nexus, check this box: <input type="checkbox"/>		
10			
	If this Combined Group Member has nexus, check this box: <input type="checkbox"/>		