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State of Rhode Island Division of Taxation

Form BUS-EST



1311129990101

Business Tax Estimated Payment Form

Name			Federal employer identification number		
Address			For the period ending:		
Address 2					
City, town or post office		State	ZIP code	E-mail address	

Estimates are due by the 15th day of the fourth, sixth, ninth and twelfth months of the taxable year

Part 1: Declaration of estimated tax

Check the box next to the form for which you are making an estimated payment. Check only one box.

- Form RI-1120 - Rhode Island Corporate Income Tax - Key #54
- Form RI-1120POL - Rhode Island Political Organization Tax - Key #78
- Form T-71 - Rhode Island Gross Premium Insurance Tax - Key #13
- Form T-71A - Surplus Lines - Key #13
- Form T-72 - Rhode Island Public Service Corporation Gross Earnings Tax - Key #22
- Form T-74 - Rhode Island Banking Institution Excise Tax - Key #11
- Form T-86 - Rhode Island Bank Deposits Tax - Key #10
- Form RI-PTE - Pass-Through Entity Election - Key #82

The amounts and due dates of the installments are as follows:

- 25% of the taxable year tax by April 15th
- 50% of the taxable year tax by June 15th
- 75% of the taxable year tax by Sept 15th
- 100% of the taxable year tax by Dec 15th

Mail voucher and payment to:

RI Division of Taxation
One Capitol Hill
Providence, RI 02908

NOTE: If payment is made online, you do not need to send voucher in.

Part 2: Amount due with estimate

1 Total tax from prior year.....	1
2 Estimated tax due for the current year.....	2
3 Estimated tax payment due. Multiply line 2 by the applicable percentage. (25% for first estimate, 50% for second estimate, 75% for third estimate, 100% for fourth estimate).....	3
4 Estimated tax payments made. If applicable, add the overpayment carried forward from the prior year being applied to this payment plus the estimated taxes paid to date for this tax year.....	4
5 Amount due with this estimate. Subtract line 4 from line 3.....	5

Payments can be made online. For more information, visit: <https://www.ri.gov/taxation/business/index.php>

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, it is true, accurate and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Authorized officer signature	Print name	Date	Telephone number
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Paid preparer signature	Print name	Date	Telephone number
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Paid preparer address	City, town or post office	State	ZIP Code	PTIN
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May the Division of Taxation contact your preparer? YES

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