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State of Rhode Island Division of Taxation	
5 2020 Form RI-1096PT	<u> </u>
Pass-through Withholding Return and Transmittal 20102999990)101
<u> ?</u>	
Ö Name Feder	al employer identification number
name Feder	di ciripisyo, idolanda si ricinsor
1.1 Address	11
1,2 Sub S Corp	1.5
13 Address 2	111111111111111111111111111111111111111
14 LLC	14
15 City town or post office State ZIP code E-mai	il address 1.5
1.6 Partnership	bь
17 Year end	17
LA Trust Calendar Year: January 1, 2020 through December 31, 2020 Fiscal Year: MM / DD / 2 0 2 0	through MM/DD/
Cannot distribute due to Federal or State restrictions (see instructions) Members with less than \$1,000 in RI	source income (see instructions)
21. Column A	Column B 21
WITHHOLDING CALCULATION C Corporations only	Sub S Corps, Individuals,
23	23
24 1 Rhode Island source income of nonresident members net of modification	16 24
25	25
2 Rhode Island honresident pass-through withholding rate 2a 7,0%	2b 5.99% 2L
27 д 3 Rhode Island pass-through withholding. Multiply line 1 by line 2	3b 27
	30 28
2 TOTAL Rhode Island pass-through withholding. Add lines 3a and 3b	4
31 4 TOTAL Knode island pass-tilrough withholding. Add lines 3a and 3b	31
5 Rhode Island nonresident real estate withholding (see worksheet on page 2 for other payments)	5
33	33
Tentative Rhode Island withholding for members. Subtract line 5 from line 4 (not less than zero)	. 6 34
35	35
7 Rhode Island estimated tax paid on Form RI-1096PT-ES	36
	37
8a Credit for withholding paid on behalf of reporting entity. Enter the identification number(s) of issuing entity or entities below. (see instructions)	
40 ID#	40
41	41
u 2 8b Rhode Island nonresident withholding on real estate sales in 2020 ONLY if entity	42
name, not members' names, was provided to Division of Taxation at time of closing 8b	43
44	44
45 8c Other payments	45
U.S. O. Tital no month and bradity Add lives 7, 20, 6h and 9c	46
47 9 Total payments and credits. Add lines 7, 8a, 8b and 8c	9 47
48 49 10 Balance due. If line 6 is greater than line 9 subtract line 9 from line 6. The amount, from line 6 should be allocated	48 49
	`
	10 51
Attach the RI-2210PT to the return.	52
53 11 Excess withholding paid. If line 9 is greater than line 6 subtract line 6 from line 9. The amount on line 9 should	d 53
be allocated to the RI-1099PTs being issued to the entity's members. Excess amounts cannot be refunded or carried forward	
55	55
5L NOTE: The total withholding from all RI-1099PTs that have been issued must Number of 1099s issued:	56
equal the amount from line 6 or line 9 above, whichever is larger. Attach all ISSUED RI-1099PTs to the BACK of this Form RI-1096PT. Total amount of 1099s issued:	57
5 Attach all ISSUED RI-1099PTs to the BACK of this Form RI-1096PT. Total amount of 1099s issued:	58 59
60	PO
	61
, , ,	F 2
Mail to RI Division of Taxation - One Capitol Hill - Providence - RI 02908	SIGIGIGIGI ? ? ? ? ? ? ? <mark>??8</mark> 88
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		112345678901a e Island Division o	<u>!]3 4 5 6 7 8 9 0 1 2 3 4 5 </u>		
		RI-1096PT	Taxallon		
		Withholding Retur	n and Transmittal	20102999990102	
<u> </u>	i aso i i ougii i	Walliolang Rola			
Name				Federal emplo	over identification number
SCHE	DULE A -				
		N ENTITY WITH AT	LEAST ONE C CORF	MEMBER WITH LESS THAN \$1.0	00.00 OF INCOME
				Column A	Column B
				C Corporation	
1 D	hada laland aquras ina	arra of ALL paperocidan	C Corporation marshara no	of modifications	Members
	ttach schedule)	JOINE OF ALL HUMBESIGER	C Corporation members net	1	
2 R	hode Island source inc	come of those nonreside	nt C Corporation members w	vith income of less	
		ifications (attach schedul		2	
3 RI	hode Island source inc	come of nonresident C C	orporation members with inc	ome of \$1,000 or 3	
m	ore het of modification	s. Subtract line 2 from	line 1. Enter here and on p	g 1, Col A, Line 1a	
	DULE B -				
CALC	ULATION FOR AN	I ENTITY WITH AT I	EAST ONE NON-C CO	RP MEMBER WITH LESS THAN \$1	000.00 OF INCOME
				Column A	Column B
				Sub S Corps, Individua	
4 0	hada Island sauraa ina	omo of All population	members other than C Corp	Partnerships and 1	rusts Members
	odifications (attach sch		members other man C Corp	noration's flex of	
2 R	hode Island source inc	come of those nonreside	nt members other than C Co	rogrations with in-	
		00 net of modifications (a		2	
3 Ri	hode Island source incom	ne of nonresident members	other than C Corporations with	income of \$1,000 or 3	
m	ore net of modifications.	Subtract line 2 from line	i. Enter here and on page 1, Co	olumn B, Line 1b	
NAVO FOL	SHEET FOR PAG				
WURP	SHEET FUR PAG	GE II, LINE 5		+++++++++++++++++++++++++++++++++++++++	
				own of each shareholder's with-	
				osing Attach copy of 71.3 form	
	node island estimated i	tax paid by members on	their personal return attributa	ble to income on this return (see in-	
	ructions).				
st	ructions).				
st	ructions).	ithholding tax paid by thi	s entity for members (see ins	structions)	
5c Ex	ructions). xcess Rhode Island wi		s entity for members (see insuse in 2020. Refer to Scheo		
5c Ex	ructions). xcess Rhode Island wi				
5c Ex	ructions). xcess Rhode Island wi		use in 2020. Refer to Scheo		
5c E) 5d RI	ructions). xcess Rhode Island wi	chased by a member for	use in 2020. Refer to Scheo	dule CR for elgible credits 5d	
5c E) 5d RI	ructions). xcess Rhode Island wi	chased by a member for	use in 2020. Refer to Scheo	dule CR for elgible credits 5d	
5c Ex 5d RI 5e To	cructions). xcess Rhode Island with hode Island credit purcental. Add lines 5a, 5b,	chased by a member for 5c and 5d. Enter here a	use in 2020. Refer to Scheo	dule CR for elgible credits	
st 5c Ex 5d RI 5e To	tructions). xcess Rhode Island with hode Island credit purchastal. Add lines 5a, 5b, spenalties of perjury, I do	chased by a member for 5c and 5d. Enter here a	use in 2020. Refer to Scheo	dule CR for elgible credits	
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5d RI 5e To Under pelief. Authori	cructions). xcess Rhode Island with the properties of perjury. I do it is true, accurate and ized officer signature	chased by a member for 5c and 5d. Enter here a lectare that I have examinate complete. Declaration Print	use in 2020. Refer to Scheo and on page 1, line 5 ned this return and accompar of preparer (other than taxpa) name	dule CR for elgible credits	arer has any knowledge. phone number
5d RI 5e To Under pelief. Authori	tructions). xcess Rhode Island with hode Island credit purcental. Add lines 5a, 5b, see the period of period of the lines of period of the lines and the lines are contacted in the lines are contacted in the lines are lines ar	chased by a member for 5c and 5d. Enter here a lectare that I have examinate complete. Declaration Print	use in 2020. Refer to Scheound on page 1, line 5	dule CR for elgible credits	arer has any knowledge.
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