

## State of Rhode Island Division of Taxation

## Form T-204R-Annual

Sales and Use Tax Return - Annual Reconciliation

Name	Account identification number							
Address			For the period ending:					
			12/31/2021					
Address 2			NAICS code					
	<b>Q</b> ( ) ( )							
City, town or post office	State	ZIP code	E-mail address					
			S OF TANGIBLE PERSONAL PR	ODEDTY				
If you file a consolidated Sales Tax								
If there are more than 10 locat	ions, ple	ease attach a separa	te listing. If you have multiple	locations.				
but file individual Sales	Tax Retu	irns, you must file a	T-204R-Annual for each locati	on.				
Have you sold or closed your business?	Yes	If yes, on what date?						
Before completing lines	A thro	ugh E, complet	te Schedules A and B o	n page 2.				
A Total Net Taxable Sales for the period Jan - Dec	NOTE: L	ine A must equal Net	Taxable Sales from pg 2, line 5 A					
B 1 Amount of tax. Multiply line A by 7% (.07)			B1					
<sup>2</sup> MOTOR VEHICLE DEALERS ONLY Sales tax collections from non-residents for the	period Jar	n through Dec	B2					
3 Total Tax. Add lines B1 & B2			вз	3				
C 1 Total tax remitted for the period January through	<b>C</b> 1							
2 Prepaid sales tax on cigarettes for the period January through December C2								
3 ROOM RESELLERS ONLY Sales tax paid to hotels			СЗ					
4 Credit balance (if any) per line E of the 2020 Annual	Reconciliat	tion return - Form T-204R	C4					
5 Sales tax due and paid to another state on items	sincluded	in Schedule A, line 2	C5					
6 Total Tax Paid. Add lines C1 through C5				5				
D Line C6 should equal line B3. If line B3 is more than line C6, there is a <b>balance due</b> . Please remit payment to the RI Division of Taxation and send in with this Annual Reconciliation. See instructions for additional information.								
E If line C6 is more than line B3, there is a credit due which will be credited to the 2022 sales tax payments. Note: Taxpayer must submit a "Claim for Refund" form with this reconciliation in order to receive a refund instead								
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Under penalties of perjury, i declare that i have				, j 0	
belief, it is true, accurate and complete. Dee	claration of preparer (other than ta	axpayer) is b	based on all information o	of which preparer has any knowled	ge.
Authorized officer signature	Print name		Date	Telephone number	
,					
Paid preparer signature	Print name		Date	Telephone number	
Paid preparer address	City, town or post office	State	ZIP Code	PTIN	

May the Division of Taxation contact your preparer? YES

## State of Rhode Island Division of Taxation **Form T-204R-Annual** Sales and Use Tax Return - Annual Reconciliation

			TOTALS				
1	a Pet services	1a					
	b Specified digital products	1b					
	c Transportation services (taxi, limo, bus, ground)	1c					
	d Prewritten computer software delivered electronically or by "load and leave"	1d					
	e Over-the-counter (OTC) drugs and medicines	1e					
	f Software as a Service (SaaS) sales	1f					
	g Investigation, guard and armored services (Security services)	1g					
	h Other sales: All sales not listed on lines 1a through 1g	1h					
	i Gross sales. Add lines 1a through 1h	11					
2	USE: Cost of personal property per R.I. Gen. Laws 44-18-20	2					
3	TOTAL . Add lines 1i and 2	3					
4	a Food and food ingredients for human consumption	4a					
	b Resale	4b					
	c Interstate	4c					
	d Sales of motor vehicles	4d					
	e Prescription drugs	4e					
	f Exempt	4f1					
	Organizations 2. Other exempt organizations & non-profits R.1. Gen. Laws 44-18-30(5)						
	g Fuels (gasoline, residential heating fuel and other exempt fuels)	4g					
h Urns							
i Feminine hygiene products							
j Seeds and plants used to grow food and food ingredients (does not include marijuana seeds and plants)							
k Other (Deductions not separately listed above): Specify							
I Total Deductions. Add lines 4a through 4k							
5	Net Taxable Sales. Subtract line 4I from line 3. Carry to page 1, line A 5			- 			