State of Rhode Island Division of Taxation

Form IT-95

Informational Return of Insurance Companies

16160599990101

Decedent's first name	MI	Last name	Suffix	Decedent's social security number
XXXXXXXXXXXXXXXXXX	X	XXXXXXXXXXXXXXXXXXXX	XXX	999-99-9999

Decedent's address - Legal residence (domicile) at time of death	City, town or post office	State	ZIP code
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XX	99999

Insurance company information	Name: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
	Address: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Date of death	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Type of contract	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Name(s) of payee	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Amount of proceeds if payable in one sum	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Value of proceeds if not paid in one sum	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Provisions of policy with respect to the deferred payments or installments	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Owner of policy if not the insured	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

INSTRUCTIONS:

This form must be filed with the Rhode Island Division of Taxation within thirty (30) days of receipt of information of the death of the insured where the payments made or to be made exceed fifity thousand ($50,000) dollars.

A SEPARATE STATEMENT MUST BE FILED FOR EACH INSURANCE CONTRACT

The undersigned officer of the above named insurance company hereby certifies that this statement is true and correct.

Auothorized signature	Print name	Date	Telephone number
		10/23/2020	(999) 999-9999

Address	City, town or post office	State	ZIP Code	PTIN
	XXXXXXXXXXXXXX	XX	99999	P99999999

Mail to RI Division of Taxation - One Capitol Hill - Providence, RI 02908

Revised 10/2020