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4 State of Rhode Island Division of Taxation



5 2022 Form RI-1096PT

6 Pass-through Withholding Return and Transmittal

22102999990102

9 Name Federal employer identification number

11 SCHEDULE A -

12 CALCULATION FOR AN ENTITY WITH AT LEAST ONE C CORP MEMBER WITH LESS THAN \$1,000.00 OF INCOME

Column A C Corporations Column B Number of Members

- 1 Rhode Island source income of ALL nonresident C Corporation members net of modifications (attach schedule)
2 Rhode Island source income of those nonresident C Corporation members with income of less than \$1,000 net of modifications (attach schedule)
3 Rhode Island source income of nonresident C Corporation members with income of \$1,000 or more net of modifications. Subtract line 2 from line 1. Enter here and on pg 1, Col A, Line 1a

1
2
3

25 SCHEDULE B -

26 CALCULATION FOR AN ENTITY WITH AT LEAST ONE NON-C CORP MEMBER WITH LESS THAN \$1,000.00 OF INCOME

Column A Sub S Corps, Individuals, LLCs, Partnerships and Trusts Column B Number of Members

- 1 Rhode Island source income of ALL nonresident members other than C Corporations net of modifications (attach schedule)
2 Rhode Island source income of those nonresident members other than C Corporations with income of less than \$1,000 net of modifications (attach schedule)
3 Rhode Island source income of nonresident members other than C Corporations with income of \$1,000 or more net of modifications. Subtract line 2 from line 1. Enter here and on page 1, Column B, Line 1b

1
2
3

39 WORKSHEET FOR PAGE 1, LINE 5

- 5a Rhode Island nonresident real estate withholding - ONLY include if a breakdown of each shareholder's withholding amount was provided to the RI Division of Taxation at the time of closing - Attach copy of 71.3 form
5b Rhode Island estimated tax paid by members on their personal return attributable to income on this return (see instructions).
5c Excess Rhode Island withholding tax paid by this entity for members (see instructions)
5d Rhode Island credit purchased by a member for use in 2022. Refer to Schedule CR for eligible credits
5e Total. Add lines 5a, 5b, 5c and 5d. Enter here and on page 1, line 5

5a
5b
5c
5d
5e

53 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.

54 Authorized officer signature Print name Date Telephone number
55 Paid preparer signature Print name Date Telephone number
56 Paid preparer address City, town or post office State ZIP Code PTIN

62 May the Division of Taxation contact your preparer? YES

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