



Name	Federal employer identification number

Schedule H - Apportionment

Check if utilizing an alternative allocation apportionment calculation allowed under 44-11-14.1 through 44-11-14.6

Column A
Rhode Island

Column B
Everywhere

1 a Gross receipts.....	Rhode Island Sales.....	1a	
	Sales Under 44-11-14(a)(2)(i)(B)...		
b Dividends.....		1b	
c Interest.....		1c	
d Rents.....		1d	
e Royalties.....		1e	
f Capital gains.....		1f	
g Ordinary income.....		1g	
h Other income.....		1h	
i Income exempt from federal taxation.....		1i	
j Total. Add lines 1a, 1b, 1c, 1d, 1e, 1f, 1g, 1h and 1i.....		1j	
2 Ratio in Rhode Island, line 1j, Column A divided by line 1j, Column B. Calculate to six (6) decimal places. Enter here and on page 1, Schedule A, line 5.....		2	_ . _

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
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