State of Rhode Island Division of Taxation

2024 Form RI-1040C

Composite Income Tax Return

24102499990101

	Name				Federal employer identification number
✕ Amended	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				999999999
	Address				
✕ Sub S Corp	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				
	Address 2				
✕ LLC	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				
	City, town or post office	State	ZIP code		E-mail address
✕ Partnership	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XX	99999		XXXXXXXXXXXXXXXXXX
	Year end				
✕ Trust	✕ Calendar Year: January 1, 2024 through December 31, 2024	✕ Fiscal Year:	06/02/2024	through	06/01/2025

SECTION A: COMPUTATION OF INCOME

1	Total Federal Taxable income from Federal Form 1120S, line 22, Federal Form 1065, line 23 or Federal Form 1041, line 23, plus any separately stated income or deduction items listed on Federal K-1			1	9999999999 99
MODIFICATIONS INCREASING FEDERAL TAXABLE INCOME					
2a	Income from obligations of any state or its political subdivisions, other than RI (attach documentation)	2a	9999999999 99		
b	Bonus Depreciation	2b	9999999999 99		
c	Taxable portion of Paycheck Protection Program Loan amount under RIGL §44-30-12(b)(8)	2c	9999999999 99		
d	Other modifications (attach documentation)	2d	9999999999 99		
3	Total modifications INCREASING Federal Taxable Income. Add lines 2a, 2b, 2c and 2d			3	9999999999 99
MODIFICATIONS DECREASING FEDERAL TAXABLE INCOME					
4a	Income from obligations of the US government included in federal income but exempt from state income taxes (attach documentation)	4a	9999999999 99		
b	Bonus Depreciation and Section 179 Depreciation	4b	9999999999 99		
c	Other modifications (attach documentation)	4c	9999999999 99		
5	Total modifications **DECREASING** Federal Taxable Income. Add lines 4a, 4b and 4c			5	9999999999 99
6	Modified Federal Taxable Income. Line 1 plus line 3 less line 5			6	9999999999 99
7	RI apportionment ratio from pg 2, Section C, line 27. (Multistate entities only - entities solely in RI enter 1.0000)			7	0.1234
8	Rhode Island source income. Multiply line 6 by line 7			8	9999999999 99

SECTION B: COMPUTATION OF TAX

9	Rhode Island income tax using the **COMPOSITE INCOME TAX RATE**. Multiply line 8 by 5.99% (0.0599)			9	9999999999 99
10	Qualified electing nonresident members' percent of ownership. If all members are nonresidents enter 1.0000			10	0.1111
11	Rhode Island income tax of qualified electing nonresident members. Multiply line 9 by line 10			11	9999999999 99
12	Rhode Island estimated payments made on RI-1040C-ES and amount applied from 2023 composite return	12	9999999999 99		
13	Rhode Island nonresident real estate withholding of qualified electing nonresident members	13	9999999999 99		
14	Rhode Island nonresident withholding received from pass-through entities from Form RI K-1. **Attach form(s)**	14	9999999999 99		
15	Other payments	15	9999999999 99		
16	Total payments. Add lines 12, 13, 14 and 15			16	9999999999 99
17	**AMOUNT DUE**. If line 11 is **LARGER** than line 16, subtract line 16 from line 11			17	9999999999 99
18	Underestimating interest			18	9999999999 99
19	**TOTAL AMOUNT DUE**. Add lines 17 and 18. Complete Form RI-1040C-V		☹	19	9999999999 99
20	**OVERPAYMENT**. If line 11 is **SMALLER** than line 16, subtract line 11 from line 16. This is the amount overpaid. **If there is an amount due for underestimating interest on line 18, subtract line 18 from line 20**		☺	20	9999999999 99
21	Amount of overpayment to be refunded			21	9999999999 99
22	Amount of overpayment to be applied to 2025 RI-1040C estimated tax	22	9999999999 99		

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State of Rhode Island Division of Taxation

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Composite Income Tax Return

24102499990102

Name | Federal employer identification number

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | 999999999

SECTION C: APPORTIONMENT

AVERAGE NET BOOK VALUE		Column A Rhode Island	Column B Everywhere
23a Inventory	23a	999999999 99	999999999 99
b Depreciable assets	23b	999999999 99	999999999 99
c Land	23c	999999999 99	999999999 99
d Rent (8 times annual net rental rate)	23d	999999999 99	999999999 99
e Total. Add lines 23a, 23b, 23c and 23d	23e	999999999 99	999999999 99
f Ratio in Rhode Island, line 23e, Column A divided by line 23e, Column B. Calculate to four (4) decimal places	23f	0.1234	
RECEIPTS			
24a Gross receipts — Rhode Island Sales	24a	999999999 99	999999999 99
Sales Under 44-11-14(a)(2)(i)(B)		999999999 99	
b Dividends	24b	999999999 99	999999999 99
c Interest	24c	999999999 99	999999999 99
d Rents	24d	999999999 99	999999999 99
e Royalties	24e	999999999 99	999999999 99
f Net capital gains	24f	999999999 99	999999999 99
g Ordinary income	24g	999999999 99	999999999 99
h Other income	24h	999999999 99	999999999 99
i Income exempt from federal taxation	24i	999999999 99	999999999 99
j Total. Add lines 24a, 24b, 24c, 24d, 24e, 24f, 24g, 24h and 24i	24j	999999999 99	999999999 99
k Ratio in Rhode Island, line 24j, Column A divided by line 24j, Column B. Calculate to four (4) decimal places	24k	0.1234	
SALARIES			
25a Salaries and wages paid or incurred	25a	999999999 99	999999999 99
b Ratio in Rhode Island, line 25a, Column A divided by line 25a, Column B. Calculate to four (4) decimal places	25b	0.1234	
RATIO			
26 Total of Rhode Island ratios shown on lines 23f, 24k and 25b	26	0.1234	
27 Apportionment Ratio. Divide line 26 by the number 3 or the number of ratios used. Enter here and on pg 1, Sect A, line 7	27	0.1234	

SECTION D: QUALIFIED ELECTING MEMBER INFORMATION

If needed, attach additional schedules.

Name	Address	Social Security Number	RI Source Income	RI Income Tax
XXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXX	999999999	9999999999	999999999
XXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXX	999999999	9999999999	999999999
XXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXX	999999999	9999999999	999999999
XXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXX	999999999	9999999999	999999999

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
	XXXXXXXXXXXXXXXXXXXXXXX	06/03/2025	(999) 999-9999
Paid preparer signature	**Print name**	**Date**	**Telephone number**
	XXXXXXXXXXXXXXXXXXXXXXX	06/03/2025	(999) 999-9999
Paid preparer address	**City, town or post office**	**State**	**ZIP Code**	**PTIN**
XXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXX	XX	99999	P99999999

May the Division of Taxation contact your preparer? ☒ YES

Rhode Island has an Electronic Mandate for filing a return and remitting a payment.

See the 2024 RI-1040C Instructions for more information on the requirements and how to file and pay.

DRAFT 10/24/25