



24101799990101

| | | | | | | | |
|--|-----------------------------|--|-------|--|----------------|--|--|
| You <u>must</u> check a box: <input type="checkbox"/> Estates and Trusts <input type="checkbox"/> Bankruptcy Estate <input type="checkbox"/> Amended Return | Name of estate or trust | | | Federal employer identification number | | | |
| | Name and title of fiduciary | | | | | | |
| | Address 1 | | | | | | |
| | Address 2 | | | | | | |
| | City, town or post office | | State | ZIP code | E-mail address | | |

Year End Calendar Year: 01/01/2024 through 12/31/2024 Fiscal Year: beginning MM/DD/2024 through MM/DD/2025

Income

| | | | | |
|------|---|-----|--|--|
| 1 | Federal total income of fiduciary from Federal Form 1041, line 9..... | 1 | | |
| 2 | Modifications increasing federal total income from Schedule M, line 2l..... | 2 | | |
| 3 | Modifications decreasing federal total income from Schedule M, line 1w..... | 3 | | |
| 4 | Net modifications. Combine lines 2 and 3 | 4 | | |
| 5 | Modified federal total income. Combine lines 1 and 4 (add net increases or subtract net decreases) | 5 | | |
| 6 | Federal total deductions from Federal Form 1041, lines 16 and 22 (see instructions) | 6 | | |
| 7 | RI taxable income. Subtract line 6 from line 5 | 7 | | |
| 8 | Rhode Island income tax from RI-1041 Tax Computation Worksheet | 8 | | |
| 9 | Allocation. Enter amount from page 3, line 35 (resident estate or trusts enter 1.0000) | 9 | | |
| 10 | Rhode Island income tax after allocation. Multiply line 8 by line 9..... | 10 | | |
| 11 | Credit for income taxes paid to other states from page 3, line 42 (resident only)..... | 11 | | |
| 12 | Other Rhode Island credits from RI Schedule CR, line 9 | 12 | | |
| 13 | Total Rhode Island credits. Add lines 11 and 12 | 13 | | |
| 14 a | Rhode Island income tax after Rhode Island credits. Subtract line 13 from line 10 (not less than zero) | 14a | | |
| b | Recapture of Prior Year Other Rhode Island Credits from RI Schedule CR, line 12..... | 14b | | |
| c | Electing Small Business Trust Tax (see instructions)..... | 14c | | |
| d | RI Pass-Through Withholding from RI Schedule PTW - 1041, line 13..... | 14d | | |
| e | RI Pass-through Entity Election Tax from RI Schedule PTE, line 5..... | 14e | | |
| f | TOTAL RHODE ISLAND TAX AND WITHHOLDING. Add lines 14a through 14e..... | 14f | | |



| | |
|-------------------------|--|
| Name of estate or trust | Federal employer identification number |
|-------------------------|--|

| | | | | |
|---|-----|-----|--|--|
| 14g Total tax and withholding from page 1, line 14f..... | | 14g | | |
| 15a Rhode Island 2024 income tax withheld from RI Schedule W, line 16..... All Forms W-2 and 1099 with RI withholding AND RI Schedule W must be attached. | 15a | | | |
| b Payments on 2024 Form RI-1041ES and credits carried forward from 2023..... | 15b | | | |
| c Nonresident real estate withholding (nonresident estate or trust only)..... | 15c | | | |
| d Rhode Island pass-through withholding paid on entity's behalf..... | 15d | | | |
| e Other payments | 15e | | | |
| f Total payments. Add lines 15a through 15e..... | | 15f | | |
| g Previously issued overpayments (if filing an amended return)..... | | 15g | | |
| h NET PAYMENTS. Subtract line 15g from line 15f..... | | 15h | | |
| 16a TAX DUE. If line 14g is larger than line 15h, SUBTRACT line 15h from line 14g... | 16a | | | |
| b Enter underestimating interest due. Add to line 16a or subtract from line 17..... | 16b | | | |
| c TOTAL AMOUNT DUE. Add lines 16a and 16b..... | | 16c | | |
| 17 If line 15h is larger than line 14g, SUBTRACT line 14g from 15h. This is the amount you overpaid. If there is an amount due for underestimating interest on line 16b, subtract line 16b from line 17..... | | 17 | | |
| 18 Amount of overpayment to be refunded..... | | 18 | | |
| 19 Amount of overpayment to be applied to 2025 estimated tax | | 19 | | |

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



| | |
|-------------------------|--|
| Name of estate or trust | Federal employer identification number |
|-------------------------|--|

SCHEDULE I BENEFICIARY INFORMATION (All estates and trusts must complete this schedule)

If more space is needed, please attach the required information on a separate sheet of paper.

| | Name | Address | State of Residence | Social Security Number |
|----|-------------------|---------|--------------------|------------------------|
| 20 | Beneficiary | | | |
| 21 | Beneficiary | | | |
| 22 | Beneficiary | | | |
| 23 | Beneficiary | | | |
| 24 | Beneficiary | | | |
| 25 | Beneficiary | | | |

SCHEDULE II ALLOCATION AND MODIFICATION (To be completed by trusts and estates with nonresident beneficiaries)

| | | Column A Percent of beneficiaries' interest (must equal 100%) | Column B Column A times total federal income page 1, line 1 Total Federal Income | Column C Column A times total net modifications page 1, line 4 Modifications to Federal Income | Column D Combine Columns B and C. (add net increases or subtract net decreases.) Modified Federal Income | Column E Residents enter amount from col D. Nonresidents enter RI source income from col B. Total RI Source Income | |
|---------------------------|---|---|---|---|---|--|--|
| Resident Beneficiaries | 26 | Beneficiary ... | | | | | |
| | 27 | Beneficiary ... | | | | | |
| | 28 | Beneficiary.... | | | | | |
| Nonresident Beneficiaries | 29 | Beneficiary ... | | | | | |
| | 30 | Beneficiary ... | | | | | |
| | 31 | Beneficiary.... | | | | | |
| 32 | Total | 100% | | | | | |
| 33 | Modifications to Rhode Island source income. Enter amount from column C that is included in column E | | | | | 33 | |
| 34 | Modified Rhode Island source income. Combine lines 32, col E and 33 (add net increases - subtract net decreases) | | | | | 34 | |
| 35 | RI allocation. Divide line 34 by line 32, col D (not greater than 1.000). Enter here and on RI-1041, page 1, line 9.. | | | | | 35 | |

SCHEDULE III CREDIT FOR INCOME TAXES PAID TO ANOTHER STATE (resident estates or trusts only)

| | | | |
|----|--|----|--|
| 36 | Rhode Island income tax from page 1, line 8 | 36 | |
| 37 | Income from other state. If more than one state, see instructions..... | 37 | |
| 38 | Modified federal total income from page 1, line 5..... | 38 | |
| 39 | Divide line 37 by line 38 | 39 | |
| 40 | Multiply line 36 by line 39 | 40 | |
| 41 | Tax due and paid to other state Insert abbreviation for name of state paid | 41 | |
| 42 | Maximum tax credit (line 36, 40 or 41, whichever is the SMALLEST). Enter here and on RI-1041, page 1, line 11. | 42 | |