# Rhode Island Fiduciary Income Tax Return 2011

**Name of estate or trust**

**Address line 1**

**Address line 2**

**Federal employer identification number**

**City, town or post office**

**State**

**Zip code**

**Year End**

- Calendar Year: January 1, 2011 through December 31, 2011
- Fiscal Year: beginning ________, 2011 through ________, 20___.

## Income

1. **Federal total income of fiduciary** - Federal Form 1041, line 9
2. **Modifications increasing federal total income** from page 4, line 2J
3. **Modifications decreasing federal total income** from page 4, line 3V
4. **Net modifications** - combine lines 2 and 3
5. **Modified federal total income** - combine lines 1 and 4 (add net increases or subtract net decreases)
6. **Federal total deductions** - Federal Form 1041, lines 16 and 21
7. **RI taxable income** - subtract line 6 from line 5
8. **Rhode Island income tax from RI-1041 Tax Computation Worksheet**
9. **Allocation - enter amount** from page 2, line 34 (resident estate or trusts enter 1.0000)
10. **Rhode Island income tax after allocation** - multiply line 8 by line 9
11. **Credit for income taxes paid to other states** (resident estate or trust only)
   - Enter amount from page 2, line 41
12. **Other Rhode Island credits from page 5, Schedule CR, line 4**
13. **Total Rhode Island credits** - add lines 11 and 12
14. **Rhode Island income tax after RI credits** - subtract line 13 from line 10 (not less than zero)

## Tax and Credits

15. **Rhode Island 2011 income tax withheld** from page 3, Schedule W, line 21
   - Check if extension is attached.

## Payments

16. **TAX DUE** - If line 14 is larger than line 15E, **SUBTRACT** line 15E from line 14
17. **Refund**

## Amount Due

18. **Amount of overpayment to be refunded**
19. **Amount of overpayment to be applied to 2012 estimated tax**

**Under penalties of perjury, I declare that I have examined this return, and to the best of my knowledge and belief, it is true, correct and complete.**

**Signature of fiduciary or officer representing fiduciary**

**Date**

**Mail returns to:**

- Overpayments/Refunds - RI Division of Taxation, One Capitol Hill, Providence, RI 02908-5806
- Payments - RI Division of Taxation, One Capitol Hill, Providence, RI 02908-5807
### SCHEDULE I  BENEFICIARY INFORMATION  *(All estates and trusts must complete this schedule)*

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>State of Residence</th>
<th>Social Security Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>20.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

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

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
<th>Column C</th>
<th>Column D</th>
<th>Column E</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Federal Income</td>
<td>Modifications to Federal Income</td>
<td>Modified Federal Income</td>
<td>Total Rhode Island Source Income</td>
<td></td>
</tr>
</tbody>
</table>

#### Percent of beneficiaries' interest  *(must equal 100%)*

|------|------|------|------|

#### Resident Beneficiaries

23. Beneficiary

24. Beneficiary

25. Beneficiary

26. Beneficiary

#### Nonresident Beneficiaries

27. Beneficiary

28. Beneficiary

29. Beneficiary

30. Beneficiary

31. Total 100%

32. Modifications to Rhode Island source income - Enter amount from column C that is included in column E

33. Modified Rhode Island source income - combine lines 31, column C and 32 (add net increases - subtract net decreases).

34. RI allocation - divide line 33 by line 31, column D (not greater than 1.000) - enter here and on RI-1041, page 1, line 9.

### SCHEDULE III  CREDIT FOR INCOME TAXES PAID TO ANOTHER STATE  *(resident estates or trusts only - a signed copy of the other state return must be attached)*

35. Rhode Island income tax - page 1, line 8

36. Income from other state

37. Modified federal total income - page 1, line 5

38. Divide line 36 by line 37

39. Multiply line 35 by line 38

40. Tax due and paid to other state - Insert name of state paid

41. Maximum tax credit (line 35, 39 or 40, whichever is the **SMALLEST**). Enter here and on RI-1041, page 1, line 11.