RHODE ISLAND PASS-THROUGH RI-1096PT WITHHOLDING RETURN AND TRANSMITTAL (for attaching RI-1099PT forms)

	10301 1	(for attaching Pti-10331 1 forms)							
	Amended	Name							
Entity Typ	e								
	Sub S Corporation								
	LLC	Address line 2							
	Partnership	City, town or post office	State	ZIP	code	Federal	emp	loyer identification number	
	Trust	э.,					asia empleyer lastimodalest names.		
C:	annot distribute due	to Federal or State Restriction	s (see instructions)	/lembers w	vith less than \$1,000 i	n RI so	urce	income (see instructions)	
YEAR	REND Cale	ndar Year: January 1, 2012 th	rough December 31, 2012	Fiscal Ye	ear: beginning	_, 2012	2 thre	ough, 20	
WITH	HOLDING CA	LCULATION			column A		Sub	column B S Corps, Individuals, LLCs,	
					C Corporations only	I		Partnerships and Trusts	
1. Rł	node Island source inco	ome of nonresident members ne	t of modifications (attach schedule	e) [1a. [1b.		
▲ 2. RI	node Island nonresid	ent pass-through withholding	rate	2a.	9.0	0%	2b.	5.99%	
3. RI	node Island pass-thro	ough withholding. Multiply line	e 1 by line 2	За.			3b.		
	OTAL Rhode Island	pass-through withholding. Add	d lines 3a and 3b				4.		
9 5. RI	node Island nonresid	ent real estate withholding (se	ee worksheet below for other p	ayments)			5.		
⊟ ≥ 6. Te	entative Rhode Island	d withholding for members. S	ubtract line 5 from line 4 (not le	ess than ze	ero)		6.		
7. RI	node Island estimate	d tax paid on form RI-1096PT	-ES	7.					
-66 nı	8a. Credit for withholding paid on behalf of reporting entity. Enter the identification number(s) of issuing entity or entities below. (see instructions)							Check ✓ if extension is attached.	
8b.Rl			sales in 2012 - ONLY if entity on of Taxation at time of closing						
		•							
0 To	ital navments and cre	adite Add lines 7 8a 8h and	d 8c				_		
V						L L	9.		
10. Balance due. If line 6 is greater than line 9, subtract line 9 from line 6. The amount from line 6 should be allocated to the RI-1099PTs being issued. Remit payment for balance due, plus any 2210PT interest, using Form RI-1096V. Check ✓ ☐ if the RI-2210PT is attached. Enter interest due \$ and attach the RI-2210PT to the return.							10.		
11. Excess withholding paid. If line 9 is greater than line 6, subtract line 6 from line 9. The amount on line 9 should be allocated to the RI-1099PTs being issued to the entity's members. Excess amounts cannot be refunded or carried forward.							11.		
		,	at have been issued must e					RI-1099PT forms issued	
			D RI-1099PTs to the BACK			# issu		for \$	
		3 37	amined this return, and to the b	pest of my		, it is tr	ue, c	·	
Sign Here	· ·	of officer representing the ent	ity		Title			Date	
		preparer about this return?	Yes No No						
		of preparer other than the ent			SSN, PTIN or I	FIN		Telephone number	
	Olgitataro	or properor outer their the one	,		0011, 1 1111 01 1			, s	
Sign Here	e →							()	
			vision of Taxation - One Capito	l Hill - Pro	vidence, RI 02908-58	306			
	KSHEET FOR					_			
			LY include if a breakdown of e Taxation at the time of closing				5a.		
			ersonal return attributable to inc				5b.		
5c. Exce	ess Rhode Island wit	hholding tax paid by this entity	for members (see instructions	s)			5c.		
			edit, Motion Picture Production to Scholarship Organizations.				5d.		
5e. Total	. Add lines 5a, 5b, 5	oc and 5d (enter here and on	line 5 above)				5e.		

RI-1096PT

RHODE ISLAND PASS-THROUGH WITHHOLDING RETURN AND TRANSMITTAL

Page 2

Schedule A -

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

<u>Schedule B - Calculation for an Entity with at least one non-C Corp member with less than \$1,000.00 of income</u>

			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)	1.			
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)	2.			
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	3.			

Line by Line Instructions Schedule A

Line 1:

Column A: Enter the total amount of Rhode Island source income for ALL nonresident C Corp members of this entity.

Column B: Enter the total number of nonresident C Corp members.

Line 2:

Column A: Enter the total amount of Rhode Island source income for those nonresident C Corp members with income of less than \$1,000.00 each.

Column B: Enter the number of nonresident C Corp members with income of less than \$1,000.00 each.

Line 3:

Column A: Rhode Island source income of nonresident C Corp members with at least \$1,000.00 each of income. Subtract Line 2, Column A from Line 1, Column A. Enter amount here and on Page 1, Column A, Line 1a. Column B: Number of nonresident C Corp members with income of at least \$1,000.00.

Subtract Line 2, Column B from Line 1, Column B.

Line by Line Instructions Schedule B

Line 1:

Column A: Enter the total amount of Rhode Island source income for ALL nonresident members other than C Corporations of this entity.

Column B: Enter the total number of nonresident members other than C Corporations.

Line 2:

Column A: Enter the total amount of Rhode Island source income for those nonresident members other than C Corporations with income of less than \$1,000.00 each. Column B: Enter the number of nonresident members other than C Corporations with income of less than \$1,000.00 each.

Line 3:

Column A: Rhode Island source income of nonresident members other than C Corporations with at least \$1,000.00 each of income.

Subtract Line 2, Column A from Line 1, Column A. Enter amount here and on Page 1, Column B, Line 1b. Column B: Number of nonresidents other than C Corporations with income of at least \$1,000.00. Subtract Line 2, Column B from Line 1, Column B.