RI-8736 Application For Automatic 6 Month Extension of Time To File Rhode Island Fiduciary Income Tax Return

2013

| NAME AND ADDRESS | Name Federal | | Federal en | nployer identification number |
|---|---------------------------------------|---|------------------------------|-------------------------------|
| ADDRESS | Address line 1 Address line 2 | | | |
| | | | | |
| | City, town or post office | State | ZIP code | |
| CALCULATION | OF TAX | | | |
| 1. An additio | nal extension of time until | , 20 is hereby reques | ted in which to file. | |
| 2. For (check | k one) calendar year 2013 or | fiscal year beginning | , 2013 and ending | , 20 |
| 3. Enter the | following amounts: | _ | | |
| a. Tentative Rhode Island income tax | | | | 3a. |
| b. Rhode Island income tax withheld | | | | 3b. |
| c. 2013 estimated income tax payments made to Rhode Island | | | | 3c. |
| d. Other Rhode Island credits | | | | 3d. |
| e. Total payments and credits. Add lines 3b, 3c and 3d | | | | 3e. |
| f. Balance due. Subtract line 3e from line 3a. Pay this amount in full with this form | | | | 3f. |
| SIGNATURE AN | D VERIFICATION | | | |
| | Under penalties of perjury, I declare | that to the best of my knowledge and be | elief, the statements made I | herein are true and correct. |
| Preparer's signature | • • | | Date • | |
| Preparer's name (print or type) | → | | FEIN / PTIN ➡ | |
| Title of preparer (print or type) | | | | vision contact your Yes |
| GENERAL INST | RUCTIONS | | | |

- Use Form RI-8736 to apply for an automatic six month extension of time to file Form RI-1041.
- Prepare this form and file original with:

Rhode Island Division of Taxation One Capitol Hill Providence, RI 02908-5806

- Pay the amount shown on line 3f of this form.
- The filing or granting of an extension of time does not extend the time for payment of tax due on the return.
- File this form on or before the regular due date of your return (without regard to any extension of time to file).
- The regular due date for filing is usually the 15th day of the 4th month following the close of the tax year.
- The form must be signed by the fiduciary or the person authorized to represent the taxpayer.
- If no payment is required to be made with Form RI-8736 and the fiduciary is filing a Federal Form 7004 for the same period of time, the fiduciary does not need to submit Form RI-8736. Attach a copy of Federal Form 7004 to Form RI-1041 when the return is submitted.

PAYMENT BY CREDIT CARD

OFFICIAL PAYMENTS CORP.

Contact the service provider listed on this page and follow their instructions. Enter on this form in the upper left hand corner the confirmation number you were given at the end of the transaction and the amount of your tax payment (not including the convenience fee). See tax return instructions for more details.

Telephone: 1-800-2PAY-TAX

1-800-272-9829

Internet:

www.officialpayments.com







