

State of Rhode Island and Providence Plantations 2015 RI-1041

Fiduciary Income Tax Return

You <u>must</u> check a box:		Name of estate or trust					Federal employer identification number		
Estates and Trusts		Name and title of fiducia	агу						
Bankruptcy Estate		Address 1							
Amer Retu		Address 2							
		City, town or post office	State	ZIP code	•	E-mail address			
Year End		Calendar Year: 01/01/20	15 through 12/31/2015 Fig	scal Year:	beginn	ing MM/DD/201	L5 throug	gh MM/DD /2 (016
Income	1 Fee	deral total income of fiduci	ary from Federal Form 1041, line	9			1		
			ral total income from page 4, line						
			eral total income from page 4, lin		3				
		-	lines 2 and 3				4		
	5 Mo	dified federal total income	. Combine lines 1 and 4 (add ne	t increase	s or su	btract net decreases)	5		
	6 Fee	deral total deductions from	n Federal Form 1041, lines 16 and	d 21 (see	instru	ctions)	6		
			line 6 from line 5						
Tax and	8 Rh	ode Island income tax fror	n RI-1041 Tax Computation Work	ksheet			8		
Credits	9 Allo	ocation. Enter amount from	9						
		ode Island income tax afte							
	11 Cre	redit for income taxes paid to other states from pg 2, line 41 (resident only) 11							
	12 Oth	her Rhode Island credits fr							
	13 Tot	tal Rhode Island credits. A	13						
	14a Rh	ode Island income tax afte	er RI credits. Subtract line 13 fror	m line 10 (not les	s than zero)	14a		
	b Re	capture of Prior Year Othe	apture of Prior Year Other Rhode Island Credits from RI Schedule CR, line 10						
		cting Small Business Trust Tax. (see instructions)							
	d TO	AL RHODE ISLAND TAX. Add lines 14a, 14b and 14c							
Payment	s 15a Rh	ode Island 2015 income tax	withheld from page 3, Schedule W,	line 16					
,			withholding AND Schedule W must be		15a				
	b Pa	yments on 2015 Form RI-1041ES and credits carried forward from 2014 15b 15c						Check ✓ if	
	c No							extension is attached.	
	d Otł	her payments			15d				
	e Tot	tal payments. Add lines 15	5a, 15b, 15c and 15d				15e		
Amount	16a TA	X DUE. If line 14d is larger that	an line 15e, SUBTRACT line 15e fror	m line 14d.	16a				_
Due	b Ch	eck ✓ if RI-2210 is att	ached. Enter underestimating inter	est due.					
	Ado	d to line 16a or subtract from	ו line 17		16b				
	c TOTAL AMOUNT DUE. Add lines 16a and 16b					16c			
Refund 17 If line 15e is larger than line		ine 15e is larger than line '	14d, SUBTRACT line 14d from 1	5e. This i	s the a	amount you overpaid			
			underestimating interest on line 1	nderestimating interest on line 16b, subtract line 16b from line 17		16b from line 17	17		
	18 Am	nount of overpayment to be	e refunded		18				
19 Amount of overpayment to be applied to 2016 estimated tax						19			
	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and t belief, it is true, accurate and complete. Declaration of preparer (other than taxpayer) is based on all information of whic							, ,	
Authorized officer s			Print name	/		Date	Telephone number		

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Paid preparer signature	Print name		Date	Telephone number	
Paid preparer address	City, town or post office	State	ZIP Code	PTIN	



Fiduciary Income Tax Return

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Name	01	esiale	01	ITUSE

Federal employer identification number

SCHEDULE I

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

State of

		Name	Address	Residence	Social Security Number
20	Beneficiary				
21	Beneficiary				
22	Beneficiary				

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

SCH	SCHEDULE II ALLOCATION AND MODIFICATION (To be completed by trusts and estates with nonresident beneficiaries)									
			Column A	Column B	Column C		Column D		Column E	
			Percent of beneficiaries' interest	Column A times total federal income page 1, line 1	Column A times tot net modifications page 1, line 4	al	Combine Columns B ar (add net increases of subtract net decrease	or	Residents enter amour col D. Nonresidents er source income from c	nter RI
			(must equal 100%)	Total Federal Income	Modifications to Federal Income		Modified Federal Income		Total RI Source Income	
	23	Beneficiary								
Resident Beneficiaries	24	Beneficiary								
Resi Benefi	25	Beneficiary								
	26	Beneficiary								
	27	Beneficiary								
Nonresident Beneficiaries	28	Beneficiary								
Nonre Benefi	29	Beneficiary								
	30	Beneficiary								
31	Tota	al	100%							
32	32 Modifications to Rhode Island source income. Enter amount from column C that is included in column E						32			
33	33 Modified Rhode Island source income. Combine lines 31, col E and 32 (add net increases - subtract net decreases)						33			
34	RI al	location. Divide	e line 33 by line 3	1, col D (not greater tha	n 1.000). Enter here and	d on RI	-1041, page 1, line 9	34	·	

SC	HEDULE III CREDIT FOR INCOME TAXES PAID TO ANOTHER STATE	(resid	ent estates or trusts of	only)
35	Rhode Island income tax from page 1, line 8	35		
36	Income from other state. If more than one state, see instructions	36		
37	Modified federal total income from page 1, line 5	37		
38	Divide line 36 by line 37	38	•	
39	Multiply line 35 by line 38	39		
40	Tax due and paid to other state Insert abbreviation for name of state paid	40		
41	Maximum tax credit (line 35, 39 or 40, whichever is the SMALLEST). Enter here and on RI-1041, page 1, line 11.	41		