

State of Rhode Island and Providence Plantations

2015 Form RI-1096PT

Pass-through Withholding Return and Transmittal

		l employer identification number				
	Amended	Address				
	Sub S Corp	Address 2				
	LLC	Address 2				
	Partnership	City, town or post office Sta	ate	ZIP code E-mail	addre	SS
		Year end		2004 / DD / 2015		1515 / D.D. /
L	Trust	Calendar Year: January 1, 2015 through December 31, 2015 Fis	cal Y	ear: MM/DD/2015	throug	h MM/DD/
WITI	Cannot distribu	S	income (see instructions) Column B Sub S Corps, Individuals, Cs, Partnerships & Trusts			
1	Rhode Island	source income of nonresident members net of modification	1a		1b	
2	Rhode Island	nonresident pass-through withholding rate	. 2a	7.0%	2b	5.99%
3	Rhode Island	pass-through withholding. Multiply line 1 by line 2	. 3a		3b	
4	TOTAL Rhode	. 4				
5	Rhode Island	5				
6	Tentative Rhoo	6				
7	Rhode Island	estimated tax paid on Form RI-1096PT-ES	7			
88	Credit for with number(s) of is ID#		Check ✓ if extension is			
8t	8b Rhode Island nonresident withholding on real estate sales in 2015 ONLY if entity name, not members' names, was provided to Division of Taxation at time of closing 8b					attached.
80	Other paymen	ts	8c			
9	Total payment	s and credits. Add lines 7, 8a, 8b and 8c			. 9	
10	Balance due. to the RI-1099 Check if t	10				
11	Excess withh be allocated to t					
NOT		nholding from all RI-1099PTs that have been issued must nount from line 6 or line 9 above, whichever is larger.	Nun	aber of 1099s issued:		. '
	•	SUED RI-1099PTs to the BACK of this Form RI-1096PT.	Tota	I amount of 1099s issued:		

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Name		Federa	al emplo	oyer identifi	cation numbe	
CHEDULE A - ALCULATION FOR AN ENTITY WITH AT LEAST ONE C CORP MEMBER WI	TH LI	ESS THA	N \$1,0	000.00 O	F INCOME	
				olumn A prporations		
1 Rhode Island source income of ALL nonresident C Corporation members net of modifications (attach schedule)	1				Members	
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 more net of modifications. Subtract line 2 from line 1. Enter here and on pg 1, Col A, Line 1a	3					
CHEDULE B - ALCULATION FOR AN ENTITY WITH AT LEAST ONE NON-C CORP MEMBER	umn A Individuals, LLCs,		O OF INCO Column B Number of Members			
Rhode Island source income of ALL nonresident members other than C Corporations net of modifications (attach schedule)	1	Partnership	s and i	rusts	Wellbers	
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					
ORKSHEET FOR PAGE 1, LINE 5						
5a Rhode Island nonresident real estate withholding - ONLY include if a breakdown of each sharel holding amount was provided to the RI Division of Taxation at the time of closing - Attach copy			5a			
5b Rhode Island estimated tax paid by members on their personal return attributable to income on thi structions).	n (see in-	5b				
5c Excess Rhode Island withholding tax paid by this entity for members (see instructions)	5c					
5d Rhode Island credit purchased by a member for use in 2015. Refer to Schedule CR for elgible of	5d					
5e Total. Add lines 5a, 5b, 5c and 5d. Enter here and on page 1, line 5			5e			
Inder penalties of perjury, I declare that I have examined this return and accompanying schedules and pelief, it is true, accurate and complete. Declaration of preparer (other than taxpayer) is based on all authorized officer signature Print name Date of the print part of the pri	nform		ch prepa		y knowledge.	
Paid preparer signature Print name Date	е		Tele	phone num	ber	
Paid preparer address City, town or post office Sta	te	ZIP Code	PTII	V		