

## State of Rhode Island Division of Taxation **2022 RI-1041**



22101799990101

Fiduciary Income Tax Return
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You must check a		a	Name of estate or trust Fec						Federal er	mployer identifica	tion number	
Estates and Trusts		t	Name and title of fiducia	ary								
Bank Estat	ruptcy e		Address 1									
Amer Retur			Address 2									
			City, town or post office		State	ZIP code	)	E-mail address				
Year End			Calendar Year: 01/01/20	22 through 12/31/2022	Fis	cal Year: I	peginni	ing $MM/DD/20$	22 throug	gh MM/DD/	2023	
Income	1	Fed	eral total income of fiduc	iary from Federal Form 10	41, line	9			1		-	
				eral total income from Sch			2					
			•	eral total income from Sch			3	i				
	4		-	lines 2 and 3					4			
	5	Mod	ified federal total income	e. Combine lines 1 and 4 (	add ne	t increase	s or su	btract net decreases)	5			
	6		eral total deductions fron									
	7			line 6 from line 5								
Tax and	8	Rho	de Island income tax fro	m RI-1041 Tax Computation	on Work	sheet			8			
Credits				m page 2, line 34 ( <b>resider</b>								
Orcaito				er allocation. Multiply line				*	-			
				other states from pg 2, line 4								
			•	rom Schedule CR, line 9	,							
	13			Add lines 11 and 12					13			
				er RI credits. Subtract line				,				
				er Rhode Island Credits fro								
				st Tax. (see instructions).								
				X. Add lines 14a, 14b and					140			
Payments	siba			withheld from Schedule W,			45.					
				withholding AND Schedule W								
				041ES and credits carried fo								
				nolding ( <b>nonresident esta</b>		• 1						
				5a, 15b, 15c and 15d					15e			
Amount	16a	TAX	<b>DUE</b> . If line 14d is larger th	an line 15e, <b>SUBTRACT</b> line	15e fror	n line 14d.	16a					
Due	b	Ente	r underestimating interest	due. Add to line 16a or subt	ract fron	n line 17	16b					
	С	тот	AL AMOUNT DUE. Add	d lines 16a and 16b					16c			
Refund	17	If lin	e 15e is larger than line	d.								
		If the	ere is an amount due for	17								
	18	Amo	ount of overpayment to b	e refunded			18					
	19	Amo	ount of overpayment to b	e applied to 2023 estimate	ed tax				19			
Under per	nalties	s of n	eriury. I declare that I ha	ve examined this return an	nd accor	mpanving	schedi	ules and statements, a	and to the l	nest of my know	ledge and	
				claration of preparer (other		. , .				•	•	
Authorized officer s		er si								Telephone number		
Paid prepa	arer s	igna	ture	Print nam	е			Date	Tele	phone number		
' '		-										
Paid preparer address			ess	City, town or post of	wn or post office State ZIP Code				PTIN			



## State of Rhode Island Division of Taxation **2022 RI-1041**

Fiduciary Income Tax Return



22101799990102

Nam	e of e	estate or trust	Federal er	mployer identification number					
SCI	HEC	OULE I	<b>BENEFIC</b>	IARY INFORM	ATION (All estates and		sts must complete t	State of	,
			T 4 CI		ridaroo	,,,			- Coolar Ocounty Humber
20	Bene	ficiary							
21	Bene	ficiary							
22	Bene	ficiary							
	If mo	ore space is nee	eded, please attac	th the required informa	tion on a separate sheet of	pape	r.		
SCI	HED	DULE II A	LLOCATIO Column A	N AND MODIF	TICATION (To be com	plete	d by trusts and esta Column D		nonresident beneficiaries) Column E
			Percent of beneficiaries'	Column A times total federal income page 1, line 1	Column A times total net modifications page 1, line 4		Combine Columns I (add net increas subtract net decre	es or	Residents enter amount from col D. Nonresidents enter RI source income from col B.
			interest (must equal 100%)	Total Federal Income	Modifications to Federal Inc	ome	Modified Federal	Income	Total RI Source Income
	23	Beneficiary		 	1				
Resident Beneficiaries	24	Beneficiary							
Res	25	Beneficiary							
	26	Beneficiary							
	27	Beneficiary							
Nonresident Beneficiaries	28	Beneficiary							
Nonre Benef	29	Beneficiary							
	30	Beneficiary							
31	Tota	al	100%						
32	Modi	fications to Rho	ode Island source	income. Enter amoun	t from column C that is inclu	uded	in column E	32	
33	Modi	fied Rhode Isla	nd source income	. Combine lines 31. co	I E and 32 (add net increase	es - si	ubtract net decrease	es) 33	

SC	HEDULE III CREDIT FOR INCOME TAXES PAID TO ANOTHER STATE	(resid	ent estates or trusts 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 <b>SMALLEST</b> ). Enter here and on RI-1041, page 1, line 11.	41	

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