

Name			Federal employer identification number
Address			For the period ending:
Address 2			
City, town or post office	State	ZIP code	E-mail address

1st estimate is due by the 15th day of the third month of the taxable year; 2nd estimate is due by the 15th day of the sixth month of the taxable year

## Part 1: Declaration of estimated tax

Check the box next to the form for which you are making an estimated payment. Check only one box.

Form RI-1120POL -	Rhode Islai	nd Political	Organization	- Kev #77

Form T-71 - Rhode Island Gross Premium Insurance - Key #13

Form T-72 - Rhode Island Public Service Corporation Gross Earnings - Key #22

Form T-74 - Rhode Island Banking Institution Excise - Key #11

Form T-86 - Rhode Island Bank Deposits - Key #10

Mail voucher and payment to: RI Division of Taxation One Capitol Hill - Suite 9 Providence, RI 02908-5811

## Part 2: Amount due with estimate

1	Total tax from prior year	1	
2	Estimated tax due for the current year	2	
3	Estimated tax payment due (40% for first estimate, 60% for second estimate)	3	
4	Overpayment carried forward from prior year being applied to this payment	4	
5	Amount due with this estimate. Subtract line 4 from line 3	5	

## Payments can be made online. For more information, visit: https://www.ri.gov/taxation/business/index.php

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, it is true, accurate and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.						
Authorized officer signature	Print name		Date	Telephone number		
Paid preparer signature	Print name		Date	Telephone number		
Paid preparer address	City, town or post office	State	ZIP Code	PTIN		