State of Rhode Island Division of Taxation

# 2025 Form RI-1040C

Composite Income Tax Return

25102499990101

☐ Amended
☐ Sub S Corp
☐ LLC
☐ Partnership
☐ Trust

| Name | Federal employer identification number |
|---|---|
| | |

Address

Address 2

| City, town or post office | State | ZIP code | E-mail address |
|---|---|---|---|
| | | | |

Year end

☐ Calendar Year: January 1, 2025 through December 31, 2025 ☐ Fiscal Year: MM/DD/2025 through MM/DD/__

**SECTION A: COMPUTATION OF INCOME**

| | | | | |
|---|---|---|---|---|
| 1 | Total Federal Taxable income from Federal Form 1120S, line 22, Federal Form 1065, line 23 or Federal Form 1041, line 23, plus any separately stated income or deduction items listed on Federal K-1 | | | 1 |
| **MODIFICATIONS INCREASING FEDERAL TAXABLE INCOME** | | | | |
| 2a | Income from obligations of any state or its political subdivisions, other than RI (attach documentation) | 2a | | |
| b | Bonus Depreciation | 2b | | |
| c | Taxable portion of Paycheck Protection Program Loan amount under RIGL §44-30-12(b)(8) | 2c | | |
| d | Add back of Federal P.L. 119-21 H.R.1 Provisions from 2025 RI Schedule HR1 - Entity | 2d | | |
| e | Other modifications (attach documentation) | 2e | | |
| 3 | Total modifications INCREASING Federal Taxable Income. Add lines 2a, 2b, 2c, 2d and 2e | | | 3 |
| **MODIFICATIONS DECREASING FEDERAL TAXABLE INCOME** | | | | |
| 4a | Income from obligations of the US government included in federal income but exempt from state income taxes (attach documentation) | 4a | | |
| b | Bonus Depreciation and Section 179 Depreciation | 4b | | |
| c | Section 174A Amortization Adjustment for research and development expensing | 4c | | |
| d | Other modifications (attach documentation) | 4d | | |
| 5 | Total modifications **DECREASING** Federal Taxable Income. Add lines 4a, 4b, 4c and 4d | | | 5 |
| 6 | Modified Federal Taxable Income. Line 1 plus line 3 less line 5 | | | 6 |
| 7 | RI apportionment ratio from pg 2, Section C, line 27. (Multistate entities only - entities solely in RI enter 1.0000) | | | 7 __ . __ __ __ __ |
| 8 | Rhode Island source income. Multiply line 6 by line 7 | | | 8 |

**SECTION B: COMPUTATION OF TAX**

| | | | | |
|---|---|---|---|---|
| 9 | Rhode Island income tax using the **COMPOSITE INCOME TAX RATE**. Multiply line 8 by 5.99% (0.0599) | | | 9 |
| 10 | Qualified electing nonresident members' percent of ownership. If all members are nonresidents enter 1.0000 | | | 10 __ . __ __ __ __ |
| 11 | Rhode Island income tax of qualified electing nonresident members. Multiply line 9 by line 10 | | | 11 |
| 12 | Rhode Island estimated payments made on RI-1040C-ES and amount applied from 2024 composite return | 12 | | |
| 13 | Rhode Island nonresident real estate withholding of qualified electing nonresident members | 13 | | |
| 14 | Rhode Island nonresident withholding received from pass-through entities from Form RI K-1. **Attach form(s)** | 14 | | |
| 15 | Other payments | 15 | | |
| 16 | Total payments. Add lines 12, 13, 14 and 15 | | | 16 |
| 17 | **AMOUNT DUE**. If line 11 is **LARGER** than line 16, subtract line 16 from line 11 | | | 17 |
| 18 | Underestimating interest | | | 18 |
| 19 | **TOTAL AMOUNT DUE**. Add lines 17 and 18. Complete Form RI-1040C-V ☹ | | | 19 |
| 20 | **OVERPAYMENT**. If line 11 is **SMALLER** than line 16, subtract line 11 from line 16. This is the amount overpaid. **If there is an amount due for underestimating interest on line 18, subtract line 18 from line 20** ☺ | | | 20 |
| 21 | Amount of overpayment to be refunded | | | 21 |
| 22 | Amount of overpayment to be applied to 2026 RI-1040C estimated tax | 22 | | |

State of Rhode Island Division of Taxation

# 2025 Form RI-1040C

Composite Income Tax Return

25102499990102

| Name | Federal employer identification number |
|---|---|
| | |

## SECTION C: APPORTIONMENT

### AVERAGE NET BOOK VALUE

| | | Column A Rhode Island | Column B Everywhere |
|---|---|---|---|
| 23a | Inventory | 23a | |
| b | Depreciable assets | 23b | |
| c | Land | 23c | |
| d | Rent (8 times annual net rental rate) | 23d | |
| e | Total. Add lines 23a, 23b, 23c and 23d | 23e | |
| f | Ratio in Rhode Island, line 23e, Column A divided by line 23e, Column B. Calculate to four (4) decimal places | 23f | . |

### RECEIPTS

| | | | Column A Rhode Island | Column B Everywhere |
|---|---|---|---|---|
| 24a | Gross receipts | Rhode Island Sales | 24a | |
| | | Sales Under 44-11-14(a)(2)(i)(B) | | |
| b | Dividends | 24b | | |
| c | Interest | 24c | | |
| d | Rents | 24d | | |
| e | Royalties | 24e | | |
| f | Net capital gains | 24f | | |
| g | Ordinary income | 24g | | |
| h | Other income | 24h | | |
| i | Income exempt from federal taxation | 24i | | |
| j | Total. Add lines 24a, 24b, 24c, 24d, 24e, 24f, 24g, 24h and 24i | 24j | | |
| k | Ratio in Rhode Island, line 24j, Column A divided by line 24j, Column B. Calculate to four (4) decimal places | 24k | . | |

### SALARIES

| | | Column A Rhode Island | Column B Everywhere |
|---|---|---|---|
| 25a | Salaries and wages paid or incurred | 25a | |
| b | Ratio in Rhode Island, line 25a, Column A divided by line 25a, Column B. Calculate to four (4) decimal places | 25b | . |

### RATIO

| | | | |
|---|---|---|---|
| 26 | Total of Rhode Island ratios shown on lines 23f, 24k and 25b | 26 | . |
| 27 | Apportionment Ratio. Divide line 26 by the number 3 or the number of ratios used. Enter here and on pg 1, Sect A, line 7 | 27 | . |

## SECTION D: QUALIFIED ELECTING MEMBER INFORMATION

**If needed, attach additional schedules.**

| Name | Address | Social Security Number | RI Source Income | RI Income Tax |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

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** |
| | | | | |

May the Division of Taxation contact your preparer? ☐ YES

Rhode Island has an Electonic Mandate for filing a return and remitting a payment.

See the 2025 RI-1040C Instructions for more information on the requirements and how to file and pay.