

**RHODE ISLAND DIVISION OF TAXATION
ONE CAPITOL HILL STE 9
PROVIDENCE, RI 02908-5811**

RI-1120A(S)

Business Corporation Tax Short Form Return

Tax Year Beginning _____ Tax Year Ending _____

Name _____

Who May File RI-1120A(S)

Address _____

A corporation may file Form RI-1120A(S) if it meets ALL of the following criteria:

City, State, Zip _____

- ◆ Conducts 100% of its business in Rhode Island (does not apportion income)
- ◆ Does not file a consolidated tax return
- ◆ Must attach Federal K1's if a Subchapter S Corporation and Schedule SN's if there are non-resident shareholders
- ◆ Claims no tax credits except for payments
- ◆ Is not a Limited Liability Company
- ◆ Is required to pay only the minimum tax as defined in R.I.G.L. 44-11-2(e)
- ◆ Is not a Tentative or Pro Forma Return
- ◆ Is not a Final Return
- ◆ Is not an Initial Return

Worksheet for Line Items:

Line 1 Enter the amount of Federal Taxable Income: (Line 28 of Federal 1120 or Line 24 of Federal 1120A; enter line 21 of Federal 1120 ES and minimum tax on Line 5). _____

Line 2 a. Net Operating Loss Deduction _____
 b. Special Deductions _____
 c. Exempt Dividends and Interest _____
 d. Foreign Dividend Grossup (s78), US 1120, (Schedule C, Line 15) _____

Line 3 a. Interest exempt for federal but taxable R.I. _____
 b. Rhode Island Corporation Taxes _____

Line 4 Rhode Island Adjusted Taxable Income (Line 1 minus Line 2 plus Line 3) _____

Line 5 Rhode Island Business Corporation Income Tax (9% of Line 4 but not less than \$250.00) _____ **\$250.00**

Line 6 Less payments made for taxable year _____

Line 7 Less Refund to Taxpayer _____

Line 8 Less Credit to 2000 Estimated Tax _____

Line 9 Amount Due (Overpayment) Line 5 minus Line 6 _____

A COPY OF THE FEDERAL TAX RETURN IS NOT REQUIRED TO BE ATTACHED TO THIS RETURN, BUT MUST BE MADE AVAILABLE ON DEMAND.

**MAIL BOTTOM COUPON ONLY
KEEP UPPER PORTION FOR YOUR RECORDS**



STATE OF RHODE ISLAND
DIVISION OF TAXATION * ONE CAPITOL HILL STE 9, PROVIDENCE, RI 02908-5811

**CORPORATION TAX RETURN
SHORT FORM 1120A(S)
MINIMUM TAX FILERS ONLY**

TEMPORARY

Use in lieu of preprinted coupon booklet

NAME		TAXPAYER IDENTIFICATION #
ADDRESS		1120A(S)
CITY	STATE ZIP	
TAX YEAR BEGINNING	TAX YEAR	
SIGNATURE OF OFFICER OR AUTHORIZED REPRESENTATIVE		
PRINT NAME	DATE	
PHONE NUMBER		

5. RHODE ISLAND BUSINESS CORPORATION TAX	2 5 0 0 0
6. LESS PAYMENTS MADE FOR TAXABLE YEAR	
7. LESS REFUND TO TAXPAYER	
8. LESS CREDIT TO 2000 ESTIMATED TAX	
9. AMOUNT DUE (OVERPAYMENT) LINE 5 MINUS LINE 6	\$

