



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
DIVISION OF TAXATION - DEPT#200 - PO BOX 9703 - PROVIDENCE, RI 02940-9703

WITHHOLDING TAX RETURN
MONTHLY

TEMPORARY

Use in lieu of preprinted coupon booklet

| |
|-----------------------|
| NAME |
| ADDRESS |
| CITY, STATE, ZIP CODE |

WTM

| | |
|---|--|
| FEDERAL IDENTIFICATION NUMBER | |
| RETURN FOR MONTH ENDING | |
| TAX AMOUNT DUE AND PAID | <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> |
| SIGNATURE OF OWNER, PARTNER OR AUTHORIZED AGENT | TITLE <input type="text"/> DATE <input type="text"/> |



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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
DEPARTMENT OF REVENUE
DIVISION OF TAXATION

INSTRUCTIONS FOR PREPARING MONTHLY RETURN

DUE ON OR BEFORE THE 20TH OF EACH MONTH FOR THE PREVIOUS CALENDAR MONTH,

EXCEPT FOR THE MONTHS OF MARCH, JUNE, SEPTEMBER AND DECEMBER WHICH ARE DUE ON OR BEFORE THE LAST DAY OF THE FOLLOWING MONTH WHO MUST USE THIS FORM

- GENERAL INSTRUCTIONS**
- a. Enter the employer's name and address in the appropriate sections above.
 - b. Enter the employer's Federal Identification Number in the section marked "FEDERAL IDENTIFICATION NUMBER".
 - c. Enter the month and year covered by this return in the section marked "RETURN FOR MONTH ENDING". Returns and remittances should be for all income taxes withheld from wages paid during the month.
 - d. Enter the amount withheld and remitted in the section marked "TAX AMOUNT DUE AND PAID".
 - e. The return must be signed. The person signing must also identify themselves as "owner", "partner", or in the case of a corporation, "treasurer" etc.

This form must be used by employers who withhold \$50.00 or more, but less than \$600.00 for a calendar month from employees' wages.

Consecutive returns for each calendar month accounting for all taxes withheld during the year must be filed by an employer required to report monthly. If no tax was withheld during a particular month, a return is still required to be filed for such month. In this case, enter \$0 in the "TAX AMOUNT DUE AND PAID" box.

If the amount withheld reaches or exceeds \$600.00 for any calendar month, the employer must begin to file quarter/monthly or daily as required.

An annual reconciliation of tax withheld must be filed by the employer with the Division of Taxation on or before February 28th.

Electronic Funds Transfer (EFT) is mandated for some taxpayers. Both ACH credit and ACH debit methods are available. For information or authorization on Electronic Funds Transfer, please call (401) 574-8732 or (401) 574-8901 . You can also visit www.tax.ri.gov/onlineservices/ for more information.