State of Rhode Island and Providence Plantations

Form RI-100A

Estate Tax Return - Date of death on or after 1/1/2015

16160299990101

FILING FEE: $50.00 - DEATH CERTIFICATE REQUIRED

Check below if:

- [x] Died Testate. Attach a copy of the will and death certificate.
- [x] Federal Form 4768 is attached
- [x] Pro Forma Return
- [x] Amended Return

Field	Value
Decedent's first name	XXXXXXXXXXXXXXX
MI	X
Last name	XXXXXXXXXXXXXXXXXX
Suffix	XXX
Decedent's social security number	999-99-9999
Decedent's address - Legal residence (domicile) at time of death	XXXXXXXXXXXXXXXXXXXXXXXXXXXX
City, town or post office	XXXXXXXXXXXXXXXXXXX
State	XX
ZIP code	99999
Foreign country, if applicable	XXXXXXXXXXXXXXXXXXXXXX
Year domicile established	9999
Date of birth	08/01/2016
Date of death	08/01/2016
Executor/personal rep/admin's first name	XXXXXXXXXXXXXXXX
MI	X
Last name	XXXXXXXXXXXXXXXXXX
Suffix	XXX
Executor/personal rep/admin's SSN	999-99-9999
Executor/personal rep/admin's address	XXXXXXXXXXXXXXXXXXXXXXXXXXXX
City, town or post office	XXXXXXXXXXXXXXXXXXX
State	XX
ZIP code	99999
Preparer's first name	XXXXXXXXXXXXXXXX
MI	X
Last name	XXXXXXXXXXXXXXXXXX
Suffix	XXX
Preparer telephone number	(999) 999-9999
Preparer's firm name, if applicable	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Preparer's address	XXXXXXXXXXXXXXXXXXXXXXXXXXXX
City, town or post office	XXXXXXXXXXXXXXXXXXX
State	XX
ZIP code	99999
Name and location of court where will was probated or estate administered	XXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXX
Case number	X9X9X9X9X9X9X

PART 1 - NET TAXABLE ESTATE

1	Total gross estate less exclusion from page 4, part 7, line 12	1	9999999999999 99
2	Total allowable deductions from page 4, part 7, line 23	2	9999999999999 99
3	Net taxable estate. Subtract line 2 from line 1	3	9999999999999 99
4	RHODE ISLAND ESTATE TAX. Use the tax computation schedule on page 23. Enter on either page 1, Part 2, line 1 or page 2, Part 3, line 1; whichever applies	4	9999999999999 99

PART 2 - COMPUTATION OF TAX - DECEDENT DOMICILED IN RHODE ISLAND

ONLY COMPLETE THIS SECTION IF THE DECEDENT WAS DOMICILED IN RHODE ISLAND. DECEDENTS DOMICILED OUTSIDE OF RHODE ISLAND SHOULD COMPLETE PART 3 ON PAGE 2.

1	Rhode Island estate tax from part 1, line 4 above	1	9999999999999 99
2	Total gross estate less exclusion from page 4, part 7, line 12	2	9999999999999 99
3	Non Rhode Island gross estate	3	9999999999999 99
4	Percentage which non Rhode Island gross estate is of federal gross estate. Divide line 3 by line 2	4	0.1234
5	Adjusted state death tax credit. Multiply line 1 by line 4	5	9999999999999 99
6	TAX PAYABLE TO RHODE ISLAND. Subtract line 5 from line 1	6	9999999999999 99
7	PAYMENTS MADE	7	9999999999999 99
8	AMOUNT DUE. If line 6 is more than line 7, subtract line 7 from line 6. This is the amount owed	8	9999999999999 99
9	REFUND DUE. If line 7 is more than line 6, subtract line 6 from line 7. This is the amount overpaid	9	9999999999999 99

Mail to RI Division of Taxation - One Capitol Hill - Providence, RI 02908

State of Rhode Island and Providence Plantations

Form RI-100A

Estate Tax Return - Date of death on or after 1/1/2015

16160299990102

Decedent's name	Decedent's social security number
XXXXXXXXXXXXXXXX X XXXXXXXXXXXXXXXXXX XXX	999-99-9999

PART 3 - COMPUTATION OF TAX - DECEDENT DOMICILED OUTSIDE RHODE ISLAND

ONLY COMPLETE THIS SECTION IF THE DECEDENT WAS DOMICILED OUTSIDE OF RHODE ISLAND. DECEDENTS DOMICILED IN RHODE ISLAND SHOULD COMPLETE PART 2 ON PAGE 1.

1	Rhode Island estate tax from page 1, part 2, line 4	1	9999999999999 99
2	Federal gross estate	2	9999999999999 99
3	Rhode Island gross estate (RI real and tangible property)	3	9999999999999 99
4	Percentage which Rhode Island gross estate is of federal gross estate. Divide line 3 by line 2	4	0.1234
5	TAX PAYABLE TO RHODE ISLAND. Multiply line 1 by line 4	5	9999999999999 99
6	PAYMENTS MADE	6	9999999999999 99
7	AMOUNT DUE. If line 5 is more than line 6, subtract line 6 from line 5. This is the amount owed	7	9999999999999 99
8	REFUND DUE. If line 6 is more than line 5, subtract line 5 from line 6. This is the amount overpaid	8	9999999999999 99

PART 4 - ELECTIONS BY THE EXECUTOR

Please check yes or no for each question

1	Do you elect alternate valuation?	1	Yes X	X No
2	Do you elect special use valuation? If yes, you must complete and attach Schedule A-1	2	Yes X	X No
3	Do you elect Deceased Spouse's Unused Exclusion "portability" on the Federal level	3	Yes X	X No

PART 5 - GENERAL INFORMATION

1 Marital status of the decedent at time of death:

	Name	SSN	Date
X Married - Enter spouse's name and SSN:	XXXXXXXXXXXXXXXXXXXXXX	999-99-9999	
X Widow/widower - Enter spouse information:	XXXXXXXXXXXXXXXXXXXXXX	999-99-9999	08/01/2016

X Single X Legally separated X Divorced - Enter date divorce decree became final: 08/01/2016

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. If there is more than one executor/ administrator/ personal representative, please attach a separate sheet listing the full name, address and social security number for each executor/ administrator/ personal representative.

Executor/personal representative/administrator signature	Date	Telephone number
	08/01/2016	(555) 555-5555

Preparer signature	Date	PTIN
	08/01/2016	X99999999

I declare that I am the (Please check one) X Attorney X Certified public accountant X Enrolled agent for the executor and prepared this return for the executor. I am not under suspension or disbarment from practice before the IRS and am qualified in the state shown above.

May the Division of Taxation contact your preparer? YES X

State of Rhode Island and Providence Plantations

Form RI-100A

Estate Tax Return - Date of death on or after 1/1/2015

16160299990103

Decedent's name	Decedent's social security number
XXXXXXXXXXXXXXXX X XXXXXXXXXXXXXXXXX XXX	999-99-9999

PART 5 - GENERAL INFORMATION (continued)

2 Death certificate number and issuing authority (attach a copy of the death certificate to this return) _____

3 Decedent's business or occupation. If retired, enter decedent's former business or occupation _____

4 Individuals (other than surviving spouse), trusts or other estates who receive benefits from the estate (do not include charitable beneficiaries shown in Schedule O). Attach additional sheets if necessary.

Name of individual, trust or estate receiving $5,000 or more	Identifying number	Relationship to decedent	Amount

Please **CIRCLE** yes or no for each question. If you answer yes to any question 6 -14, you must attach additional information.

5 Does the gross estate contain any IRC section 2044 property (qualified terminable interest property from a prior gift or estate)?	5	Yes	No
6 a Was there any insurance on the decedent's life that is not included on the return as part of the gross estate?	6a	Yes	No
b Did the decedent own any insurance on the life of another that is not included in the gross estate?	6b	Yes	No
7 Did the decedent at the time of death own any property as a joint tenant with the right of survivorship in which (a) one or more of the other joint tenants was someone other than the decedent's spouse, and (b) less than the full value of the property is included on the return as part of the gross estate? If yes, complete and attach Schedule E.	7	Yes	No
8 Did the decedent, at the time of death, own any interest in a partnership or unincorporated business or any stock in an inactive or closely held corporation	8	Yes	No
9 Did the decedent make any transfer described in IRC section 2035, 2036, 2037 or 2038? If yes, you must complete and attach Schedule G	9	Yes	No
10 Were there in existence at the time of the decedent's death:			
a Any trusts created by the decedent during his or her lifetime?	10a	Yes	No
b Any trusts not created by the decedent under which the decedent possessed any power, beneficial interest or trusteeship?	10b	Yes	No
11 Did the decedent ever possess, exercise or release any general power of appointment? If yes, you must complete and attach Schedule H	11	Yes	No
12 Was the marital deduction computed under the transitional rule of Public Law 97-34, IRC section 403(e)(3) (Economic Recovery Act of 1981)? If yes, attach a separate computation of the marital deduction, enter the amount on item 20 of the recapitulation, and note on item 20 "Computation attached."	12	Yes	No
13 Was the decedent, immediately before death, receiving an annuity described in the "General" paragraph of the instructions for Schedule I? If yes, you must complete and attach Schedule I	13	Yes	No
14 Was the decedent ever the beneficiary of a trust for which a deduction was claimed by the estate of a pre-deceased spouse under IRC section 2056(b)(7) and which in not reported on this return? If yes, attach an explanation	14	Yes	No

State of Rhode Island and Providence Plantations

Form RI-100A

Estate Tax Return - Date of death on or after 1/1/2015

16160299990104

Decedent's name	Decedent's social security number
XXXXXXXXXXXXXXXX X XXXXXXXXXXXXXXXXXX XXX	999-99-9999

Part 6 - Recapitulation

			Alternate value	Value at date of death
Gross Estate				
1	Schedule A - Real Estate	1	9999999999999 99	9999999999999 99
2	Schedule B - Stock and bonds	2	9999999999999 99	9999999999999 99
3	Schedule C - Mortgages, notes and cash	3	9999999999999 99	9999999999999 99
4	Schedule D - Insurance on the decedent's life	4	9999999999999 99	9999999999999 99
5	Schedule E - Jointly owned property	5	9999999999999 99	9999999999999 99
6	Schedule F - Other miscellaneous property	6	9999999999999 99	9999999999999 99
7	Schedule G - Transfers during decedent's life	7	9999999999999 99	9999999999999 99
8	Schedule H - Powers of appointment	8	9999999999999 99	9999999999999 99
9	Schedule I - Annuities	9	9999999999999 99	9999999999999 99
10	Total gross estate. Add lines 1 through 9	10	9999999999999 99	9999999999999 99
11	Schedule U - Qualified conservation easement exclusion	11	9999999999999 99	9999999999999 99
12	Total gross estate less exclusion. Subtract line 11 from line 10. Enter here and on page 1, Part 1, line 1	12	9999999999999 99	9999999999999 99
Deductions				
13	Schedule J - Funeral expenses and expenses incurred in administering property subject to claims	13	9999999999999 99	
14	Schedule K - Debts of the decedent	14	9999999999999 99	
15	Schedule K - Mortgages and liens	15	9999999999999 99	
16	Total. Add lines 13, 14 and 15	16	9999999999999 99	
17	Allowable amount of deductions from line 16	17	9999999999999 99	
18	Schedule L - Net losses during administration	18	9999999999999 99	
19	Schedule L - Expenses incurred in administering property not subject to claims	19	9999999999999 99	
20	Schedule M - Bequests, etc., to surviving spouse	20	9999999999999 99	
21	Schedule O - Charitable, public and similar gifts and bequests	21	9999999999999 99	
22	Schedule T - Qualified family-owned business interest deduction	22	9999999999999 99	
23	Total allowable deductions. Add lines 17 through 22. Enter here and on page 1, Part 1, line 2	23	9999999999999 99	