State of Rhote Tank Dake Prowolf File ***** Form T-204R-Annual

Sales and Use Tax Return - Annual Reconciliation

Nama	Federal emple	oyer identification n	umber	
Name	. odoral ompl	-, -, -, -, -, -, -, -, -, -, -, -, -, -		
A Test Company Address	For the period	d ending:		
12/31/2			016	
100 Main	NAICS code	12/31/2	010	
Address 2	NAICS code			
Anywhere, WA 98070				
City, town or post office State ZIP code	E-mail addres	SS		
SALES AND USE TAX RETURN TO BE FILED BY SELLERS If you file a consolidated Sales Tax Return, list all locations by Rhode location number. If there are more than 10 locations, please attach a but file individual Sales Tax Returns, you must file a	e Island iden a separate li	itification numb sting. If you ha	er inc ve mı	luding the 2 digit
			+	
Have you sold or closed your business? Yes If yes, on what date?				Maria Cara
Before completing lines A through E, complete	e Schedu	iles A and B	on	page 2.
A Total Net Taxable Sales for the period Jan - Dec. NOTE: Line A must equal Net	Taxable Sales	from pg 2, line 5	Α	4000
A TOTAL TOTAL TOTAL CONTROL OF THE PARTY OF				\$200.0
B 1 Amount of tax. Multiply line A by 7% (.07)	B1	\$14.00		
2 MOTOR VEHICLE DEALERS ONLY				
2 Sales tax collections from non-residents for the period Jan through Dec	B2			
3 Total Tax. Add lines B1 & B2			ВЗ	1
3 Total Tax. Add lines B1 & B2			Во	\$14.0
C 1 Total tax remitted for the period January through December	C1			
o i Total tax formad for the points and points				
2 Prepaid sales tax on cigarettes for the period January through December	C2			
3 ROOM RESELLERS ONLY				
Sales tax paid to hotels	C3			
4 Credit balance (if any) per line D of the 2015 Annual Reconciliation return - Form T-204R	C4			
4 Credit balance (if any) per line D of the 2015 Affilial Reconciliation retain 1 5 mm 1 25 mm	01			
5 Sales tax due and paid to another state on items included in Schedule A, line 2	C5			
6 Total Tax Paid. Add lines C1 through C5	C6			
D Line C6 should equal line B3. If line B3 is more than line C6, there is a balance of the RI Division of Taxation and send in with this Annual Reconciliation. See instru	D			
E If line C6 is more than line B3, there is a credit due which will be credited to the 2 Taxpayer must submit a "Claim for Refund" form with this reconciliation in or	Е			
the first the lease that I have exemined this return and accompanying	schedules and	d statements, and to	o the b	est of my knowledge and
inder penalties of perjury, i declare that may examined this return and accompanying belief, it is true, accurate and complete. Declaration of preparer (other than taxpayer) is uthorized officer signature Print name	s based on all	information of whicl ate	n prepa	arer has any knowledge. ohone number
Paid preparer signature Print name	Date Telephone		phone number	
	710	Code		PTIN
raid preparer address City, town or post office State	211			

DUE ON OR BEFORE JANUARY 31, 2017

State of Rhode Island and Providence Plantations Form T-204R-Annual

Sales and Use Tax Return - Annual Reconciliation

Name		Federal en	nployer identification i	number	•				
Address			For the period ending:						
		12/31/2016							
Address 2			NAICS code						
_	710								
City, town or post office State ZIP code		E-mail add	ress						
If you file a consolidated Sales Tax	TURN TO BE FILED BY SELLERS Return, list all locations by Rhode than 10 locations, please attach ales Tax Returns, you must file a	lsland id	lentification numb e listing. If you ha	er inc	luding the 2 digi ultiple locations,	t			
				+					
Have yoursold on a dosted your your interest.									
Before completing lin	nes A through E, complet	e Sche	dules A and B	on	page 2.				
Total Net Taxable Sales for the period Jan									
Total Net Taxable Gales for the period dan	200. 110 121 2110 11110 11110	1							
3 1 Amount of tax. Multiply line A by 7% (.07)		B1							
2 MOTOR VEHICLE DEALERS ONLY 2 Sales tax collections from non-residents for the period Jan through Dec		DO							
		B2							
3 Total Tax. Add lines B1 & B2				ВЗ					
100 September 10									
1 Total tax remitted for the period January t	nrough December	C1							
	. I I and the such December	C2							
2 Prepaid sales tax on cigarettes for the per	nod January through December	02							
3 ROOM RESELLERS ONLY		СЗ							
Sales tax paid to hotels									
4 Credit balance (if any) per line D of the 2015 A	Annual Reconciliation return - Form T-204R	C4							
5 Sales tax due and paid to another state on items included in Schedule A, line 2	C5								
5 Sales tax due and paid to another state of	I liens included in Schedule A, into 2	00							
6 Total Tax Paid. Add lines C1 through C5.				C6					
The Control of the Paris I fine Paris I fine Paris more than line C6, there is a halance due. Please remit payment to									
the RI Division of Taxation and send in with this Annual Reconciliation. See instructions for additional information.				D					
E If line C6 is more than line B3, there is a credit due which will be credited to the 2017 sales tax payments. Note: Taxpayer must submit a "Claim for Refund" form with this reconciliation in order to receive a refund instead									
Taxpayer must submit a "Glaim for Refu	and form with this reconciliation in or	uer to rece	IVE a retail a motoda						
				a tha h	ant of my knowledge	o and			
nder penalties of perjury, I declare that I have elief, it is true, accurate and complete. Decla thorized officer signature	examined this return and accompanying ration of preparer (other than taxpayer) is Print name	s based on	and statements, and tall information of whice Date	11 biebs	arer has any knowled bhone number	dge.			
aid preparer signature	Print name		Date	Telep	ohone number				
aid preparer address	City, town or post office State	Z	ZIP Code		PTIN				

May the Division of Taxation contact your preparer? YES

DUE ON OR BEFORE JANUARY 31, 2017