| Name of city or town |  |  | Federal employer identification number |
| :---: | :---: | :---: | :---: |
| Address |  |  | For the month ending: |
|  |  |  | MM/DD/YYYY |
| Address 2 |  |  |  |
| City, town or post office | State | ZIP code | E-mail address |

## Schedule A - Tax and Remittance Computation

1 Total real estate conveyance tax collected from Schedule B, line 2 $\qquad$
2 Amount retained by municipality. Multiply line 1 by $47.83 \%$ (0.4783)....................................................
3 Net real estate conveyance tax due. Subtract line 2 from line 1 $\qquad$

| 1 |  |  |
| :--- | :--- | :--- |
| 2 |  |  |
| 3 |  |  |

4 Total mobile and manufactured home conveyance tax collected from Schedule C, line 2 $\qquad$
$\square$

7 TOTAL REMITTANCE DUE. Add lines 3 and 6 $\qquad$

## INSTRUCTIONS

(1) Pursuant to RI Gen. Laws 44-25-1, Rhode Island imposes a tax on each deed, instrument or writing by which interests in real estate are conveyed to a purchaser, when the value of the transfer is greater than $\$ 100$. The tax rate is $\$ 2.30$ for each $\$ 500$, or fractional part, of the purchase price, equating to a $0.46 \%$ tax rate.
(2) Pursuant to RI Gen. Laws 31-44-20, Rhode Island imposes a tax on each deed, instrument or writing by which interests in any mobile or manufactured home are conveyed to a purchaser when the value of the transfer is greater than $\$ 100$. The tax rate is $\$ 1.40$ for each $\$ 500$ or fractional part, of the purchase price, equating to a $0.28 \%$ tax rate.
(3) Filing Date: This return is to be filed with the Rhode Island Division of Taxation on or before the 15th day of each month for the previous calendar month. Send to: RI Division of Taxation, One Capitol Hill, Providence, RI 02908.
(4) Schedules A, B and C must be completed.

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.

| Authorized signature | Print name | Title | Date | Telephone number |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |

State of Rhode Island Division of Taxation Form CVYT-1
Real Estate Conveyance Tax Return
13121799990102

Name
Sheet number for this schedule

Include every transaction subject to realty transfer tax presented for recording involving a deed, instrument, or writing by which any lands, tenements or other realty is sold, granted, assigned, transferred, or otherwise conveyed.

Schedule B - Itemized Real Estate Conveyances

|  | Tax Amount | Recording Date | Transaction Stamp Number |
| :---: | :---: | :---: | :---: |
| 1 |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| 2 |  | Total real estate conveyance tax. Enter here and on page 1, Schedule A, line 1. |  |

Include every transaction presented for recording involving a deed, instrument, or writing by which any mobile or manufactured home is granted, assigned, transferred, or otherwise conveyed.

Schedule C - Itemized Mobile and Manufactured Home Conveyances

|  | Tax Amount | Recording Date | Transaction Stamp Number |
| :---: | :---: | :---: | :---: |
| 1 |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| 2 |  | Total mobile and manufactured home conveyance tax. Enter here and on page 1, Schedule A, line 4. |  |

