

2013 Form RI-1040NR

Nonresident Individual Income Tax Return

Your name			Your social security number		
Spouse's name			Spouse's social security number		
Address			Daytime phone number		
City, town or post office	State	ZIP code	City or town of legal residence		

**ELECTORAL CONTRIBUTION** If you want \$5.00 (\$10.00 if a joint return) to go to this fund, check here. (See instructions. This will not increase your tax or reduce your refund.)  Yes

If you wish the 1st \$2.00 (\$4.00 if a joint return) to be paid to a specific party, check the box and fill in the name of the political party. Otherwise, it will be paid to a nonpartisan general account.

**FILING STATUS** Check only one box

1  Single                                      3  Married filing separately                                      5  Qualifying widow(er)

2  Married filing jointly                                      4  Head of household

<b>INCOME, TAX AND CREDITS</b>	1 Federal AGI from Federal Form 1040, line 37; 1040A, line 21 or 1040EZ, line 4.....	1		
	2 Net modifications to Federal AGI from RI Schedule M, line 3. If no modifications, enter zero on this line.....	2		
	3 Modified Federal AGI. Combine lines 1 and 2 (add net increases or subtract net decreases).....	3		
	4 Deductions. RI Standard Deduction (left margin). If line 3 is over \$186,550, see Standard Deduction Worksheet.....	4		
	5 Subtract line 4 from line 3.....	5		
	6 Exemptions. Enter federal exemptions in box, multiply by \$3,750 and enter result on line 6. If line 3 is over \$186,550, see Exemption Worksheet on page i..... <input type="checkbox"/> X \$3,750 =	6		
	7 <b>RI TAXABLE INCOME.</b> Subtract line 6 from line 5.....	7		
	8 RI income tax from Rhode Island Tax Table or Tax Computation Worksheet.....	8		
	9 RI percentage of allowable Federal credit from page 2, RI Sch I, line 25.....	9		
	10 Rhode Island tax after allowable Federal credit - before allocation. Subtract line 9 from line 8 (not less than zero)	10		
	11 <b>RI allocated income tax.</b> <input type="checkbox"/> <b>A</b> ll income is from RI, <input type="checkbox"/> <b>N</b> onresident with income from outside RI, complete page 7, Sch II and enter result on this line. <input type="checkbox"/> <b>P</b> art-year resident with income from outside RI, complete page 9, Sch III and enter result on this line. Check only one box.	11		
	12 Other Rhode Island Credits from RI Schedule CR, line 4 .....	12		
	13a Rhode Island income tax after credits. Subtract line 12 from line 11 (not less than zero).....	13a		
	b Recapture of Prior Year Other Rhode Island Credits from RI Schedule CR, line 7.....	13b		
	14 RI checkoff contributions from page 2, RI Checkoff Schedule, line 33..... <small>Contributions reduce your refund or increase your balance due.</small>	14		
	15 USE/SALES tax due from page I-5, line 6 of the Individual Consumer's Use/Sales Tax Worksheet.....	15		
	16 <b>TOTAL RI TAX AND CHECKOFF CONTRIBUTIONS.</b> Add lines 13a, 13b, 14 and 15.....	16		

<b>PAYMENTS</b>	17a RI 2013 income tax withheld from RI Schedule W, line 16.... <b>(Attach all Forms W-2 and 1099 with RI withholding, AND Sch W )</b>	17a			Check <input checked="" type="checkbox"/> if extension is attached. <input type="checkbox"/>
	b 2013 estimated tax payments and amount applied from 2012 return.....	17b			
	c Nonresident withholding on real estate sales in 2013.....	17c			
	d RI earned income credit from page 2, RI Schedule EIC, line 42.....	17d			
	e Other payments.....	17e			
	f <b>TOTAL PAYMENTS AND CREDITS.</b> Add lines 17a, 17b, 17c, 17d and 17e.....	17f			

<b>AMOUNT DUE</b>	18a <b>AMOUNT DUE.</b> If line 16 is <b>LARGER</b> than line 17f, subtract line 17f from line 16.....	18a			
	b Check <input checked="" type="checkbox"/> if <b>RI-2210</b> or <b>RI-2210A</b> is attached and enter underestimating interest due. <b>This amount should be added to line 18a or subtracted from line 19, whichever applies.</b>	18b			
	c <b>TOTAL AMOUNT DUE.</b> Add lines 18a and 18b. Complete RI-1040V and send in with your payment ☹️	18c			

<b>REFUND</b>	19 <b>AMOUNT OVERPAID.</b> If line 17f is <b>LARGER</b> than line 16, subtract line 16 from line 17f. <b>If there is an amount due for underestimating interest on line 18b, subtract line 18b from line 16.</b> 😊	19			
	20 Amount of overpayment to be refunded.....	20			
	21 Amount of overpayment to be applied to 2014 estimated tax.....	21			

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Nonresident Individual Income Tax Return

Name	Your social security number

**RI SCHEDULE I - ALLOWABLE FEDERAL CREDIT**

22 RI income tax from page 1, line 8 .....	22		
23 Credit for child and dependent care expenses from Federal Form 1040, line 48 or Form 1040A, line 29.....	23		
24 Tentative allowable federal credit. Multiply line 23 by 25% (0.2500).....	24		
25 <b>MAXIMUM CREDIT.</b> Line 22 or 24, whichever is <b>SMALLER.</b> Enter here and on RI-1040NR, page 1, line 9 .....	25		

**RI SCHEDULE II AND III - ALLOCATION AND MODIFICATION FOR NONRESIDENTS**

**Schedule II** should be completed by **NONRESIDENTS** with income from outside Rhode Island. RI Schedule II is located on page 7.

**Schedule III** should be completed by **PART-YEAR RESIDENTS** with income from outside Rhode Island. RI Schedule III is located on page 9.

**NONRESIDENTS** and **PART-YEAR RESIDENTS** with all income from Rhode Island sources do not need to complete either schedule II or III.

**RI CHECKOFF CONTRIBUTIONS SCHEDULE**

Note: Contributions reduce your refund or increase your balance due.      \$1.00    \$5.00    \$10.00    Other

26		Drug program account <b>RIGL §44-30-2.4</b> .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		26		
27		Olympic Contribution <b>RIGL §44-30-2.1</b> ..... Yes <input type="checkbox"/> \$1.00 contribution (\$2.00 if filing a joint return) ....						27		
28		RI Organ Transplant Fund <b>RIGL §44-30-2.5</b> .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		28		
29		RI Council on the Arts <b>RIGL §42-75.1-1</b> .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		29		
30		RI Nongame Wildlife Fund <b>RIGL §44-30-2.2</b> .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		30		
31		Childhood Disease Victim's Fund <b>RIGL §44-30-2.3</b> .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		31		
32		RI Military Family Relief Fund <b>RIGL §44-30-2.9</b> .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		32		
33	<b>TOTAL CONTRIBUTIONS.</b> Add lines 26, 27, 28, 29, 30, 31 and 32. Enter here and on RI-1040NR, pg 1, line 14.							33		

**RI SCHEDULE EIC - RHODE ISLAND EARNED INCOME CREDIT**

34 Rhode Island income tax from RI-1040NR, page 1, line 13a.....	34		
35 Federal earned income credit from Federal Form 1040, line 64a; 1040A, line 38a, or 1040EZ, line 8a .....	35		
36 Rhode Island percentage.....	36	25%	
37 Multiply line 35 by line 36.....	37		
38 Enter the <b>SMALLER</b> of line 34 or line 37.....	38		
39 Subtract line 38 from line 37 <b>(If zero or less, enter the amount from line 38 on line 42. Otherwise, continue to line 40.)</b>	39		
40 a Refundable percentage.....	40	15%	
b Multiply line 39 by line 40a.....	40b		
c Rhode Island allocation from RI-1040NR, page 7, Schedule II, line 13 or RI-1040NR, page 9, Schedule III, line 14. <b>If all income is from RI, enter 1.0000</b> .....	40c		
41 RI refundable earned income credit. Multiply line 40b by line 40c.....	41		
42 <b>TOTAL RI EARNED INCOME CREDIT.</b> Add lines 38 and 41. Enter here and on RI-1040NR, page 1, line 17d.....	42		

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.

Your signature	Spouse's signature	Date	Telephone number
Paid preparer signature	Print name	Date	Telephone number
Paid preparer address	City, town or post office	State	ZIP code      PTIN

State of Rhode Island and Providence Plantations

**2013 RI Schedule W**

Rhode Island W-2 and 1099 Information

Name(s) shown on Form RI-1040 or RI-1040NR	Your social security number

**Complete this Schedule listing all of your and, if applicable, your spouse's W-2s and 1099s showing Rhode Island Income Tax withheld. W-2s or 1099s showing Rhode Island Income Tax withheld must still be attached to the front of your return. Failure to do so may delay the processing of your return. **ATTACH THIS SCHEDULE W TO YOUR RETURN****

	Column A <u>Enter "S"</u> <u>if Spouse's</u> <u>W-2 or 1099</u>	Column B <u>Enter 1099</u> <u>letter code</u> <u>from chart</u>	Column C <u>Employer's Name from Box C of your W-2 or</u> <u>Payer's Name from your Form 1099</u>	Column D <u>Employer's state ID # from</u> <u>box 15 of your W-2 or Payer's</u> <u>Federal ID # from Form 1099</u>	Column E <u>Rhode Island Income Tax</u> <u>Withheld (SEE BELOW</u> <u>FOR BOX REFERENCES)</u>
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16	Total RI Income Tax Withheld. Add lines 1 through 15, Col. E. Enter total here and on RI-1040, line 14a or RI-1040NR, line 17a..				
17	Total number of W-2s and 1099s showing Rhode Island Income Tax Withheld .....				

**INSTRUCTIONS FOR COMPLETING SCHEDULE W**

**Lines 1 - 15:**

Please complete columns A, B, C, D and E for each W-2 and 1099 showing Rhode Island withholding.

Column A: For each W-2 or 1099 being entered, leave blank if the W-2 or 1099 is for you. Enter an "S" if the W-2 or 1099 belongs to your spouse.

Column B: For each W-2 or 1099 being entered, leave blank if the information being entered is from a W-2. For all 1099s being entered, enter the letter code from the chart to the right.

Column C: For each W-2 or 1099 being entered, enter the name of the employer or payer.

Column D: For each W-2, enter the employer's state identification number from box 15 of the W-2. Note: The state identification number may be different than the employer's federal identification number. Be sure to enter the identification number from box 15, rather than box b of the W-2. For each 1099, enter the payer's federal identification number.

Column E: For each W-2 or 1099, enter the amount of Rhode Island withholding as shown on each form. See chart to the right for box reference.

**Line 16:** Total Rhode Island Income Tax Withheld. Add the amounts from Column E, lines 1 through 15. Enter the total here and on RI-1040, line 14a or RI-1040NR, line 17a.

**Line 17:** Enter the number of W-2s and 1099s entered on lines 1-15 showing Rhode Island income tax withheld.

**Schedule W plus all W-2s and 1099s with Rhode Island withholding must be attached to your Rhode Island return in order to receive credit for your Rhode Island withholding tax amount.**

**ATTACH THIS FORM TO YOUR RHODE ISLAND RETURN.**

Schedule W Reference Chart		
Form Type	Letter Code for Column B	Withholding Box
W-2	-	17
W-2G	-	15
1042-S	S	23
1099-B	B	15
1099-DIV	D	14
1099-G	G	11
1099-INT	I	13
1099-MISC	M	16
1099-OID	O	12
1099-R	R	12
RI-1099PT	P	9