## State of Rhode Island Division of Taxation

# **2021 Modification Worksheet**

Taxable Social Security Income Worksheet

| Name | Social security number |
|------|------------------------|
|      |                        |
|      |                        |

NOTE: Use this worksheet to determine the amount, if any, of your Social Security modification on Schedule M, line 1t.

## MODIFICATION FOR TAXABLE SOCIAL SECURITY INCOME WORKSHEET

### **STEP 1: Eligibility**

| J . L   | Liigiointy   |    |     |  |
|---|--|----|-----|--|
| 1   | Enter your date of birth   | 1  |     |  |
| 2   | Enter your spouse's date of birth, if applicable   | 2  |     |  |
| 3   | Enter your Federal AGI from RI-1040 or RI-1040NR, line 1   | 3  |     |  |
| 4   | Enter your Filing Status   | 4  |     |  |
| 5   | Were either you or your spouse born on or before 11/01/1955? If yes, check the box to the right.   | 5  | Yes |  |
| 6   | Filing status amount. Enter the amount from below that corresponds to your filing status on line 4   | 6  |     |  |
|   | Single or head of household - \$88,950   |    |     |  |
|   | Married filing separately - \$88,975   |    |     |  |
|   | Married filing jointly or qualifying widow(er) - \$111,200   |    |     |  |
| 7   | Is your Federal AGI on line 3 less than the filing status amount on line 6? If yes, check the box to the right   | 7  | Yes |  |
|   | If you answered yes to <b>both</b> questions 5 and 7, continue to Step 2.  |    |     |  |
|   | Otherwise, STOP, you are not eligible for this modification.   |    |     |  |
| STEP 2: Modification Amount   |  |    |     |  |
| f you AND your spouse, if applicable, were born on or before 11/01/1955, enter 1.0000 on line 12 and skip lines 8 through 10. |  |    |     |  |
| 8   | Amount of social security benefits from Federal Form 1040 or 1040-SR, line 6a  | 8  |     |  |
| 9   | Amount of line 8 attributed to the person born on or before 11/01/1955   | 9  |     |  |
| 10  | Eligible percentage of social security benefits. Divide line 9 by line 8   | 10 |     |  |
|   |  |    |     |  |
|   |  |    |     |  |
| 11  | Taxable amount of social security from Federal Form 1040 or 1040-SR, line 6b   | 11 |     |  |
| 11<br>12  | Taxable amount of social security from Federal Form 1040 or 1040-SR, line 6b  Eligible percentage. Enter the percentage from line 10, or 1.0000, whichever applies |    | !   |  |