

State of Rhode Island Division of Taxation Form 9283R

Stay Invested in RI Wavemaker Fellowship Program

Fellowship recipient name			Fellowship recipient's social security number				
Address			Fellowship recipient's applicant number				
Address 2			Year initial approva	I was issued	by the RI	Commerce Co	orp.
City, town or post office	State ZIP c	ode	Tax Benefit Year 1 st	2 nd	3 rd	4 th	
Stay Invested in RI Wavemaker Fellowship Tax Credit Award Request Form Pursuant to R.I. Gen. Laws § 42-64.26-8 the fellowship recipient may request a refund of his/her Stay Invested in RI Wavemaker Fellowship credits, in whole or in part, for 100% of the credit amount. This request must be accompanied by the Annual Certification issued by the Rhode Island Commerce Corporation.							
Section A: Complete this section to let See instructions on back.	the RI Divisio	on of Taxatior	h know how you	would like	to recei	ve your Awa	ard.
1 Amount of Tax Credit Award Certified by the I	Rhode Island Co	ommerce Corpo	pration for this year		1		
2 Amount of your Tax Credit Award from line 1 v	vhich you are re	questing be ref	unded		2		
Note that a refund is subject to the available requested, a credit certificate will be issue	pility of funds. If d for the remain	funds are not a der of the awa	vailable for the full d.	amount			
3 Amount of your Tax Credit Award from line 1 v Subtract line 2 from line 1			ued as a tax credit	certificate.	3		
Your tax credit certificate can be used to year for which the credit was approved. return when filed. See back page for m	This certificate	e must be atta					
Section B: Complete ONLY if you are i portion of that certificate. S	•		te and are now r	equesting	a refund	d of the unu	sed
Amount of Tax Credit Certificate from line 3 being used on your personal income tax return							
5 Amount of your Tax Credit Certificate from line Note that a refund is subject to the availat	-			l	5		
Under penalties of perjury, I declare that I have examine belief, it is true, accurate and complete. Declaration of	d for the remain	der of the awar	rd. schedules and state	ements, and to			
Fellowship Recipient signature	n hichaici (omer	Date		Telephone number		THAS ALLY KHOV	vieuge.
Print name	e Email address						

Fellowship Recipient Information

Print your name, address, social security number and all other information requested. Be sure to enter your complete social security number. Your request cannot be processed without it.

Requesting a Certificate or Refund Upon Certification

Once you are certified by the Rhode Island Commerce Corporation, you are entitled to a Wavemaker Fellowship Tax Credit certificate issued by the Rhode Island Division of Taxation. Please complete this form in order to direct the Division of Taxation on what you would like to do with your certificate. Send this form, along with your certification from the Commerce Corporation to the address below.

You may request the certificate itself, forego the certificate and request a refund, or a combination of the two.

- If you request the certificate itself, the Division of Taxation will mail it to you at the address provided on this form.
 If you wish to receive a refund of your award, the Division of Taxation will process your request and a refund will be sent to you at the address provided on this form. Please note that refund requests are subject to the availability of
- If desired, you may also request part of your award as a certificate and part as a refund.

Using the Certificate on Your Personal Income Tax Return

If you requested to receive a Wavemaker Tax Credit Certificate and are using a portion of it on your personal income tax return, you must attach the certificate to your return. If you are not using the full amount of your certificate, you may either:

- carry forward the unused portion for the succeeding four (4) years, or until the full credit is used or refunded, whichever occurs first; or
- request a refund of the remaining portion. If requesting a refund of the unused amount of your certificate, you
 must complete another one of these forms and either attach the form and the original certificate to your return or
 mail them to the address below.
- Download the form from: <u>www.tax.ri.gov/taxforms/misc.php#credits</u>

Line by Line Instructions

funds.

- Line 1: Enter the amount of your Stay Invested in RI Wavemaker Fellowship Tax Credit Award from your RI Commerce Corporation Certification.
- Line 2: Enter how much of your Award from line 1 that you would like refunded to you. If you do not want a refund, enter zero.
- Line 3: Enter how much of your Award from line 1 for which you would like to receive a tax credit certificate. Subtract line 2 from line 1.

ONLY complete lines 4 and 5, if you are in possession of a certificate you originally requested and are now requesting a refund of the unused portion of that certificate. You must attach your certificate to this request. Attach them both to your return or mail to the address below.

- Line 4: Enter how much of your tax credit certificate you are using on your personal income tax return. This amount can not be more than line 3.
- Line 5: Subtract line 4 from line 3. This is the remaining unused portion of your tax credit certificate that will be refunded to you.

Mail Request Forms to:

Donna Dube RI Division of Taxation Forms,Credits & Incentives Section One Capitol Hill Providence, RI 02908

"Year initial approval was issued by the RI Commerce Corp." means the year that you received notification from the Rhode Island Commerce Corporation that your application was approved. This would be the year you were selected as a Fellow and began your first 12 month service period.

"Tax Benefit Year' means the "Service Period" for which this request is being made. If this is your first request related to your Wavemaker award, circle "1". For each subsequent consecutive service period, circle the next number. You can also refer to the letter from the Rhode Island Commerce Corporation as to which "Service Period" this pertains.