

State of Rhode Island Division of Taxation

2022 Form RI-1040NR

Nonresident Individual Income Tax Return



22100499990101

Reserved for 2D barcode

Your social security number 999999999 Spouse's social security number 999999999

Your first name MI Last name Suffix

XXXXXXXXXXXXXXXXX X XXXXXXXXXXXXXXXXXXXX XXX

Spouse's name MI Last name Suffix

XXXXXXXXXXXXXXXXX X XXXXXXXXXXXXXXXXXXXX XXX

Address

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

City, town or post office State ZIP code

XXXXXXXXXXXXXXXXXXXX XX 99999

City or town of legal residence

XXXXXXXXXXXXXXXXXXXX

Check each box that applies. Otherwise, leave blank.

Primary deceased?

X

Spouse deceased?

X

New address?

X

Amended Return? *

X

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.)

X Yes

If you wish the 1st \$2.00 (\$4.00 if a joint return) 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. XXXXXXXXXXXX

FILING STATUS

Check one

Single ☒

Married filing jointly ☒

Married filing separately ☒

Head of household ☒

Qualifying widow(er) ☒

INCOME, TAX AND CREDITS

1 Federal AGI from Federal Form 1040 or 1040-SR, line 11 1 9999999999 99

2 Net modifications to Federal AGI from RI Sch M, line 3. If no modifications, enter 0 on this line. 2 9999999999 99

3 Modified Federal AGI. Combine lines 1 and 2 (add net increases or subtract net decreases)..... 3 9999999999 99

4 RI Standard Deduction from left. If line 3 is over \$217,050, see Standard Deduction Worksheet..... 4 9999999999 99

5 Subtract line 4 from line 3. If zero or less, enter 0..... 5 9999999999 99

6 Enter # of exemptions from RI Sch E, line 5 in box, multiply by \$4,350 and enter result on line 6. If line 3 is over \$217,050, see Exemption Worksheet 99 X \$4,350= 6 9999999999 99

7 RI TAXABLE INCOME. Subtract line 6 from line 5. If zero or less, enter 0..... 7 9999999999 99

8 RI income tax from Rhode Island Tax Table or Tax Computation Worksheet..... 8 9999999999 99

9 RI percentage of allowable Federal credit from page 3, RI Sch I, line 25..... 9 9999999999 99

10 Rhode Island tax after allowable Federal credit - before allocation. Subtract line 9 from line 8 ... 10 9999999999 99

11 RI allocated income tax. Check only one box. All income is from RI, enter amount from line 10 on this line. Nonresident with income from outside RI, complete Sch II and enter result on this line. Part-year resident with income from outside RI, complete Sch III and enter result on this line. X 11 9999999999 99

12 Other Rhode Island Credits from RI Schedule CR, line 8..... 12 9999999999 99

13a Rhode Island income tax after credits. Subtract line 12 from line 11 (not less than zero) 13a 9999999999 99

b Recapture of Prior Year Other Rhode Island Credits from RI Schedule CR, line 11..... 13b 9999999999 99

14 RI checkoff contributions from page 3, RI Checkoff Schedule, line 33. Contributions reduce your refund or increase your balance due 14 9999999999 99

15a USE/SALES tax due from RI Schedule U, line 4 or line 8, whichever applies X 15a 9999999999 99

Check ☒ to certify use tax amount on line 15a is accurate.

b Individual Mandate Penalty (see instructions). Check ☒ to certify full year coverage. 15b 9999999999 99

16a TOTAL RI TAX AND CHECKOFF CONTRIBUTIONS. Add lines 13a, 13b, 14, 15a and 15b..... 16a 9999999999 99

RETURN MUST BE SIGNED - SIGNATURE IS LOCATED ON PAGE 2

Mailing address: RI Division of Taxation, One Capitol Hill, Providence, RI 02908-5806

* If filing an amended return, attach the Explanation of Changes supplemental page

Name(s) shown on Form RI-1040 or RI-1040NR

Your social security number

XXXXXXXXXXXXXXXXXX

XXXXXXXXXXXXXXXXXX

999999999

16b TOTAL RI TAX AND CHECKOFF CONTRIBUTIONS from line 16a..... 16b 9999999999 99

17a RI 2022 income tax withheld from RI Schedule W, line 16. You must
attach Sch W AND all W-2 and 1099 forms with RI withholding..... 17a 9999999999 99

b 2022 estimated tax payments and amount applied from 2021 return 17b 9999999999 99

c Nonresident withholding on real estate sales in 2022..... 17c 9999999999 99

d RI earned income credit from page 3, RI Schedule EIC, line 38..... 17d 9999999999 99

e Other payments..... 17e 9999999999 99

f TOTAL PAYMENTS AND CREDITS. Add lines 17a, 17b, 17c, 17d and 17e..... 17f 9999999999 99

g Previously issued overpayments (if filing an amended return)..... 17g 9999999999 99

h NET PAYMENTS. Subtract line 17g from line 17f..... 17h 9999999999 99

18a AMOUNT DUE. If line 16b is LARGER than line 17h, subtract line 17h from line 16b..... 18a 9999999999 99

b Enter the amount of underestimating interest due from Form RI-2210 or RI-2210A. (attach form)
This amount should be added to line 18a or subtracted from line 19, whichever applies..... 18b 9999999999 99

c TOTAL AMOUNT DUE. Add lines 18a and 18b. Complete RI-1040V and send in with your payment ☹️ 18c 9999999999 99

19 AMOUNT OVERPAID. If line 17h is LARGER than line 16b, subtract line 16b from line 17h. If there
is an amount due for underestimating interest on line 18b, subtract line 18b from line 19..... ☺️ 19 9999999999 99

20 Amount of overpayment to be refunded..... 20 9999999999 99

21 Amount of overpayment to be applied to 2023 estimated tax..... 21 9999999999 99

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

Your driver's license number

and state

Date

Telephone number

9999999999

XX

09/28/23

(999) 999-9999

Spouse's signature

Spouse's driver's license number and state

Date

Telephone number

9999999999

XX

09/28/23

(999) 999-9999

Paid preparer signature

Print name

Date

Telephone number

XXXXXXXXXXXXXXXXXXXXXX

09/28/23

(999) 999-9999

Paid preparer address

City, town or post office

State

ZIP code

PTIN

XXXXXXXXXXXXXXXXXXXXXX

XXXXXXXXXXXXXXXXXXXXXX

XX

99999

P999999999

May the Division of Taxation contact your preparer? YES ☒

Name(s) shown on Form RI-1040 or RI-1040NR

XXXXXXXXXXXXXXXXXX

XXXXXXXXXXXXXXXXXX

Your social security number

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RI SCHEDULE I - ALLOWABLE FEDERAL CREDIT

22	RI income tax from page 1, line 8	22	9999999999	99
23	Credit for child and dependent care expenses from Federal Form 1040 or 1040-SR, Schedule 3, line 2.....	23	9999999999	99
24	Tentative allowable federal credit. Multiply line 23 by 25% (0.2500).....	24	9999999999	99
25	MAXIMUM CREDIT. Line 22 or 24, whichever is SMALLER. Enter here and on page 1, line 9.....	25	9999999999	99

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 13.

Schedule III should be completed by PART-YEAR RESIDENTS with income from outside Rhode Island.
RI Schedule III is located on page 15.

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

		\$1.00	\$5.00	\$10.00	Other		
26	Drug program account RIGL §44-30-2.4	☐	☐	☐	☐	26	9999999999 99
27	Olympic Contribution RIGL §44-30-2.1 Yes ☐ \$1.00 contribution (\$2.00 if a joint return)	☐	☐	☐	☐	27	9999999999 99
28	RI Organ Transplant Fund RIGL §44-30-2.5	☐	☐	☐	☐	28	9999999999 99
29	RI Council on the Arts RIGL §42-75.1-1	☐	☐	☐	☐	29	9999999999 99
30	Nongame Wildlife Fund RIGL §44-30-2.2	☐	☐	☐	☐	30	9999999999 99
31	Childhood Disease Victim's Fund RIGL §44-30-2.3 and Substance Use and Mental Health Leadership Council of RI RIGL §44-30-2.11	☐	☐	☐	☐	31	9999999999 99
32	RI Military Family Relief Fund RIGL §44-30-2.9	☐	☐	☐	☐	32	9999999999 99
33	TOTAL CONTRIBUTIONS. Add lines 26 through 32. Enter here and on RI-1040NR, page 1, line 14.....					33	9999999999 99

RI SCHEDULE EIC - RHODE ISLAND EARNED INCOME CREDIT

34	Federal earned income credit from Federal Form 1040 or 1040-SR, line 27.....	34	9999999999	99
35	Rhode Island percentage.....	35	15%	
36	RI EARNED INCOME CREDIT. Multiply line 34 by line 35	36	9999999999	99
37	Rhode Island allocation from RI-1040NR, page 11, Schedule II, line 13 or RI-1040NR, page 13, Schedule III, line 14. If all income is from RI, enter 1.0000.....	37	0.9999	
38	TOTAL RI EARNED INCOME CREDIT. Multiply line 36 by line 37. Enter here and on RI-1040NR, pg 2, line 17d.....	38	9999999999	99

2022 RI Schedule W

Rhode Island W-2 and 1099 Information - Page 4

22101099990101

Name(s) shown on Form RI-1040 or RI-1040NR

Your social security number

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XXXXXXXXXXXXXXXXXX

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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 Enter "S" if Spouse's W-2 or 1099	Column B Enter 1099 letter code from chart	Column C Employer's Name from Box C of your W- 2 or Payer's Name from your Form 1099	Column D Employer's state ID # from box 15 of your W-2 or Payer's Federal ID # from Form 1099	Column E Rhode Island Income Tax Withheld (SEE BELOW FOR BOX REFERENCES)
1	X	X	XXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 99
2	X	X	XXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 99
3	X	X	XXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 99
4	X	X	XXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 99
5	X	X	XXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 99
6	X	X	XXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 99
7	X	X	XXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 99
8	X	X	XXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 99
9	X	X	XXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 99
10	X	X	XXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 99
11	X	X	XXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 99
12	X	X	XXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 99
13	X	X	XXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 99
14	X	X	XXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 99
15	X	X	XXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 99
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.....				999999999 99
17	Total number of W-2s and 1099s showing Rhode Island Income Tax Withheld				99999999

Schedule W Reference Chart

Form Type	Letter Code for Column B	Withholding Box	Form Type	Letter Code for Column B	Withholding Box	Form Type	Letter Code for Column B	Withholding Box
W-2		17	1099-G	G	11	1099-OID	O	14
W-2G	W	15	1099-INT		17	1099-R	R	14
1042-S	S	17a	1099-K	K	8	RI-1099E	E	11
1099-B	B	16	1099-MISC	M	16	RI-1099PT	P	9
1099-DIV	D	16	1099-NEC	N	5			

2022 RI Schedule E

Exemption Schedule for RI-1040 and RI-1040NR

22105999990101

Name(s) shown on Form RI-1040 or RI-1040NR

Your social security number

XXXXXXXXXXXXXXXXXX

XXXXXXXXXXXXXXXXXX

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EXEMPTIONS

Complete this Schedule listing all individuals you can claim as a dependent.

ATTACH THIS EXEMPTION SCHEDULE TO YOUR RETURN

Failure to do so may delay the processing of your return.

1a Yourself ☒b Spouse ☒

(A) Name of Dependent

(B) Social Security Number

(C) Date of Birth

(D) Relationship

2a XXXXXXXXXXXXXXXXXXXXXXXXXXXX 999999999 09282020 XXXXXXXXX

b XXXXXXXXXXXXXXXXXXXXXXXXXXXX 999999999 09282020 XXXXXXXXX

c XXXXXXXXXXXXXXXXXXXXXXXXXXXX 999999999 09282020 XXXXXXXXX

d XXXXXXXXXXXXXXXXXXXXXXXXXXXX 999999999 09282020 XXXXXXXXX

e XXXXXXXXXXXXXXXXXXXXXXXXXXXX 999999999 09282020 XXXXXXXXX

f XXXXXXXXXXXXXXXXXXXXXXXXXXXX 999999999 09282020 XXXXXXXXX

g XXXXXXXXXXXXXXXXXXXXXXXXXXXX 999999999 09282020 XXXXXXXXX

h XXXXXXXXXXXXXXXXXXXXXXXXXXXX 999999999 09282020 XXXXXXXXX

i XXXXXXXXXXXXXXXXXXXXXXXXXXXX 999999999 09282020 XXXXXXXXX

j XXXXXXXXXXXXXXXXXXXXXXXXXXXX 999999999 09282020 XXXXXXXXX

k XXXXXXXXXXXXXXXXXXXXXXXXXXXX 999999999 09282020 XXXXXXXXX

l XXXXXXXXXXXXXXXXXXXXXXXXXXXX 999999999 09282020 XXXXXXXXX

m XXXXXXXXXXXXXXXXXXXXXXXXXXXX 999999999 09282020 XXXXXXXXX

Exemption Number Summary

3 Enter the number of boxes checked on lines 1a and 1b 3 999999999

4a Enter the number of children from lines 2a through 2m who lived with you 4a 999999999

b Enter the number of children from lines 2a through 2m who did not live with you due to divorce or separation 4b 999999999

c Enter the number of other dependents from lines 2a through 2m not included on lines 4a or 4b. 4c 999999999

5 Add the numbers from lines 3 through 4c. Enter here and in the box on RI-1040/NR, pg 1, line 6. 5 999999999