RI-1040NR RHODE ISLAND NONRESIDENT INDIVIDUAL INCOME TAX RETURN (FOR NONRESIDENTS AND PART-YEAR RESIDENTS)

			LIUKN (FUK NC	JNRESIDEN IS ANI	J PARI-TEAR RESIDER	113)				
NAME AND	Υοι	ur first name		Initial		Last nam	е	Your soc	ial secu	urity number
ADDRESS	Sp	oouse's first name		Initial		Last nam	е	Spouse's	social	security number
please print or type	Pro	esent home addre	ess (number and str	eet, including apartr	nent number or rural rou	te)		Daytime (telepho)	one number
	Cit	ty, town or post of	fice	State		ZIP code		City or to	own of l	egal residence
ELECTORAI CONTRIBUT	L to	this fund check h	10.00 if a joint retur ere. (See instructio ir tax or reduce you	ns This Yes	If you wish the 1st \$2 specific party, check party. Otherwise, it w	the box and fill in	the name of	the political]	
FILING C	heck o one bo	only ₁	2		3 Married filing separ	ately 4 Head	of househ	old 5 Qualif	ying w	vidow(er)
INCOME,	1. Fe	ederal AGI (Adju	isted Gross Incoi	me) from Federal	Form 1040, line 37; 1	040A, line 21 o	1040EZ,	line 4	. 1.	
TAX AND CREDITS	2. Ne	et modifications	to Federal AGI fi	rom RI Schedule	M, line 3. If no modif	cations, enter z	ero on this	line	. 2.	
	3. M	odified Federal	AGI. Combine li	nes 1 and 2 (add	net increases or subt	ract net decreas	es)		. 3.	
Rhode Island	4. De	eductions. RI st	andard deductior	n (left margin). If li	ne 3 is over \$181,900, s	ee Standard Dedu	ction Work	sheet on page i.	4.	
Standard Deduction	5. Sı	ubtract line 4 fro	m line 3						5.	
Single \$7,800					multiply by \$3,650 an Exemption Worksheet			X \$3,650 =	6.	
Married filing	7. R I	I TAXABLE INC	OME. Subtract	line 6 from line 5.					. 7.	
jointly or Qualifying widow(er)	8. RI	l income tax fro	m Rhode Island	Fax Table or Tax C	Computation Workshe	et			8.	
\$15,600	9. RI	I percentage of	allowable Federa	I credit from page	e 2, RI Schedule I, line	e 25			9.	
Married filing separately \$7,800	10. RI	hode Island tax	after allowable F	ederal credit - be	fore allocation. Subtra	act line 9 from li	ne 8 (not l	ess than zero)	10.	
Head of household \$11,700	in	come tax. e	All income is from I nter amount from li 0 on this line.		nt with income from outs e page 7, schedule II and on this line.	d outside R		page 9, schedule	11.	
\square	12. O	ther Rhode Isla	nd Credits from F	RI Schedule CR, li	ne 4				12.	
	13. A	A. RI income tax	after credits. So	ubtract line 12 fro	m line 11 (not less tha	an zero)			13A.	
Attach Forms W-2 and	E	3. Recapture of	Prior Year Other	Rhode Island Cre	edits from RI Schedul	e CR, line 7			13B.	
1099 here.	14. RI	I checkoff contrib	utions from page 2	2, RI Checkoff Sch	edule, line 33 (Contributi	ons reduce your refu	nd or increas	e your balance due.) 14.	
	15. US	SE/SALES tax o	lue from page I-4	, line 6 of the Ind	ividual Consumer's U	se/Sales Tax W	orksheet		15.	
	16. TC	OTAL RI TAX A	ND CHECKOFF	CONTRIBUTION	S . Add lines 13A, 13	B, 14 and 15			. 16.	
	17. A				from RISchedule AND Schedule W mus		17A.			
		3. 2012 estimate	ed tax payments	and amount appli	ed from 2011 return		17B.		1	Check ✓ if extension is
PAYMENTS		C. Nonresident v	withholding on re-	al estate sales in	2012		17C.]	attached.
	C	D. RI earned inc	ome credit from	page 2, RI Sched	ule EIC, line 42		17D.			
	E	E. Other payme	nts				17E.			
	F	. TOTAL PAYN	IENTS AND CR	EDITS. Add lines	17A, 17B, 17C, 17D	and 17E			. 17F.	
AMOUNT DUE	18. A	A. AMOUNT DU	JE: If line 16 is L	ARGER than line	17F, subtract line 17F	from 16	18A.			
DOE	E	B. Check ✓ □ This amount s	if RI-2210 or RI-2 hould be added to	210A is attached a line 18A or subtract	and enter underestimat ted from line 19, whiche	ing interest due ver applies.	18B.	_		
					. Complete RI-1040			\cup	18C.	
REFUND					16, subtract line 16 f erest on line 18B, su				19.	
	20. Ar	mount of overpa	yment to be refu	nded					20.	
	21. Ar	mount of overpa	yment to be app	lied to 2013 estim	ated tax		21.			

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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 1040A, line 29	23.			
24. Tentative allowable federal credit. Multiply line 23 by 25% (0.2500)			24.	
25. MAXIMUM CREDIT. Line 22 or 24, whichever is SMALLER. Enter here and on RI-1040NR, page 1,	line 9		25.	

RI SCHEDULES II & 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.

	: Contributions reduce your or increase your balance due.
26. Drug program account RIGL §44-30-2.4	26.
27. Olympic Contribution RIGL §44-30-2.1 Yes S1.00 Contribution (\$2.00 if a joint return)	27.
28. RI Organ Transplant Fund RIGL §44-30-2.5	28.
29. RI Council on the Arts RIGL §42-75.1-1	29.
30. 🚓 🔆 RI Nongame Wildlife Fund RIGL §44-30-2.2	30.
31. OOOO Childhood Disease Victims' Fund RIGL §44-30-2.3	31.
32. RI Military Family Relief Fund RIGL §44-30-2.9	32.
33. TOTAL CONTRIBUTIONS. Add lines 26, 27, 28, 29, 30, 31 and 32. Enter here and on RI-1040NR, page 1, line 14	

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, lin	e 38a or 1040EZ, line 8a	35.	
36. Rhode Island percentage		36.	25%
37. Multiply line 35 by line 36		37.	
38. Enter the SMALLER of line 34 or line 37		38.	
39. Subtract line 38 from line 37 (If zero or less, enter the amount from line	38 on line 42. Otherwise, continue to line 40.)	39.	
40. A. Refundable percentage		40A.	15%
B. Multiply line 39 by line 40A		40B.	
C. Rhode Island allocation from RI-1040NR, page 7, Schedule II, line 13 income is from Rhode Island, enter 1.0000		40C.	
41. RI refundable earned income credit. Multiply line 40B by line 40C		41.	
42. TOTAL RI EARNED INCOME CREDIT. Add line 38 and line 41. Enter here	e and on RI-1040NR, page 1, line 17D	42.	
Under penalties of perjury, I declare that I have examined this return, an	d to the best of my knowledge and belief, it is true, co	orrect a	and complete.
Your Signature ⊃ Date	Spouse's Signature ⇔		Date
May the division contact your preparer about this return? Yes Preparer's	s name (please print):		
Paid preparer's signature and address	SSN, PTIN or EIN	Telepl	none number
		()

RISCHEDULE W RHODE ISLAND W2 AND 1099 INFORMATION

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

Your social security number

2012

Complete the Schedule below listing all of your and your spouse's (if applicable) W2s and 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	Column B	Column C	Column D	Column E
	<u>Enter "S"</u> i <u>f for</u> Spouse	<u>Enter 1099</u> letter code from chart	Employer's Name from Box C of your W2 or Payer's Name from your Form 1099	Employer's Federal ID # from box b of your W2 or Payer's Federal ID # from Form 1099	Rhode Island Income Tax Withheld (SEE BELOW FOR BOX REFERENCES)
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					
21.			d. Add lines 1 through 20, Column E. Enter total her		
22.	Total number of				

INSTRUCTIONS FOR COMPLETING SCHEDULE W

Lines 1 - 20:

Please complete columns A, B, C, D and E for each W2 and 1099 showing Rhode Island withholding.

Column A: For each W2 or 1099 being entered, leave blank if the W2 or 1099 is for you. Enter an "S" if the W2 or 1099 belongs to your spouse.

Column B: For each W2 or 1099 being entered, leave blank if the information being entered is from a W2. For all 1099s being entered, enter the letter code from the chart to the right.

Column C: For each W2 or 1099 being entered, enter the name of the employer or payer.

Column D: For each W2, enter the employer identification number from box b of the W2. For each 1099, enter the payer's federal identification number.

Column E: For each W2 or 1099, enter the amount of Rhode Island withholding as shown on each form. See chart to the right for box reference. Line 21: Total Rhode Island Income Tax Withheld. Add the amounts from Column E, lines 1 through 20. Enter the total here and on RI-1040, line 14A or RI-1040NR, line 17A.

Line 22: Enter the number of W2s and 1099s entered on lines 1-20 showing Rhode Island income tax withheld.

Schedule W plus all W2s 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			
W2	-	17			
W-2G	-	14			
1099-B	В	15			
1099-DIV	D	14			
1099-G	G	11			
1099-INT	I	13			
1099-MISC	М	16			
1099-OID	0	10			
1099-R	R	12			
RI-1099PT	Р	9			