

State of Rhode Island and Providence Plantations 2013 Form RI-1040

Resident Individual Income Tax Return

Your name			Your social security number								
Spouse's name				Spouse's social security number							
Address			Dayt	ime p	hone	numbe	•				
City tow	n or r	ost office State ZIP code	Citv	or tow	/n of l	egal res	sidence				
Oity, tow			Only	51 101		oguiro					
ELECTORA CONTRIBU			eck th	e box	and	fill in the	e name o	of the		be paid to a speci ical party. Otherw	
		1 Single 3 Marrie	d filin	g sep	arate	ly		5		Qualifying wido	w(er)
FILING STATUS		Check only one box 2 Married filing jointly 4 Head	of ho	usehc	old						()
INCOME,		Federal AGI from Federal Form 1040, line 37; 1040A, line 21 or 1040EZ	<i>'</i>					1			
TAX AND CREDITS		Net modifications to Federal AGI from RI Schedule M, line 3. If no modi									
		Modified Federal AGI. Combine lines 1 and 2 (add net increases or sub				,					
Rhode Island		Deductions. RI Standard Deduction (left margin). If line 3 is over \$186,550, see S							_		
Standard		Subtract line 4 from line 3						5	_		
Deduction Single		Exemptions. Enter federal exemptions in box, multiply by \$3,750 and er on line 6. If line 3 is over \$186,550, see Exemption Worksheet on page				X \$3	750 =	6			
\$8,000		RI TAXABLE INCOME. Subtract line 6 from line 5				1		7	-		
Married		RI income tax from Rhode Island Tax Table or Tax Computation Worksh						8	-		
filing jointly or		RI percentage of allowable Federal credit from page 2, RI Sch I, line 22						0			
Qualifying		RI Credit for income taxes paid to other states from page 2, RI Sch II, line 29	9b				_				
widow(er) \$16,000		Other Rhode Island Credits from RI Schedule CR, line 4					_				
Married	d	Total RI credits. Add lines 9a, 9b and 9c						9d			
filing separately	10a	Rhode Island income tax after credits. Subtract line 9d from line 8 (not	ess t	nan ze	ero)			10a			
\$8,000		Recapture of Prior Year Other Rhode Island Credits from RI Schedule C						10b			
Head of household	11	RI checkoff contributions from page 2, RI Checkoff Schedule, line 37 Co	ntributi r increa	ons red ise you	luce yo ır balan	ur refund ce due.		11			
\$12,000	12	USE/SALES tax due from page I-4, line 6 of the Individual Consumer's	Jse/S	ales -	Tax W	/orkshe					
		TOTAL RI TAX AND CHECKOFF CONTRIBUTIONS. Add lines 10a, 10	0b, 11	and	12			13			
PAYMENTS AND PROPERTY		RI 2013 income tax withheld from RI Schedule W, line 16 (Attach all Forms W-2 and 1099 with RI withholding, AND Sch W)	14a							Check ✓ if	
TAX RELIE	F b	2013 estimated tax payments and amount applied from 2012 return	14b							extension is	
CREDIT		Property tax relief credit from RI-1040H, line 7 or 14. Attach RI-1040H	14c							attached.	
Attach		RI earned income credit from page 2, RI Schedule EIC, line 46	14d								
Forms W-2 and 1099		RI Residential Lead Paint Credit from RI-6238, line 7. Attach RI-6238.	14e								
here.		Other payments	14f	1 4 5				14-	_		
		TOTAL PAYMENTS AND CREDITS. Add lines 14a, 14b, 14c, 14d, 14e AMOUNT DUE. If line 12 is LARGER than line 14a, subtract line 14a from line 12		141				14g			
DUE		AMOUNT DUE. If line 13 is LARGER than line 14g, subtract line 14g from line 13 Check \checkmark if RI-2210 or RI-2210A is attached and enter underestimati									
DOL		Check \checkmark if RI-2210 or RI-2210A is attached and enter underestimating should be added to line 15a or subtracted from line 16, whichever applies.	ng inti 15b	erest o	due.	This amo	ount				
	С	TOTAL AMOUNT DUE. Add lines 15a and 15b. Complete RI-1040V and	senc	in wi	th you	ır paym	ent 🛞	15c			
REFUND		AMOUNT OVERPAID. If line 14g is LARGER than line 13, subtract line is an amount due for underestimating interest on line 15b, subtract l					\sim	16			
	17	Amount of overpayment to be refunded						17	-		
	18	Amount of overpayment to be applied to 2014 estimated tax	18								



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RI S	CHEDULE I - ALLOWABLE FEDERAL CREDIT		
19	RI income tax from page 1, line 8	19	
20	Credit for child and dependent care expenses from Federal Form 1040, line 48 or Form 1040A, line 29		
21	Tentative allowable federal credit. Multiply line 20 by 25% (0.2500)	21	
22	MAXIMUM CREDIT. Line 19 or 21, whichever is SMALLER. Enter here and on page 1, line 9a	22	
	CHEDULE II - CREDIT FOR INCOME TAX PAID TO ANOTHER STATE E: You must attach a signed copy of the state tax return(s) for which you are claiming credit.		
23	RI income tax from RI-1040, page 1, line 8 less allowable federal credit from RI-1040, page 2, line 22	23	
24	Income derived from other state. If more than one state, see instructions		
25	Modified federal AGI from page 1, line 3		
26	Divide line 24 by line 25	26	
27	Tentative credit. Multiply line 23 by line 26	. 27	
28	Tax due and paid to other state (see specific instructions). Insert name of state paid	28	
29	MAXIMUM TAX CREDIT. Line 23, 27 or 28, whichever is the SMALLEST. Enter here and on page 1, line 9b	29	
30 31 32 33 34 35 36 37	CHECKOFF CONTRIBUTIONS SCHEDULE \$1.00 \$5.00 \$10.00 Other Drug program account RIGL §44-30-2.4 Olympic Contribution RIGL §44-30-2.1 Olympic Contribution RIGL §44-30-2.1 Yes RI Organ Transplant Fund RIGL §44-30-2.5 \$1.00 contribution (\$2.00 if filing a joint return) RI Council on the Arts RIGL §42-75.1-1 RI Council on the Arts RIGL §44-30-2.2 Childhood Disease Victim's Fund RIGL §44-30-2.3 Childhood Disease Victim's Fund RIGL §44-30-2.9 TOTAL CONTRIBUTIONS. Add lines 30, 31, 32, 33, 34, 35 and 36. Enter here and on RI-1040, page 1, line 11	32 33 34 35 36	
	CHEDULE EIC - RHODE ISLAND EARNED INCOME CREDIT		
38	Rhode Island income tax from RI-1040, page 1, line 10a		
39	Federal earned income credit from Federal Form 1040, line 64a; 1040A, line 38a, or 1040EZ, line 8a		050/
40	Rhode Island percentage		25%
41	Multiply line 39 by line 40		
42	Enter the SMALLER of line 38 or line 41		
43	Subtract line 42 from line 41. If zero or less, enter the amount from line 42 on line 46. Otherwise, go to line 44 Refundable percentage	43	150/
44 45	Refundable percentage Rhode Island refundable earned income credit. Multiply line 43 by line 44		15%
43 46	TOTAL RI EARNED INCOME CREDIT. Add line 42 and line 45. Enter here and on RI-1040, line 14d		
-0			

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	relephone number		
Paid preparer signature	Print name		Date	Telephone number		
Paid preparer address	City, town or post office	State	ZIP code	PTIN		