

Barcode size and layout requirements

The barcode should be Normal PDF417 style with no more than 13 columns (2 for header, 2 for footer and 9 for data).

Tax Year 2014 Rhode Island Form RI-1040NR 2D Barcode Layout					
Field ID	RI Form Line Ref	Field Name	Max Size	Type	Edit and Instructions
HEADER SECTION					
1		Code and Header Version	2	AN	value =T1
2		Developer Code	4	N	assigned by NACTP
3		Software/form version	4	N	incremented if items included in barcode are changed, default ="0001"
RI-1040NR INFORMATION					
4		Tax Year	4	N	2014
5		Form Type	7	AN	RI1040N
6		Primary last name, no suffix	20	AN	
7		Primary First Name	14	AN	
8		Primary MI	1	AN	
9		Primary SSN	9	N	#####
10		Spouse Last Name	20	AN	
11		Spouse First Name	14	AN	
12		Spouse MI	1	AN	
13		Spouse SSN	9	N	#####
14		Address	35	AN	number, street, RR, or PO Box
15		City or Town	21	AN	
16		State	2	AN	
17		Zip + 4	9	AN	left justify
18		Home Phone	10	N	
19		City or Town of Legal Residence	21	AN	
20		Electoral System Contribution YES	1	A	X if box checked, blank if not marked
21		Electoral Party specified	12	A	
22		Single	1	A	X if box checked, blank if not marked
23		Married Joint	1	A	X if box checked, blank if not marked
24		Married Separate	1	A	X if box checked, blank if not marked
25		Head of Household	1	A	X if box checked, blank if not marked
26		Qualifying Widow(er)	1	A	X if box checked, blank if not marked
27	1	Federal Adjusted Gross Income	9	N	
28	2	Modifications	9	N	
29	3	Modified Federal AGI	9	N	
30	4	Federal deductions	9	N	
31	6	Federal Exemption amount	9	N	
32	6	number of exemptions	2	N	
33	8	RI Tax Amount	9	N	

34	9	Federal Credits Allowable	9	N	
35	10	RI tax after allowable Federal Credits	9	N	
36	13A	Rhode Island tax after credits	9	N	
37	13B	Recapture of Prior Year Credits	9	N	
38	12	Other Credit Amount	9	N	
39		NULL			
40	15	RI Sales & Use Tax	9	N	
41	16	Total RI Tax and Sales & Use Tax	9	N	
42	11	Allocated Income Tax	9	N	
43	11	All income from RI	1	A	X if box checked, blank if not marked
44	11	Non-Resident with income outside RI	1	A	X if box checked, blank if not marked
45	11	Part Year Resident with income from outside	1	A	X if box checked, blank if not marked
46	14	RI Checkoff Contributions	9	N	
47	17A	RI Income Tax Withheld	9	N	
48	17B	Estimated from 1040ES & carryover	9	N	
49		Extension attached indicator	1	AN	X if box checked, blank if not marked
50		Use tax amount is accurate	1	AN	X if box checked, blank if not marked
51		NULL			
52	17C	Non-Resident withholding on real estate	9	N	
53	17D	RI Earned Income Credit	9	N	
54		NULL			
55	17E	Other Payments	9	N	
56		2210 attached indicator	1	AN	X if box checked, blank if not marked
57	18B	2210 amount	9	N	
58	18C	Balance Due	9	N	
59	19	Overpayment	9	N	
60	20	Refund amount	9	N	
61	21	Carry over to next year	9	N	
		RI Schedule I			
62	23	Child & Dependent Care Credit	9	N	
		RI Schedule EIC / RI Schedule II			
63	35	Federal EIC	9	N	
64		NULL			
65		NULL			
66		NULL			
67		NULL			
68	41	RI Refundable earned income credit	9	N	
		RI Schedule IV			
69	26	Drug Program account	9	N	
70	27	Olympic Yes	1	A	X if box checked, blank if not marked
71	28	Organ Transplant	9	N	
72	29	Council on the Arts	9	N	
73	30	Non-Game wildlife	9	N	

74	31	Childhood Disease Victims Fund	9	N	
75	32	Military Family Relief Fund	9	N	
76		NULL			
77	signature area	Division Contact Preparer Yes	1	A	X if box checked, blank if not marked
78	signature area	Preparer SSN, PTIN or EIN	9	AN	left justify, no hyphens
		RI 1040-H Property Tax Relief			
79		NULL			
80		NULL			
81		NULL			
82		NULL			
83		NULL			
84		NULL			
85		NULL			
86		NULL			
87		NULL			
88		NULL			
89		NULL			
90		NULL			
91		NULL			
92		NULL			
93		NULL			
94		NULL			
95		NULL			
96		NULL			
97		NULL			
98		NULL			
99		NULL			
100		NULL			
101		NULL			
102		NULL			
103		NULL			
		Schedule II, Allocation Worksheet			
104	8	Total Allocation for RI	9	N	
105	12	Allocated AGI, RI	9	N	
106	12	Allocated AGI, Federal	9	N	
107	13	Allocation	6	N	percentage -- 4 positions after decimal, leading zero
		Schedule III, Part Year Resident Allocation			
108	13	Allocated RI income for part year residents	9	N	
109	14	Allocation	6	N	percentage -- 4 positions after decimal, leading zero
110	18	income taxed in other jurisdiction	9	N	
111	22	name of state paid	2	A	
112	22	amount of tax due and paid to other state	9	N	
113	24	AGI from other state	9	N	

114	27	Maximum Tax Credit	9	N	
RI-6238 Lead Abatement Credit					
115	2	Unit 1 Owner Occupant	1	AN	X if box checked, blank if not marked
116	2	Unit 1 Renter	1	AN	X if box checked, blank if not marked
117	2	Unit 1 Landlord	1	AN	X if box checked, blank if not marked
118	3	Unit 1 Removal	1	AN	X if box checked, blank if not marked
119	3	Unit 1 Reduction	1	AN	X if box checked, blank if not marked
120	4	Unit 1 Cost Incurred	9	N	
121	6	Unit 1 Maximum Credit	9	N	
122	2	Unit 2 Owner Occupant	1	AN	X if box checked, blank if not marked
123	2	Unit 2 Renter	1	AN	X if box checked, blank if not marked
124	2	Unit 2 Landlord	1	AN	X if box checked, blank if not marked
125	3	Unit 2 Removal	1	AN	X if box checked, blank if not marked
126	3	Unit 2 Reduction	1	AN	X if box checked, blank if not marked
127	4	Unit w Cost Incurred	9	N	
128	6	Unit 2 Maximum Credit	9	N	
129	2	Unit 3 Owner Occupant	1	AN	X if box checked, blank if not marked
130	2	Unit 3 Renter	1	AN	X if box checked, blank if not marked
131	2	Unit 3 Landlord	1	AN	X if box checked, blank if not marked
132	3	Unit 3 Removal	1	AN	X if box checked, blank if not marked
133	3	Unit 3 Reduction	1	AN	X if box checked, blank if not marked
134	4	Unit 3 Cost Incurred	9	N	
135	6	Unit 3 Maximum Credit	9	N	
136	7	Total Credit	9	N	
RI Schedule M					
137	1A	Income from obligations of any other state	9	N	
138	1B	RI fiduciary adjustment	9	N	
139	1C	Recapture of Family Education Account	9	N	
140	1D	Bonus depreciation	9	N	
141	1E	Recapture of Tuition Saving Program	9	N	
142	1F	Recapture of Historic Tax Credit	9	N	
143	1G	Recapture of Scituate Medical Savings	9	N	
144	1H	Total modifications Increasing Fed AGI	9	N	
145	2A	Income from obligations of the US Gov	9	N	
146	2B	RI fiduciary adjustment	9	N	
147	2C	Elective deduction for new R&D	9	N	
148	2D	Railroad Retirement benefits	9	N	
149	2E	Qualifying investment in venture capital	9	N	
150	2F	Family Education Accounts	9	N	
151	2G	Tuition Savings Program	9	N	
152	1H	Exemptions for writers, composers and artists	9	N	
153	2I	Bonus depreciation	9	N	
154	2J	Section 179	9	N	

155	2K	Modifications for Jobs Growth Act	9	N	
156	2L	Modifications for Tax Incentives for Capital Invest	9	N	
157	2M	Modifications for Tax Incentives for employers	9	N	
158	2N	Historic Tax Credit or Motion Picture Production I	9	N	
159	2O	Active duty military	9	N	
160	2P	Scituate Medical Savings Account	9	N	
161	2Q	Insurance benefits for dependants and domestic p	9	N	
162	2R	Modification for Organ Transplantation	9	N	
163	2S	Modification for Resident business owner	9	N	
164	2T	Discharge of indebtedness	9	N	
165	2U	Total modifications Decreasing Fed AGI	9	N	
RI Schedule CR					
166	1	RI-2276	9	N	
167	2	RI-286B	9	N	
168	3	RI-8201	9	N	
RI Schedule U					
169	1	Income from obligations of any other state	9	N	
170	3	RI fiduciary adjustment	9	N	
171	4	Recapture of Family Education Account	9	N	
172	6	Bonus depreciation	9	N	
173	7a	Recapture of Tuition Saving Program	9	N	
174	7b	Recapture of Historic Tax Credit	9	N	
175	7c	Recapture of Scituate Medical Savings	9	N	
176	7d	Total modifications Increasing Fed AGI	9	N	
177	7e	Income from obligations of the US Gov	9	N	
178	8	RI fiduciary adjustment	9	N	
W-2 information (20 occurrences)					
179	olumn A Row	Spouse Checkbox	1	AN	X if box checked, blank if not marked
180	olumn B Row	1099 Checkbox	1	AN	X if box checked, blank if not marked
181	olumn D Row	Employer Fed ID	9	N	##### (9)
182	olumn E Row	RI Withholding	9	N	
183	olumn A Row	Spouse Checkbox	1	AN	X if box checked, blank if not marked
184	olumn B Row	1099 Checkbox	1	AN	X if box checked, blank if not marked
185	olumn D Row	Employer Fed ID	9	N	##### (9)
186	olumn E Row	RI Withholding	9	N	
187	olumn A Row	Spouse Checkbox	1	AN	X if box checked, blank if not marked
188	olumn B Row	1099 Checkbox	1	AN	X if box checked, blank if not marked
189	olumn D Row	Employer Fed ID	9	N	##### (9)
190	olumn E Row	RI Withholding	9	N	
191	olumn A Row	Spouse Checkbox	1	AN	X if box checked, blank if not marked
192	olumn B Row	1099 Checkbox	1	AN	X if box checked, blank if not marked
193	olumn D Row	Employer Fed ID	9	N	##### (9)
194	olumn E Row	RI Withholding	9	N	

195	olumn A Row	Spouse Checkbox	1	AN	X if box checked, blank if not marked
196	olumn B Row	1099 Checkbox	1	AN	X if box checked, blank if not marked
197	olumn D Row	Employer Fed ID	9	N	##### (9)
198	olumn E Row	RI Withholding	9	N	
199	olumn A Row	Spouse Checkbox	1	AN	X if box checked, blank if not marked
200	olumn B Row	1099 Checkbox	1	AN	X if box checked, blank if not marked
201	olumn D Row	Employer Fed ID	9	N	##### (9)
202	olumn E Row	RI Withholding	9	N	
203	olumn A Row	Spouse Checkbox	1	AN	X if box checked, blank if not marked
204	olumn B Row	1099 Checkbox	1	AN	X if box checked, blank if not marked
205	olumn D Row	Employer Fed ID	9	N	##### (9)
206	olumn E Row	RI Withholding	9	N	
207	olumn A Row	Spouse Checkbox	1	AN	X if box checked, blank if not marked
208	olumn B Row	1099 Checkbox	1	AN	X if box checked, blank if not marked
209	olumn D Row	Employer Fed ID	9	N	##### (9)
210	olumn E Row	RI Withholding	9	N	
211	olumn A Row	Spouse Checkbox	1	AN	X if box checked, blank if not marked
212	olumn B Row	1099 Checkbox	1	AN	X if box checked, blank if not marked
213	olumn D Row	Employer Fed ID	9	N	##### (9)
214	olumn E Row	RI Withholding	9	N	
215	olumn A Row	Spouse Checkbox	1	AN	X if box checked, blank if not marked
216	olumn B Row	1099 Checkbox	1	AN	X if box checked, blank if not marked
217	olumn D Row	Employer Fed ID	9	N	##### (9)
218	olumn E Row	RI Withholding	9	N	
219	olumn A Row	Spouse Checkbox	1	AN	X if box checked, blank if not marked
220	olumn B Row	1099 Checkbox	1	AN	X if box checked, blank if not marked
221	olumn D Row	Employer Fed ID	9	N	##### (9)
222	olumn E Row	RI Withholding	9	N	
223	olumn A Row	Spouse Checkbox	1	AN	X if box checked, blank if not marked
224	olumn B Row	1099 Checkbox	1	AN	X if box checked, blank if not marked
225	olumn D Row	Employer Fed ID	9	N	##### (9)
226	olumn E Row	RI Withholding	9	N	
227	olumn A Row	Spouse Checkbox	1	AN	X if box checked, blank if not marked
228	olumn B Row	1099 Checkbox	1	AN	X if box checked, blank if not marked
229	olumn D Row	Employer Fed ID	9	N	##### (9)
230	olumn E Row	RI Withholding	9	N	
231	olumn A Row	Spouse Checkbox	1	AN	X if box checked, blank if not marked
232	olumn B Row	1099 Checkbox	1	AN	X if box checked, blank if not marked
233	olumn D Row	Employer Fed ID	9	N	##### (9)
234	olumn E Row	RI Withholding	9	N	
235	olumn A Row	Spouse Checkbox	1	AN	X if box checked, blank if not marked
236	olumn B Row	1099 Checkbox	1	AN	X if box checked, blank if not marked
237	olumn D Row	Employer Fed ID	9	N	##### (9)

238	blumn E Row	RI Withholding	9	N	
239	17	Total Number of W2s and 1099s	5	N	
W-2 information (10 occurrences)					
240	1st W-2	Employer ID	9	N	##### (9)
241	1st W-2	Employer Name	35	AN	Text
242	1st W-2	Employer Address	35	AN	Number/text (separate lines with commas)
243	1st W-2	Box #1: Wages/Tips/Salaries	9	N	Number, opt. decimal
244	1st W-2	Employee SSN (no punctuation)	9	N	##### (9)
245	1st W-2	Employee Name	35	AN	Text
246	1st W-2	Name of state 1 withholding	2	AN	Two letter state code
247	1st W-2	Amount of state 1 withholding	9	N	Number, opt. decimal
248	1st W-2	Name of locality 1 withholding	10	AN	Text
249	1st W-2	Amount of locality 1 withholding	9	N	Number, opt. decimal
250	1st W-2	Name of state 2 withholding	2	AN	Two letter state code
251	1st W-2	Amount of state 2 withholding	9	N	Number, opt. decimal
252	1st W-2	Name of locality 2 withholding	10	AN	Text
253	1st W-2	Amount of locality 2 withholding	9	N	Number, opt. decimal
254	2nd W-2	Employer ID	9	N	##### (9)
255	2nd W-2	Employer Name	35	AN	Text
256	2nd W-2	Employer Address	35	AN	Number/text (separate lines with commas)
257	2nd W-2	Box #1: Wages/Tips/Salaries	9	N	Number, opt. decimal
258	2nd W-2	Employee SSN (no punctuation)	9	N	##### (9)
259	2nd W-2	Employee Name	35	AN	Text
260	2nd W-2	Name of state 1 withholding	2	AN	Two letter state code
261	2nd W-2	Amount of state 1 withholding	9	N	Number, opt. decimal
262	2nd W-2	Name of locality 1 withholding	10	AN	Text
263	2nd W-2	Amount of locality 1 withholding	9	N	Number, opt. decimal
264	2nd W-2	Name of state 2 withholding	2	AN	Two letter state code
265	2nd W-2	Amount of state 2 withholding	9	N	Number, opt. decimal
266	2nd W-2	Name of locality 2 withholding	10	AN	Text
267	2nd W-2	Amount of locality 2 withholding	9	N	Number, opt. decimal
268	3rd W-2	Employer ID	9	N	##### (9)
269	3rd W-2	Employer Name	35	AN	Text
270	3rd W-2	Employer Address	35	AN	Number/text (separate lines with commas)
271	3rd W-2	Box #1: Wages/Tips/Salaries	9	N	Number, opt. decimal
272	3rd W-2	Employee SSN (no punctuation)	9	N	##### (9)
273	3rd W-2	Employee Name	35	AN	Text
274	3rd W-2	Name of state 1 withholding	2	AN	Two letter state code
275	3rd W-2	Amount of state 1 withholding	9	N	Number, opt. decimal
276	3rd W-2	Name of locality 1 withholding	10	AN	Text
277	3rd W-2	Amount of locality 1 withholding	9	N	Number, opt. decimal
278	3rd W-2	Name of state 2 withholding	2	AN	Two letter state code
279	3rd W-2	Amount of state 2 withholding	9	N	Number, opt. decimal

280	3rd W-2	Name of locality 2 withholding	10	AN	Text
281	3rd W-2	Amount of locality 2 withholding	9	N	Number, opt. decimal
282	4th W-2	Employer ID	9	N	##### (9)
283	4th W-2	Employer Name	35	AN	Text
284	4th W-2	Employer Address	35	AN	Number/text (separate lines with commas)
285	4th W-2	Box #1: Wages/Tips/Salaries	9	N	Number, opt. decimal
286	4th W-2	Employee SSN (no punctuation)	9	N	##### (9)
287	4th W-2	Employee Name	35	AN	Text
288	4th W-2	Name of state 1 withholding	2	AN	Two letter state code
289	4th W-2	Amount of state 1 withholding	9	N	Number, opt. decimal
290	4th W-2	Name of locality 1 withholding	10	AN	Text
291	4th W-2	Amount of locality 1 withholding	9	N	Number, opt. decimal
292	4th W-2	Name of state 2 withholding	2	AN	Two letter state code
293	4th W-2	Amount of state 2 withholding	9	N	Number, opt. decimal
294	4th W-2	Name of locality 2 withholding	10	AN	Text
295	4th W-2	Amount of locality 2 withholding	9	N	Number, opt. decimal
296	5th W-2	Employer ID	9	N	##### (9)
297	5th W-2	Employer Name	35	AN	Text
298	5th W-2	Employer Address	35	AN	Number/text (separate lines with commas)
299	5th W-2	Box #1: Wages/Tips/Salaries	9	N	Number, opt. decimal
300	5th W-2	Employee SSN (no punctuation)	9	N	##### (9)
301	5th W-2	Employee Name	35	AN	Text
302	5th W-2	Name of state 1 withholding	2	AN	Two letter state code
303	5th W-2	Amount of state 1 withholding	9	N	Number, opt. decimal
304	5th W-2	Name of locality 1 withholding	10	AN	Text
305	5th W-2	Amount of locality 1 withholding	9	N	Number, opt. decimal
306	5th W-2	Name of state 2 withholding	2	AN	Two letter state code
307	5th W-2	Amount of state 2 withholding	9	N	Number, opt. decimal
308	5th W-2	Name of locality 2 withholding	10	AN	Text
309	5th W-2	Amount of locality 2 withholding	9	N	Number, opt. decimal
310	6th W-2	Employer ID	9	N	##### (9)
311	6th W-2	Employer Name	35	AN	Text
312	6th W-2	Employer Address	35	AN	Number/text (separate lines with commas)
313	6th W-2	Box #1: Wages/Tips/Salaries	9	N	Number, opt. decimal
314	6th W-2	Employee SSN (no punctuation)	9	N	##### (9)
315	6th W-2	Employee Name	35	AN	Text
316	6th W-2	Name of state 1 withholding	2	AN	Two letter state code
317	6th W-2	Amount of state 1 withholding	9	N	Number, opt. decimal
318	6th W-2	Name of locality 1 withholding	10	AN	Text
319	6th W-2	Amount of locality 1 withholding	9	N	Number, opt. decimal
320	6th W-2	Name of state 2 withholding	2	AN	Two letter state code
321	6th W-2	Amount of state 2 withholding	9	N	Number, opt. decimal
322	6th W-2	Name of locality 2 withholding	10	AN	Text

323	6th W-2	Amount of locality 2 withholding	9	N	Number, opt. decimal
324	7th W-2	Employer ID	9	N	##### (9)
325	7th W-2	Employer Name	35	AN	Text
326	7th W-2	Employer Address	35	AN	Number/text (separate lines with commas)
327	7th W-2	Box #1: Wages/Tips/Salaries	9	N	Number, opt. decimal
328	7th W-2	Employee SSN (no punctuation)	9	N	##### (9)
329	7th W-2	Employee Name	35	AN	Text
330	7th W-2	Name of state 1 withholding	2	AN	Two letter state code
331	7th W-2	Amount of state 1 withholding	9	N	Number, opt. decimal
332	7th W-2	Name of locality 1 withholding	10	AN	Text
333	7th W-2	Amount of locality 1 withholding	9	N	Number, opt. decimal
334	7th W-2	Name of state 2 withholding	2	AN	Two letter state code
335	7th W-2	Amount of state 2 withholding	9	N	Number, opt. decimal
336	7th W-2	Name of locality 2 withholding	10	AN	Text
337	7th W-2	Amount of locality 2 withholding	9	N	Number, opt. decimal
338	8th W-2	Employer ID	9	N	##### (9)
339	8th W-2	Employer Name	35	AN	Text
340	8th W-2	Employer Address	35	AN	Number/text (separate lines with commas)
341	8th W-2	Box #1: Wages/Tips/Salaries	9	N	Number, opt. decimal
342	8th W-2	Employee SSN (no punctuation)	9	N	##### (9)
343	8th W-2	Employee Name	35	AN	Text
344	8th W-2	Name of state 1 withholding	2	AN	Two letter state code
345	8th W-2	Amount of state 1 withholding	9	N	Number, opt. decimal
346	8th W-2	Name of locality 1 withholding	10	AN	Text
347	8th W-2	Amount of locality 1 withholding	9	N	Number, opt. decimal
348	8th W-2	Name of state 2 withholding	2	AN	Two letter state code
349	8th W-2	Amount of state 2 withholding	9	N	Number, opt. decimal
350	8th W-2	Name of locality 2 withholding	10	AN	Text
351	8th W-2	Amount of locality 2 withholding	9	N	Number, opt. decimal
352	9th W-2	Employer ID	9	N	##### (9)
353	9th W-2	Employer Name	35	AN	Text
354	9th W-2	Employer Address	35	AN	Number/text (separate lines with commas)
355	9th W-2	Box #1: Wages/Tips/Salaries	9	N	Number, opt. decimal
356	9th W-2	Employee SSN (no punctuation)	9	N	##### (9)
357	9th W-2	Employee Name	35	AN	Text
358	9th W-2	Name of state 1 withholding	2	AN	Two letter state code
359	9th W-2	Amount of state 1 withholding	9	N	Number, opt. decimal
360	9th W-2	Name of locality 1 withholding	10	AN	Text
361	9th W-2	Amount of locality 1 withholding	9	N	Number, opt. decimal
362	9th W-2	Name of state 2 withholding	2	AN	Two letter state code
363	9th W-2	Amount of state 2 withholding	9	N	Number, opt. decimal
364	9th W-2	Name of locality 2 withholding	10	AN	Text
365	9th W-2	Amount of locality 2 withholding	9	N	Number, opt. decimal

366	10th W-2	Employer ID	9	N	##### (9)
367	10th W-2	Employer Name	35	AN	Text
368	10th W-2	Employer Address	35	AN	Number/text (separate lines with commas)
369	10th W-2	Box #1: Wages/Tips/Salaries	9	N	Number, opt. decimal
370	10th W-2	Employee SSN (no punctuation)	9	N	##### (9)
371	10th W-2	Employee Name	35	AN	Text
372	10th W-2	Name of state 1 withholding	2	AN	Two letter state code
373	10th W-2	Amount of state 1 withholding	9	N	Number, opt. decimal
374	10th W-2	Name of locality 1 withholding	10	AN	Text
375	10th W-2	Amount of locality 1 withholding	9	N	Number, opt. decimal
376	10th W-2	Name of state 2 withholding	2	AN	Two letter state code
377	10th W-2	Amount of state 2 withholding	9	N	Number, opt. decimal
378	10th W-2	Name of locality 2 withholding	10	AN	Text
379	10th W-2	Amount of locality 2 withholding	9	N	Number, opt. decimal
380	Trailer		5	AN	value = ""EOD""