

RI-1040X Amended Rhode Island Individual Income Tax Return

(To be used by resident, nonresident and part-year resident taxpayers)

2003

<div style="border: 1px solid black; border-radius: 15px; padding: 5px; display: inline-block;">Please print or type</div>	Name and Address		First Name	Initial	Last Name	Your Social Security Number
	Spouse's Name and Address		Spouse's First Name	Initial	Last Name	Spouse's Social Security Number
	Present home address (number and street, including apartment no. or rural route)					Daytime Telephone Number ()
	City, town or post office			State	Zip Code	City or Town of Legal Residence

Additional Information

A. Enter name and address used on original return (if same as above write "SAME") _____

B. Are you filing an amended federal income tax return? Yes No

C. Have you been advised your federal return is under examination? Yes No

Filing Status

D. On original return 1. Single 2. Married filing jointly 3. Married filing separately 4. Head of Household 5. Qualifying widow(er)

E. On this return 1. Single 2. Married filing jointly 3. Married filing separately 4. Head of Household 5. Qualifying widow(er)

Income

	A. Originally reported	B. Net change	C. Correct amount
1. Federal AGI (Adjusted Gross Income)	1.		
2. Modifications from RI-1040(NR), page 2, Schedule I, Line 25	2.		
3. Modified Federal AGI - Combine lines 1 and 2	3.		
4. Federal Deductions	4.		
5. Subtract line 4 from line 3	5.		
6A. Number of Federal exemptions	6A.		
6B. Multiply Line 6A by \$3,050	6B.		
7. RI Taxable Income - subtract line 6B from line 5	7.		

Tax

8A. RI income tax	8A.			
Check method used on line 8A, column C <input type="checkbox"/> RI Tax Table or Rate Schedule <input type="checkbox"/> RI Schedule CGW <input type="checkbox"/> RI Schedule D <input type="checkbox"/> RI Schedule J <input type="checkbox"/> RI-8615				
8B. Other RI Taxes from RI-1040(NR), page 3, line 15	8B.			
9. RI Alternative Minimum Tax from RI-1040(NR), page 6, line 14	9.			
10. Total RI income tax - add lines 8A, 8B and 9	10.			

Form Type **Residents** - Complete page 2, part 2 and enter the amount from line 10 on page 2, part 2, line 10. **Nonresidents** - Complete page 2, part 3 and enter the amount from line 10 on page 2, part 3, line 10.

Payments

17. Total RI Tax and checkoff contributions	17.			
18. A. RI 2003 income tax withheld	18A.			
B. 2003 estimated tax payments and 2002 carryforward	18B.			
C. Property tax relief credit from RI-1040H (residents only) or Nonresident real estate withholding (nonresidents only)	18C.			
D. RI Earned Income Credit from RI-1040(NR), page 3, line 9...	18D.			
E. Other Payments	18E.			
F. Total - Add lines 18A, 18B, 18C, 18D and 18E	18F.			
G. Overpayment allowed on original return	18G.			
H. Total payments after overpayment - subtract line 18G from 18F	18H.			

Amount Due

19. A. If line 17 is larger than 18H, subtract line 18H from 17. This is the amount you owe.	19A.			
B. Interest due on amount on line 19A	19B.			
C. Total balance due - add lines 19A and 19B	19C.			

Refund

20. If line 18H is larger than line 17, subtract line 17 from 18H. This is the amount you overpaid.	20.			
21. Amount of overpayment to be refunded	21.			
22. Amount of overpayment to be applied to 2004 estimated tax	22.			

RETURN MUST BE SIGNED - SIGNATURE LINE IS LOCATED ON PAGE 2

Mail returns to - RI Division of Taxation One Capitol Hill Providence, RI 02908-5806

PART 2 RESIDENT CREDIT AND TAX CALCULATION

	A. Originally reported	B. Net change	C. Correct amount
10. Total RI income tax - enter the amount from page 1, line 10	10.		
11. A. RI percentage of allowable federal credits from RI-1040, page 2, line 34	11A.		
B. Other RI credits - indicate credit form numbers	11B.		
C. RI Credit for income taxes paid to other states from RI-1040, page 2, line 41.....	11C.		
12. Total RI credits - add lines 11A, 11B and 11C	12.		
13. RI income tax after credits - subtract line 12 from line 10 (not less than zero)	13.		
14. RI Use/Sales tax from RI-1040, page 4, Schedule T-205P, line 31	14.		
15. Total RI tax - add lines 13 and 14	15.		
16. RI checkoff contributions from RI-1040, page 2, schedule IV, line 42G	16.		
17. Total RI tax and checkoff contributions - add lines 15 and 16 Enter here and on page 1, line 17	17.		

PART 3 NONRESIDENT CREDIT AND TAX CALCULATION

	A. Originally reported	B. Net change	C. Correct amount
10. Total RI income tax to be allocated - enter the amount from page 1, line 10	10.		
11. RI percentage of allowable federal credits from RI-1040NR, page 2, line 34	11.		
12. RI tax after allowable federal credits (before allocation) - subtract line 11 from line 10 (not less than zero)	12.		
13. RI allocated income tax (check only one) <input type="checkbox"/> All income is from RI, enter the amount from line 12 on this line. <input type="checkbox"/> Nonresident with income from outside RI, complete RI-1040NR, page 5, Schedule III and enter result on this line. <input type="checkbox"/> Part-year resident with income from outside RI, complete RI-1040NR, page 7, Schedule V and enter result on this line.	13.		
14. Other RI credits - indicate credit form numbers	14.		
15. Total RI income tax after RI credits - subtract line 14 from line 13 (not less than zero) ..	15.		
16. RI checkoff contributions from RI-1040NR, page 2, schedule IV, line 35G	16.		
17. Total RI tax and checkoff contributions - add lines 15, 16 and any Use/Sales tax due \$ _____ from RI-1040NR, page 4, T-205P, line 31. Enter here and on page 1, line 17.	17.		

PART 4 EXPLANATION OF CHANGES TO INCOME, DEDUCTIONS AND CREDITS

Enter the line number from the form for each item you are changing and give the reason for each change. Attach only the supporting forms and schedules for the items changed. If you do not attach the required information, you Form RI-1040X may be returned.

Under penalties of perjury, I declare that I have examined this return, and to the best of my knowledge and belief, it is true, correct and complete

Your Signature	Date	Spouse's Signature	Date
If you do not need form mailed to you next year, check box. <input type="checkbox"/>		May the division contact you preparer about this return? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Paid preparers signature and address		SSN, PTIN or EIN	
Paid preparers address		Date	
Paid preparers address		Paid preparers telephone number	