

DECLARATION CONTROL NUMBER (DCN)

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E RI LABEL HERWISE PLEASE INT OR TYPE	YOUR FIRST NAME AND INITIAL	LAST NAME	YOUR SOCIAL SECURITY NUMBER
	IF A JOINT RETURN, SPOUSE'S FIRST NAME AN INITIAL	LAST NAME	SPOUSE'S SOCIAL SECURITY NUMBER
	HOME ADDRESS (NUMBER AND STREET)	APT NO.	TELEPHONE NUMBER (OPTIONAL)
	CITY, TOWN OR POST OFFICE, STATE AND ZIP CODE		()

**R.I. INDIVIDUAL INCOME TAX DECLARATION
FOR ELECTRONC FILING**

RI-8453-OL

2000

TAX RETURN INFORMATION

Total Income (RI-1040 line C-1)	1.	
Federal Tax (RI-1040 line 1)	2.	
Total RI Tax (RI-1040 line 2b)	3.	
RI Income Tax withheld (RI-1040 line 3a)	4.	
Amount to be refunded (RI-1040 line 6)	5.	
Amount you owe (RI-1040 line 4)	6.	

DECLARATION OF TAXPAYER

- I consent that my refund be directly deposited as designated in the electronic portion of my 2000 electronically filed RI income tax return. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund.
- I do not want direct deposit of my refund or I am not receiving a refund

If I have filed a balance due return, I understand that if the Division of Taxation does not receive full and timely payment of my tax liability, I will remain liable for the tax liability and all applicable interest and penalties.

Under penalties of perjury, I declare that the information I have given my on-line service provider and /or transmitter and the amounts in part 1 above agree with the amounts on the corresponding lines of the electronic portion of my 2000 RI income tax return. To the best of my knowledge and belief, my return is true, correct & complete.

Sign Here  _____
Your Signature

 _____
Spouses Signature