

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

2012

NAME AND ADDRESS please print or type	Your first name	Initial	Last name	Your social security number
	Spouse's first name	Initial	Last name	Spouse's social security number
	Present home address (number and street, including apartment number or rural route)			Daytime telephone number ()
	City, town or post office	State	ZIP code	City or town of legal residence

ELECTORAL CONTRIBUTION If you want \$5.00 (\$10.00 if a joint return) to go to this fund, check here. (See instructions. This will not increase your tax or reduce your refund.) Yes No

If you wish the 1st \$2.00 (\$4.00 if a joint return) to be paid to a specific party, check the box and fill in the name of the political party. Otherwise, it will be paid to a nonpartisan general account.

FILING STATUS Check only one box

1 Single 2 Married filing jointly 3 Married filing separately 4 Head of household 5 Qualifying widow(er)

INCOME, TAX AND CREDITS	1. Federal AGI (Adjusted Gross Income) from Federal Form 1040, line 37; 1040A, line 21 or 1040EZ, line 4.....	1.	
	2. Net modifications to Federal AGI from RI Schedule M, line 3. If no modifications, enter zero on this line.....	2.	
	3. Modified Federal AGI. Combine lines 1 and 2 (add net increases or subtract net decreases).....	3.	
	4. Deductions. RI standard deduction (left margin). If line 3 is over \$181,900, see Standard Deduction Worksheet on page i.	4.	
	5. Subtract line 4 from line 3.....	5.	
	6. Exemptions. Enter federal exemptions in box then multiply by \$3,650 and enter result in 6. <input type="checkbox"/> X \$3,650 =	6.	
	7. RI TAXABLE INCOME. Subtract line 6 from line 5.....	7.	
	8. RI income tax from Rhode Island Tax Table or Tax Computation Worksheet	8.	
	9. RI percentage of allowable Federal credit from page 2, RI Schedule I, line 25	9.	
	10. Rhode Island tax after allowable Federal credit - before allocation. Subtract line 9 from line 8 (not less than zero)	10.	
	11. RI allocated income tax. <input type="checkbox"/> All income is from RI, <input type="checkbox"/> Nonresident with income from outside RI, complete page 7, schedule II and enter result on this line. <input type="checkbox"/> Part-year resident with income from outside RI, complete page 9, schedule III and enter result on this line.	11.	
	12. Other Rhode Island Credits from RI Schedule CR, line 4	12.	
	13. A. RI income tax after credits. Subtract line 12 from line 11 (not less than zero).....	13A.	
	B. Recapture of Prior Year Other Rhode Island Credits from RI Schedule CR, line 7.....	13B.	
	14. RI checkoff contributions from page 2, RI Checkoff Schedule, line 33 (Contributions reduce your refund or increase your balance due.)	14.	
	15. USE/SALES tax due from page I-4, line 6 of the Individual Consumer's Use/Sales Tax Worksheet	15.	
16. TOTAL RI TAX AND CHECKOFF CONTRIBUTIONS. Add lines 13A, 13B, 14 and 15	16.		

PAYMENTS	17. A. Rhode Island 2012 income tax withheld from RI Schedule W, line 21... (All Forms W-2 and 1099 with RI withholding, AND Schedule W must be attached)	17A.		Check <input checked="" type="checkbox"/> if extension is attached. <input type="checkbox"/>
	B. 2012 estimated tax payments and amount applied from 2011 return.....	17B.		
	C. Nonresident withholding on real estate sales in 2012	17C.		
	D. RI earned income credit from page 2, RI Schedule EIC, line 42.....	17D.		
	E. Other payments.....	17E.		
	F. TOTAL PAYMENTS AND CREDITS. Add lines 17A, 17B, 17C, 17D and 17E	17F.		

AMOUNT DUE	18. A. AMOUNT DUE: If line 16 is LARGER than line 17F, subtract line 17F from 16	18A.	
	B. Check <input checked="" type="checkbox"/> if RI-2210 or RI-2210A is attached and enter underestimating interest due. This amount should be added to line 18A or subtracted from line 19, whichever applies.	18B.	
	C. TOTAL AMOUNT DUE. Add lines 18A and 18B. Complete RI-1040V and send in with your payment	18C.	

REFUND	19. AMOUNT OVERPAID. If line 17F is LARGER than 16, subtract line 16 from 17F..... If there is an amount due for underestimating interest on line 18B, subtract line 18B from line 16.	19.	
	20. Amount of overpayment to be refunded.....	20.	
	21. Amount of overpayment to be applied to 2013 estimated tax.....	21.	

Rhode Island Standard Deduction

Single **\$7,800**

Married filing jointly or Qualifying widow(er) **\$15,600**

Married filing separately **\$7,800**

Head of household **\$11,700**

Attach Forms W-2 and 1099 here.

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.

RI CHECKOFF ✓ CONTRIBUTIONS SCHEDULE

NOTE: Contributions reduce your refund or increase your balance due.

	\$1.00	\$5.00	\$10.00	Other		
26.  Drug program account RIGL §44-30-2.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	26.
27.  Olympic Contribution RIGL §44-30-2.1 Yes <input type="checkbox"/> \$1.00 Contribution (\$2.00 if a joint return)						27.
28.  RI Organ Transplant Fund RIGL §44-30-2.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	28.
29.  RI Council on the Arts RIGL §42-75.1-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	29.
30.  RI Nongame Wildlife Fund RIGL §44-30-2.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	30.
31.  Childhood Disease Victims' Fund RIGL §44-30-2.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	31.
32.  RI Military Family Relief Fund RIGL §44-30-2.9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	32.
33. TOTAL CONTRIBUTIONS. Add lines 26, 27, 28, 29, 30, 31 and 32. Enter here and on RI-1040NR, page 1, line 14						33.

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, line 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 or RI-1040NR, page 9, Schedule III, line 14. If all 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 and on RI-1040NR, page 1, line 17D.....	42.	

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
------------------	------	----------------------	------

May the division contact your preparer about this return? Yes Preparer's name (please print):
Paid preparer's signature and address _____ SSN, PTIN or EIN _____ Telephone number _____