State of Rhode Island and Providence Plantations

2015 Form RI-1040NR

Nonresident Individual Income Tax Return

15100499990101

Reserved for header information

Required header info:
Name (first, MI, last), deceased check box, social security number, spouse's name (first, MI, last), spouse's social security number, deceased check box, address, new address check box, city/town, state, ZIP code, city/town of legal residence, and daytime phone number

x: 0.5 in
y: 1.3 in
w: 4.1 in
h:1.5 in

Reserved for 2D barcode

x: 4.75 in
y: 1.3 in
w: 2.75 in
h:1.5 in

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

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

Rhode Island Standard Deduction
Single **$8,275**
Married filing jointly or Qualifying widow(er) **$16,550**
Married filing separately **$8,275**
Head of household **$12,400**

1	Federal AGI 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 $192,700, see Standard Deduction Worksheet	4	
5	Subtract line 4 from line 3	5	
6	Exemptions. Enter federal exemptions in box, multiply by $3,850 and enter result on line 6. If line 3 is over $192,700, see Exemption Worksheet on page i ☐ **X $3,850 =**	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 Sch 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.** Check only one box. ☐ **A**ll income is from RI, enter amount from line 10 on this line. ☐ **N**onresident with income from outside RI, complete page 7, Sch II and enter result on this line. ☐ **P**art-year resident with income from outside RI, complete page 9, Sch III and enter result on this line.	11	
12	Other Rhode Island Credits from RI Schedule CR, line 7	12	
13a	Rhode Island 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 10	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 12, RI Schedule U, line 4 or line 8, whichever applies	15	
16	**TOTAL RI TAX AND CHECKOFF CONTRIBUTIONS**. Add lines 13a, 13b, 14 and 15	16	

PAYMENTS

Attach Forms W-2 and 1099 here.

17a	RI 2015 income tax withheld from RI Schedule W, line 16 **(Attach all Forms W-2 and 1099 with RI withholding, AND Sch W)**	17a		
b	2015 estimated tax payments and amount applied from 2014 return	17b		
c	Nonresident withholding on real estate sales in 2015	17c		
d	RI earned income credit from page 2, RI Schedule EIC, line 38	17d		
e	Other payments	17e		
f	**TOTAL PAYMENTS AND CREDITS**. Add lines 17a, 17b, 17c, 17d and 17e		17f	

☐ Check ✓ to certify use tax amount on line 15 is accurate.

☐ Check ✓ if extension is attached.

AMOUNT DUE

18a	**AMOUNT DUE**. If line 16 is **LARGER** than line 17f, subtract line 17f from line 16	18a		
b	Check ✓ ☐ 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 line 16, subtract line 16 from line 17f. **If there is an amount due for underestimating interest on line 18b, subtract line 18b from line 19.** ☺	19	
20	Amount of overpayment to be refunded	20	
21	Amount of overpayment to be applied to 2016 estimated tax	21	

RETURN MUST BE SIGNED - SIGNATURE IS LOCATED ON PAGE 2

Mailing address: RI Division of Taxation, One Capitol Hill, Providence, RI 02908-5806

DRAFT 09/12/2015

State of Rhode Island and Providence Plantations

2015 Form RI-1040NR

Nonresident Individual Income Tax Return

15100499990102

Name	Your social security number

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 49 or Form 1040A, line 31	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 SCHEDULE II AND 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**	26	
27	Olympic Contribution **RIGL §44-30-2.1** ..... Yes $1.00 contribution ($2.00 if filing a joint return)	27	
28	RI Organ Transplant Fund **RIGL §44-30-2.5**	28	
29	RI Council on the Arts **RIGL §42-75.1-1**	29	
30	RI Nongame Wildlife Fund **RIGL §44-30-2.2**	30	
31	Childhood Disease Victim's Fund **RIGL §44-30-2.3**	31	
32	RI Military Family Relief Fund **RIGL §44-30-2.9**	32	
33	**TOTAL CONTRIBUTIONS**. Add lines 26, 27, 28, 29, 30, 31 and 32. Enter here and on RI-1040NR, pg 1, line 14.	33	

RI SCHEDULE EIC - RHODE ISLAND EARNED INCOME CREDIT

34	Federal earned income credit from Federal Form 1040, line 66a; 1040A, line 42a, or 1040EZ, line 8a	34	
35	Rhode Island percentage	35	10%
36	RI EARNED INCOME CREDIT. Multiply line 34 by line 35	36	
37	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 RI, enter 1.0000**	37	.
38	**TOTAL RI EARNED INCOME CREDIT.** Multiply line 36 by line 37. Enter here and on RI-1040NR, pg 1, line 17d...	38	

DRAFT 09/12/2015

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

May the Division of Taxation contact your preparer? YES ☐

Revised 09/2015