State of Rhode Island and Providence Plantations

2016 Form RI-1040

Resident Individual Income Tax Return

16100199990101

Your first name	MI	Last name	Your social security number
Spouse's name	**MI**	**Last name**	**Spouse's social security number**
Address			**Daytime phone number**
City, town or post office	**State**	**ZIP code**	**City or town of legal residence**
Your driver's license number and state		**Spouse's driver's license number and state**	

If yes, check the box: Primary deceased? ☐ Spouse deceased? ☐ New address? ☐

Electoral contribution? ☐ Specific party? ☐

Reserved for 2D barcode

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

FILING STATUS Check one

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 **$8,300**
Married filing jointly or Qualifying widow(er) **$16,600**
Married filing separately **$8,300**
Head of household **$12,450**

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 $193,600, see Standard Deduction Worksheet	4	
5	Subtract line 4 from line 3	5	
6	Exemptions. Enter # of federal exemptions in box, multiply by $3,900 and enter result on line 6. If line 3 is over $193,600, see Exemption Worksheet on page i. ☐ **X $3,900 =**	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	
9a	RI percentage of allowable Federal credit from page 2, RI Sch I, line 22 — 9a		
b	RI Credit for income taxes paid to other states from page 2, RI Sch II, line 29 — 9b		
c	Other Rhode Island Credits from RI Schedule CR, line 7 — 9c		
d	Total RI credits. Add lines 9a, 9b and 9c	9d	
10a	Rhode Island income tax after credits. Subtract line 9d from line 8 (not less than zero)	10a	
b	Recapture of Prior Year Other Rhode Island Credits from RI Schedule CR, line 10	10b	
11	RI checkoff contributions from page 2, RI Checkoff Schedule, line 37 — **Contributions reduce your refund or increase your balance due.**	11	
12	USE/SALES tax due from RI Schedule U, line 4 or line 8, whichever applies	12	
13	**TOTAL RI TAX AND CHECKOFF CONTRIBUTIONS**. Add lines 10a, 10b, 11 and 12	13	

PAYMENTS AND PROPERTY TAX RELIEF CREDIT

Attach Forms W-2 and 1099 here.

14a	RI 2016 income tax withheld from RI Schedule W, line 16 **(Attach all Forms W-2 and 1099 with RI withholding, AND Sch W)** — 14a		
b	2016 estimated tax payments and amount applied from 2015 return — 14b		
c	Property tax relief credit from RI-1040H, line 13. **Attach RI-1040H** — 14c		
d	RI earned income credit from page 2, RI Schedule EIC, line 40 — 14d		
e	RI Residential Lead Paint Credit from RI-6238, line 7. **Attach RI-6238**. — 14e		
f	Other payments — 14f		
g	**TOTAL PAYMENTS AND CREDITS**. Add lines 14a, 14b, 14c, 14d, 14e and 14f	14g	

☐ Check ✓ to certify use tax amount on line 12 is accurate.

☐ Check ✓ if extension is attached.

AMOUNT DUE

15a	**AMOUNT DUE**. If line 13 is **LARGER** than line 14g, subtract line 14g from line 13 — 15a		
b	Check ✓ ☐ if **RI-2210** or **RI-2210A** is attached and enter underestimating interest due. **This amount should be added to line 15a or subtracted from line 16, whichever applies.** — 15b		
c	**TOTAL AMOUNT DUE**. Add lines 15a and 15b. Complete RI-1040V and send in with your payment ☹	15c	

REFUND

16	**AMOUNT OVERPAID**. If line 14g is **LARGER** than line 13, subtract line 13 from line 14g. **If there is an amount due for underestimating interest on line 15b, subtract line 15b from line 16.** ☺	16	
17	Amount of overpayment to be refunded	17	
18	Amount of overpayment to be applied to 2017 estimated tax — 18		

RETURN MUST BE SIGNED - SIGNATURE IS LOCATED ON PAGE 2

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

State of Rhode Island and Providence Plantations

2016 Form RI-1040

Resident Individual Income Tax Return

16100199990102

Name	Your social security number

RI SCHEDULE I - ALLOWABLE FEDERAL CREDIT

19	RI income tax from page 1, line 8	19	
20	Credit for child and dependent care expenses from Federal Form 1040, line 49 or Form 1040A, line 31 — 20		
21	Tentative allowable federal credit. Multiply line 20 by 25% (0.2500)	21	
22	MAXIMUM CREDIT. Line 19 or 21, whichever is SMALLER. Enter here and on page 1, line 9a	22	

RI SCHEDULE II - CREDIT FOR INCOME TAX PAID TO ANOTHER STATE

NOTE: You must attach a signed copy of the state tax return(s) for which you are claiming credit.

23	RI income tax from RI-1040, page 1, line 8 less allowable federal credit from RI-1040, page 2, line 22	23	
24	Income derived from other state. If more than one state, see instructions	24	
25	Modified federal AGI from page 1, line 3	25	
26	Divide line 24 by line 25	26	.
27	Tentative credit. Multiply line 23 by line 26	27	
28	Tax due and paid to other state (see specific instructions). Insert abbreviation for name of state paid _____	28	
29	MAXIMUM TAX CREDIT. Line 23, 27 or 28, whichever is the SMALLEST. Enter here and on page 1, line 9b	29	

RI CHECKOFF CONTRIBUTIONS SCHEDULE

		$1.00	$5.00	$10.00	Other			
30	Drug program account **RIGL §44-30-2.4**						30	
31	Olympic Contribution **RIGL §44-30-2.1** ..... Yes ☐ $1.00 contribution ($2.00 if filing a joint return)						31	
32	RI Organ Transplant Fund **RIGL §44-30-2.5**						32	
33	RI Council on the Arts **RIGL §42-75.1-1**						33	
34	RI Nongame Wildlife Fund **RIGL §44-30-2.2**						34	
35	Childhood Disease Victim's Fund **RIGL §44-30-2.3**						35	
36	RI Military Family Relief Fund **RIGL §44-30-2.9**						36	
37	TOTAL CONTRIBUTIONS. Add lines 30, 31, 32, 33, 34, 35 and 36. Enter here and on RI-1040, page 1, line 11						37	

RI SCHEDULE EIC - RHODE ISLAND EARNED INCOME CREDIT

38	Federal earned income credit from Federal Form 1040, line 66a; 1040A, line 42a, or 1040EZ, line 8a	38	
39	Rhode Island percentage	39	12.5%
40	RI EARNED INCOME CREDIT. Multiply line 38 by line 39. Enter here and on RI-1040, page 1, line 14d	40	

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 ☐

State of Rhode Island and Providence Plantations

2016 RI Schedule W

Rhode Island W-2 and 1099 Information

16101099990101

Name(s) shown on Form RI-1040 or RI-1040NR	Your social security number

Complete this Schedule listing all of your and, if applicable, your spouse's W-2s and 1099s showing Rhode Island Income Tax withheld. *W-2s or 1099s showing Rhode Island Income Tax withheld must still be attached to the front of your return.* Failure to do so may delay the processing of your return. ATTACH THIS SCHEDULE W TO YOUR RETURN

	Column A Enter "S" if Spouse's W-2 or 1099	Column B Enter 1099 letter code from chart	Column C Employer's Name from Box C of your W-2 or Payer's Name from your Form 1099	Column D Employer's state ID # from box 15 of your W-2 or Payer's Federal ID # from Form 1099	Column E Rhode Island Income Tax Withheld (SEE BELOW FOR BOX REFERENCES)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16	Total RI Income Tax Withheld. Add lines 1 through 15, Col. E. Enter total here and on RI-1040, line 14a or RI-1040NR, line 17a.....				
17	Total number of W-2s and 1099s showing Rhode Island Income Tax Withheld				

Schedule W Reference Chart

Form Type	Letter Code for Column B	Withholding Box	Form Type	Letter Code for Column B	Withholding Box	Form Type	Letter Code for Column B	Withholding Box
W-2	–	17	1099-DIV	D	14	1099-OID	O	13
W-2G	–	15	1099-G	G	11	1099-R	R	12
1042-S	S	17a	1099-INT	I	17	RI-1099PT	P	9
1099-B	B	16	1099-MISC	M	16			