

State of Rhode Island Division of Taxation 2023 Form RI-1040NR

Nonresident Individual Income Tax Return



23100415550101

Your social see				
Your first name	MI Last name Suffix		****	162 I I I
NIHARIKA	ANDHRAPU		R MER HANN	
Spouse's nam	MI Last name Suffix		5.67.53.666	
Address		en fret fred for en formales de la compañía de la c	EANID X. DAVIDAAF IND	CISCIII III
	1. איני איזדרי 1.			
City, town or p				
MANCHESTE	NH 03102			
City or town of	that applies Other-		Amended	
OUT OF ST	TE wise, leave blank. deceased? deceased? add	lress?	Return? *	
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 View with the 1st \$2.00 (\$4.00 if a joint box and fill in the name of the political p wise, it will be paid to a nonpartisan ge	oarty. Other-	o a specific part	y, check
FILING STATUS ^S Check one	lgle ⇔ X Married filing ⇔ Married filing ⇔ Head of household ⇔		alifying ow(er) ⊏>	
INCOME, 1	Federal AGI from Federal Form 1040 or 1040-SR, line 11	1	24928	00
TAX AND CREDITS		2	0	0.0
Rhode 2	Net modifications to Federal AGI from RI Sch M, line 3. If no modifications, enter 0 on this line.	2	0	00
Island Standard Deduction	Modified Federal AGI. Combine lines 1 and 2 (add net increases or subtract net decreases)	3	24928	00
Single 4	RI Standard Deduction from left. If line 3 is over \$233,750, see Standard Deduction Worksheet	4	10000	00
Married filing jointly 5 or	Subtract line 4 from line 3. If zero or less, enter 0	5	14928	00
Qualifying widow(er) \$20,050	Enter # of exemptions from RI Sch E, line 5 in box, multiply by \$4,700 and enter result on line 6. If line 3 is over \$233,750, see Exemption Worksheet 1 X \$4,700=	6	4700	00
Married filing separately	RI TAXABLE INCOME. Subtract line 6 from line 5. If zero or less, enter 0	7	10228	00
\$10,025 Head of 8	RI income tax from Rhode Island Tax Table or Tax Computation Worksheet	8	383	00
household \$15,050 9	RI percentage of allowable Federal credit from page 3, RI Sch I, line 25	9		00
10	Rhode Island tax after allowable Federal credit - before allocation. Subtract line 9 from line 8	10	383	00
Using a 11	RI allocated income tax. Check only All income is from RI, enter amount from line Nonresident with in- come from outside RI, complete Sch II and Part-year resident with income from outside RI, complete Sch II and	11	383	00
paper clip, 12	one box. 10 on this line. enter result on this line. enter result on this line. Other Rhode Island Credits from RI Schedule CR, line 9	12		00
please attach Forms ¹³ a	Rhode Island income tax after credits. Subtract line 12 from line 11 (not less than zero)	13a	383	00
	Recapture of Prior Year Other Rhode Island Credits from RI Schedule CR, line 12	13b	0	00
here. 14	RI checkoff contributions from page 3, RI Checkoff Schedule, line 33. your refund or increase	14	0	00
15 a	USE/SALES tax due from RI Schedule U, line 4 or line 8, whichever applies	15a		00
ŀ	Check ✓ to certify use tax amount on line 15a is accurate.	15b		00
16 a	TOTAL RI TAX AND CHECKOFF CONTRIBUTIONS. Add lines 13a, 13b, 14, 15a and 15b	16a	383	00

RETURN MUST BE SIGNED - SIGNATURE IS LOCATED ON PAGE 2

REV 02/15/24 PRO Mailing address: RI Division of Taxation, One Capitol Hill, Providence, RI 02908-5806

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* If filing an amended return, attach the Explanation of Changes supplemental page



State of Rhode Island Division of Taxation 2023 Form RI-1040NR



Nonresident Individual Income Tax Return - page 2

Name(s) shown on Form RI-1040 or RI-1040NR	Your social security number
NIHARIKA ANDHRAPU	302-33-3466

16 b	TOTAL RI TAX AND CHECKOFF CONTRIBUTIONS from line 16a				16b	383	00
17 a	RI 2023 income tax withheld from RI Schedule W, line 16. You must attach Sch W AND all W-2 and 1099 forms with RI withholding	17a	929	00			
b	2023 estimated tax payments and amount applied from 2022 return	17b		00			
с	Nonresident withholding on real estate sales in 2023	17c		00			
d	RI earned income credit from page 3, RI Schedule EIC, line 38	17d		00			
е	Other payments	17e		00			
f	TOTAL PAYMENTS AND CREDITS. Add lines 17a, 17b, 17c, 17d and	17e			17f	929	00
g	Previously issued overpayments (if filing an amended return)				17g		00
h	NET PAYMENTS. Subtract line 17g from line 17f				17h	929	00
18 a	AMOUNT DUE. If line 16b is LARGER than line 17h, subtract line 17h	from I	ine 16b		18a		00
b	Enter the amount of underestimating interest due from Form RI-2210 of This amount should be added to line 18a or subtracted from line 19, w		```		18b	0	00
с	TOTAL AMOUNT DUE. Add lines 18a and 18b. Complete RI-1040V ar	nd sen	d in with your payment	$\overline{\mathbf{O}}$	18c	0	00
19	AMOUNT OVERPAID. If line 17h is LARGER than line 16b, subtract line is an amount due for underestimating interest on line 18b, subtract line			\odot	19	546	00
20	Amount of overpayment to be refunded				20	546	00
21	Amount of overpayment to be applied to 2024 estimated tax	21		00			

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 Your driver's license number and state Date Telephone number (603) 264-2579 Spouse's signature Spouse's driver's license number and state Date Telephone number Paid preparer signature Print name Date Telephone number SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/28/2024 (678) 965-9522 Paid preparer address City, town or post office State ZIP code PTIN 245 ROONEY CT E BRUNSWICK NJ 08816 P02082703





State of Rhode Island Division of Taxation 2023 Form RI-1040NR



Nonresident Individual Income Tax Return - page 3

Name(s) shown on Form RI-1040 or RI-1040NR	Your social security number
NIHARIKA ANDHRAPU	302-33-3466

RI SCHEDULE I - ALLOWABLE FEDERAL CREDIT

22	RI income tax from page 1, line 8	22	00
23	Credit for child and dependent care expenses from Federal Form 1040 or 1040-SR, Schedule 3, line 2	23	00
24	Tentative allowable federal credit. Multiply line 23 by 25% (0.2500)	24	00
25	MAXIMUM CREDIT. Line 22 or 24, whichever is SMALLER. Enter here and on page 1, line 9	25	00
RI S	CHEDULE 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 13.		
	Schedule III should be completed by PART-YEAR RESIDENTS with income from outside Rhode Island. RI Schedule III is located on page 15.		
	NONRESIDENTS and PART-YEAR RESIDENTS with all income from Rhode Island sources do not need to complete either schedule II or III.		
RI C	CHECKOFF CONTRIBUTIONS SCHEDULE		
	\$1.00 \$5.00 \$10.00 Other		
26	Drug program account RIGL §44-30-2.4	26	00
27	Olympic Contribution RIGL §44-30-2.1 Yes \$1.00 contribution (\$2.00 if a joint return)	27	00
28	RI Organ Transplant Fund RIGL §44-30-2.5	28	00
29	RI Council on the Arts RIGL §42-75.1-1	29	00
30	Nongame Wildlife Fund RIGL §44-30-2.2	30	00
31	Childhood Disease Victim's Fund RIGL §44-30-2.3 and Substance Use and Mental Health Leadership Council of RI RIGL §44-30-2.11	31	00
32	RI Military Family Relief Fund RIGL §44-30-2.9	32	00
33	TOTAL CONTRIBUTIONS. Add lines 26 through 32. Enter here and on RI-1040NR, page 1, line 14	33	00
RI S	CHEDULE EIC - RHODE ISLAND EARNED INCOME CREDIT		· · · · · ·
34	Federal earned income credit from Federal Form 1040 or 1040-SR, line 27	34	00
35	Rhode Island percentage	35	15%
36	RI EARNED INCOME CREDIT. Multiply line 34 by line 35	36	00
37	Rhode Island allocation from RI-1040NR, page 11, Schedule II, line 13 or RI-1040NR, page 13, Schedule III, line 14. If all income is from RI, enter 1.0000		1
38	TOTAL RI EARNED INCOME CREDIT. Multiply line 36 by line 37. Enter here and on RI-1040NR, pg 2, line 17d	38	00





THIS SCHEDULE IS ONLY TO BE COMPLETED BY FULL YEAR NONRESIDENTS. PART-YEAR RESIDENTS COMPLETE RI SCHEDULE III.

PART 1: ALLOCATION AND TAX WORKSHEET

			Column A Rhode Island		Column B Federal	
1	Wages, salaries, tips, etc from Federal Form 1040 or 1040-SR, line 1z	1	24928	00	24928	00
2	Interest and dividends from Federal Form 1040 or 1040-SR, lines 2b and 3b	2		00		00
3	Business income from Federal Form 1040 or 1040-SR, Schedule 1, line 3	3		00		00
4	Sale or exchange of property from Federal Form 1040 or 1040-SR, line 7 or Federal Form 1040 or 1040-SR, Schedule 1, line 4	4		00		00
5	Pension and annuities; rents, royalties, etc. from Federal Form 1040 or 1040-SR, lines 4b and 5b, and Federal Form 1040 or 1040-SR, Schedule 1, line 5	5		00		00
6	Farm income from Federal Form 1040 or 1040-SR, Schedule 1, line 6	6		00		00
7	Miscellaneous income from Federal Form 1040 or 1040-SR, line 6b, and Federal Form 1040 or 1040-SR, Schedule 1, lines 1, 2a, 7, and 9	7		00		00
8	TOTAL. Add lines 1 through 7	8	24928	00	24928	00
9	Adjustments to AGI from Federal Form 1040 or 1040-SR, line 10	9		00		00
10	Adjusted gross income. Subtract line 9 from line 8	10	24928	00	24928	00
11	Net modifications to Federal AGI from RI-1040NR, RI Schedule M, line 3	11		00		00
12	Modified Federal AGI. Combine lines 10 and 11. The amount in column B must equal the amount on RI-1040NR, page 1, line 3	12	24928	00	24928	00
13	Allocation. Divide line 12, col. A by line 12, col. B. If amount on line 12, col. A is greater than 1.0000. If zero or less, enter 0.0000.	13 1.00		000		
14	RI tax after allowable federal credits before allocation from RI-1040NR, page 1, line 10			14	383	00
15	RI INCOME TAX. Multiply line 14 by line 13. Enter here and on RI-1040NR, page 1, line 11.	Check	the N onresident box	15	383	00





Name(s) shown on Form RI-1040NR NIHARIKA ANDHRAPU

Your social security number

302-33-3466

PART 2: ALLOCATION OF WAGE AND SALARY INCOME TO RHODE ISLAND NOTE: USE THIS SCHEDULE ONLY IF YOU WORKED FOR THE SAME EMPLOYER IN MORE THAN ONE STATE. AND YOUR WAGES OR SALARY INCOME HAS NOT BEEN ALLOCATED ON YOUR W-2

1	Wages, salaries, tips, etc	1	00		
2	Total days in the year	2	365 days		
3	Sick leave days	3	days		
4	Vacation days	4	days		
5	Other nonworking days (Saturdays, Sundays, holidays, etc.)				
6	Total nonworking days. Add lines 3, 4 and 5	6	days		
7	Total days worked in the year. Subtract line 6 from line 2	7	days		
8	Total days worked outside Rhode Island	8	days		
9	Days worked in Rhode Island. Subtract line 8 from line 7	9	days		
10	Allocation. Divide line 9 by line 7	10			
11	RI AMOUNT. Multiply line 1 by line 10. Enter here and include on RI-1040NR, Sche	11	00		

PART 3: BUSINESS ALLOCATION PERCENTAGE

			Column A RI amounts	Column B Total amounts	Column C (Column A / Column B)
1	Real property owned	1	00	00	
2	Real property rented from others (8 x annual net rental rate).	2	00	00	
3	Tangible personal property owned	3	00	00	
4	Total property. Add lines 1, 2 and 3, then divide column A by				
	column B. Enter result in column C	4	00	00	
5	Wages, salaries and other personal service compensation				
	paid during the year. Divide column A by column B and	5			
	enter result in column C		00	00	
6	Gross sales of merchandise or charges for services during				
	the year. Divide column A by column B and enter result in				
	column C	6	00	00	
7	Total of percentages in column C. Add lines 4, 5 and 6			7	
8	BUSINESS ALLOCATION PERCENTAGE. Divide line 7 by th	nree (3), or the number of percent	ages on lines 4, 5	
	and 6. Enter here and in column B below				

Enter the number and amount of each item of business income (or loss) reported on RI-1040NR, Schedule II, column B required to be allocated and multiply percentage to determine Rhode Island amount. Enter amounts from column C on corresponding lines on RI-1040NR, Schedule II, column A.

			Column A Income to be allocated	Column B From line 8 above	Column C (Column A x Column B)
9	Line number from RI-1040NR, Sch II, col B, line	9	00		00
10	Line number from RI-1040NR, Sch II, col B, line	10	00		00
11	Line number from RI-1040NR, Sch II, col B, line	11	00		00
12	Line number from RI-1040NR, Sch II, col B, line	12	00		00
13	Line number from RI-1040NR, Sch II, col B, line	13	00		00

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Rhode Island Withholding Information - Page 4

Name(s) shown on Form RI-1040 or RI-1040NR	Your social security number
NIHARIKA ANDHRAPU	302-33-3466

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

	Column A	Column B	Column C	Column D	Column	
	<u>Enter "S"</u> <u>if Spouse's</u> <u>W-2, 1099, etc.</u>	Enter letter code from chart below	Employer's Name from Box C of your W- 2 or Payer's Name from your other forms	Employer's state ID # from box 15 of your W-2 or Payer's Federal ID # from other forms		
1			IT & EBUSINESS CONSULTING SERVICES INC	270009627	929	00
2						00
3						00
4						00
5						00
6						00
7						00
8						00
9						00
10						00
11						00
12						00
13						00
14						00
15						00
16			ld lines 1 through 15, Col. E. Enter total here ar		929	00
17	Total number of W	/-2s and 1099s s	showing Rhode Island Income Tax Withheld		1	

	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-G	G	11		1099-OID	0	14			
W-2G	W	15		1099-INT	I	17		1099-R	R	14			
1042-S	S	17a		1099-K	K	8		RI-1099E	E	11			
1099-B	В	16		1099-MISC	М	16		RI K-1	Р	Sect. IV, line 2			
1099-DIV	D	16		1099-NEC	N	5							





Exemption Schedule for RI-1040 and RI-1040NR

Name(s) shown on Form RI-1040 or RI-1040NR You	our social security number
NIHARIKA ANDHRAPU 30	302333466

EXEMPTIONS

Complete this Schedule listing all individuals you can claim as a dependent. ATTACH THIS EXEMPTION SCHEDULE TO YOUR RETURN Failure to do so may delay the processing of your return.

1a	Yourself						
b	Spouse						
	(A) Name of Dependent	(B) Social Security Number	(C) Date of Birth	(D) Relationship		
2a							
b							
с							
d							
e							
f							
g							
h							
i							
j							
k							
1							
m							
	Exemption Number Summary						
3	Enter the number of boxes checked on lines 1a and 1b			3	1		
4a	^a Enter the number of children from lines 2a through 2m who lived with you				0		
b	Enter the number of children from lines 2a through 2m who did not live with you due to divorce or separation				0		
с	Enter the number of other dependents from lines 2a through 2m not included on lines 4a or 4b. 4c						
5	Add the numbers from lines 3 through 4c. Enter here and in the box on RI-1040/NR, pg 1, line 6. ⁵						