Declaration Control Number (DCN)

0	0	-	3	8	1	3	7	1						6

RI-8453 Rhode Island Income Tax Declaration For Electronic Filing 2005

Name and Address

Please print or type.

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 No. or Rural Route) | Daytime Telephone Number ( )

City, Town or Post Office | State | Zip Code | City or Town of Legal Residence

Part 1 Tax Return Information

Attach forms W-2 and 1099 here

1.	Federal AGI (Adjusted Gross Income) - RI-1040, line 1	1.
2.	Rhode Island Income Tax - RI-1040, line 8	2.
3.	Total Rhode Island Income Tax - RI-1040, line 10	3.
4.	Rhode Island Income Tax Withheld - RI-1040, line 18a (Please attach forms W-2, 1099, etc.)	4.
5.	Amount to be Refunded - RI-1040, line 20	5.
6.	Federal exemption - RI-1040, line 6	6.

Part 2 Declaration of Taxpayer

☐ I consent that that my refund be directly deposited as designated in the electronic portion of my 2003 Rhode Island income tax return. If I have filed a joint return, this is irrevocable appointment of the other spouse as agent to receive the refund.

☐ I do not want direct deposit of my refund or I am not receiving a refund.

Under penalities of perjury, I declare that the information I have provided to my electronic return originator (ERO) and the amounts shown in Part 1 above agree with the amounts shown on the corresponding lines of my Rhode Island income tax return. To the best of my knowledge and belief, my return is true, correct and complete. I consent that my return, this declaration and accompanying schedules and atatements be sent to the State of Rhode Island by my ERO. If I have filed a balance due return, I understand hat if the State of Rhode Island does not receive full and timely payment of my tax liability, I will remain liable for the tax liability and all applicable interest and penalities. If I have filed a joint Federal and state tax return and there is an error on my return, I understand my state return will be rejected. If the processing of my return or refund is delayed, I authorize the Division of Taxation to disclose to my ERO and or the transmitter the reason(s) for the delay, or when the refund was sent.

Your Signature ➤ Date

Spouse's Signature ➤ Date

Express File, Inc. , P.O. Box 131007, Ann Arbor, MI 48113-1007