2015 CBT-100S

020SW01151

NEW JERSEY CORPORATION BUSINESS TAX RETURN

FOR TAXABLE YEARS ENDING ON AND AFTER JULY 31, 2015 THROUGH JUNE 30, 2016

Taxable year beginning _____, _____, and ending _____, _____

Type or print the requested information.

FEDERAL EMPLOYER I.D. NUMBER | NJ CORPORATION NUMBER

CORPORATION NAME

MAILING ADDRESS

CITY | STATE | ZIP CODE

Check if applicable ☐ Initial return ☐ Initial 1120-S ☐ Inactive

Date of NJ S Corporation election _____

State and date of incorporation _____

Date authorized to do business in NJ _____

Federal business activity code _____

Corporation books are in the care of _____

at _____

Telephone Number (_____) _____

DIVISION USE

RP NP A _____ R _____

1. Entire Net Income subject to Federal corporate income taxation from Schedule A, line 43 (if a net loss, enter zero)	1.	
2. Allocation factor from Schedule J, Non-allocating taxpayers enter 1.000000	2.	.
3. Allocated Entire Net Income subject to Federal corporate income taxation - Multiply line 1 by line 2. Non-allocating taxpayers must enter the amount from line 1	3.	
4. AMOUNT OF TAX - Multiply line 3 by the applicable tax rate (see instruction 10(b))	4.	
5. Tax Credits (from Schedule A-3) (see instruction 17)	5.	
6. TAX LIABILITY - Line 4 minus line 5 or enter the minimum tax from Schedule A-GR or instruction 10(d)	6.	
7. Installment Payment - (only applies if line 6 is $375 or less - see instruction 42)	7.	
8. Professional Corporation Fees (Schedule PC, line 5)	8.	
9. TOTAL TAX AND PROFESSIONAL CORPORATION FEES (sum of lines 6, 7 and 8)	9.	
10. Payments and Credits (see instruction 43)	10.	
a) Payments made by Partnerships on behalf of taxpayer (attach copies of all NJK-1's)	10a.	
b) Refundable Tax Credits (see instruction 43(f))	10b.	
11. Balance of Tax Due - line 9 minus line 10, 10a and 10b	11.	
12. Pro Rata Share of S Corp Income for nonconsenting shareholders (from Sch K, Part VII, line 6, Column C or Schedule K Liquidated, Part VII, line 6 Columns C plus E)	12.	
13. Gross Income Tax paid on behalf of nonconsenting shareholders - refer to instruction 10(c)	13.	
14. Penalty and Interest Due - (see instructions 7(f) and 44)	14.	
15. Total Balance Due - line 11 plus line 13 plus line 14	15.	

16. If line 10 plus 10a plus 10b is greater than line 9 plus line 13, plus line 14, enter the amount of overpayment

17. Amount of Item 16 to be | Credited to 2016 return | Refunded

DIVISION USE

SIGNATURE AND VERIFICATION (See Instruction 12)

I declare under the penalties provided by law, that this return (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete return. If the return is prepared by a person other than the taxpayer, his declaration is based on all the information relating to the matters required to be reported in the return of which he has knowledge.

(Date) (Signature of Duly Authorized Officer of Taxpayer) (Title)

(Date) (Signature of Individual Preparing Return) (Address) (Preparer's ID Number)

(Name of Tax Preparer's Employer) (Address) (Employer's ID Number)

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NAME AS SHOWN ON RETURN	FEDERAL ID NUMBER

ALL TAXPAYERS MUST COMPLETE THIS SCHEDULE

SCHEDULE A COMPUTATION OF ENTIRE NET INCOME (See Instruction 14)

1.	Gross receipts or sales _____ Less returns and allowances _____		1.	
2.	Cost of goods sold (Schedule A-2, line 8)		2.	
3.	Gross profit - Subtract line 2 from line 1		3.	
4.	Net gain (loss) from Form 4797 (attach Form 4797) (see instruction 14(b))		4.	
5.	Other income (loss) (attach schedule)		5.	
6.	Total Income (loss). Combine lines 3 through 5		6.	
7.	Compensation of officers		7.	
8.	Salaries and wages _____ Less jobs credit _____		8.	
9.	Repairs		9.	
10.	Bad debts		10.	
11.	Rents		11.	
12.	Taxes		12.	
13.	Interest		13.	
14a	Depreciation	14a.		
14b	Depreciation claimed on Schedule A-2 and elsewhere on return	14b.		
14c	Subtract line 14b from line 14a		14c.	
15.	Depletion (do not deduct oil and gas depletion)		15.	
16.	Advertising		16.	
17.	Pension, profit-sharing, etc., plans		17.	
18.	Employee benefit programs		18.	
19.	Other deductions (attach schedule)		19.	
20.	Total deductions (add lines 7 through 19)		20.	
21.	Ordinary income (loss) from trade or business activities. Subtract line 20 from line 6 (see instruction 14(a)(1))		21.	
22.	a. Gross income from all rental activities	22a.		
	b. Expenses related to the above rental activities (attach schedule)	22b.		
	c. Net income (loss) from all rental activities. Subtract line 22b from 22a		22c.	
23.	Portfolio income (loss):			
	a. Interest income		23a.	
	b. Dividend income		23b.	
	c. Royalty income		23c.	
	d. Capital gain net income (attach Schedule D (Form 1120S))		23d.	
	e. Other portfolio income (loss) (attach schedule)		23e.	
24.	Net gain (loss) under section 1231 (attach Federal Form 4797)		24.	
25.	Other income (loss) (attach schedule)		25.	
26.	Section 179 expense deduction (attach Federal Form 4562) (see instruction 14(c))		26.	
27.	Deductions related to portfolio income (loss)		27.	
28.	Other deductions (attach schedule)		28.	
29.	Combine lines 21 through 28		29.	
30.	Charitable contributions (limited to 10% of line 29)		30.	
31.	Taxable income before net operating loss and special deductions. Subtract line 30 from line 29. (see instruction 14(a)(2), (3) and (4))		31.	

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SCHEDULE A COMPUTATION OF ENTIRE NET INCOME (See Instruction 14)

32. Taxable income before net operating loss and special deductions from page 2, line 31	32.	
33. Interest on Federal, State, Municipal and other obligations not included above (see instruction 14(d))	33.	
34. New Jersey State and other States income taxes deducted above (see instruction 14(e))	34.	
35. Taxes paid by the corporation on behalf of the shareholder (see instruction 14(f))	35.	
36. Depreciation and other adjustments from Schedule S (see instruction 39)	36.	
37. a. Deduction for IRC Section 78 Gross-up not deducted at line 41 below	37a.	
b. Other deductions and additions . Explain on separate rider (see instruction 14(h))	37b.	
c. Related interest addback (Schedule G, Part I)	37c.	
d. Interest and intangibles expenses and costs addback (Schedule G, Part II).	37d.	
e. Domestic production activities deduction from Form 501 (see instruction 14(h))	37e.	
38. Entire net income before net operating loss deduction and dividend exclusion. Total of lines 32 through 37(e)	38.	
39. Net operating loss deduction from Form 500 (see instructions 14(i) and 15)	39.	
40. Entire Net Income before dividend exclusion (line 38 minus line 39)	40.	
41. Dividend exclusion from Schedule R, Line 7 (see instruction 14(j))	41.	
42. ENTIRE NET INCOME (line 40 minus line 41) (see instruction 14(k))	42.	
43. Entire Net Income that is subject to Federal corporate income taxation (see instruction 14(l), carry to page 1, line 1)	43.	

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SCHEDULE A-1 NET OPERATING LOSS DEDUCTION AND CARRYOVER

NOTE: SCHEDULE A-1 HAS BEEN REPLACED BY FORM 500. NET OPERATING LOSSES MUST BE DETAILED ON FORM 500 WHICH IS AVAILABLE SEPARATELY. TO OBTAIN THIS FORM AND RELATED INFORMATION, REFER TO THE INDEX ON PAGE 14.

SCHEDULE A-2 COST OF GOODS SOLD (See Instruction 18)

1. Inventory at beginning of year	1.	
2. Purchases	2.	
3. Cost of labor	3.	
4. Additional section 263A costs	4.	
5. Other costs (attach schedule)	5.	
6. Total - Add lines 1 through 5	6.	
7. Inventory at end of year	7.	
8. Cost of goods sold - Subtract line 7 from line 6. Enter here and on Schedule A, line 2	8.	

SCHEDULE A-3 SUMMARY OF TAX CREDITS (See Instruction 19)

1. Angel Investor Tax Credit from Form 321	1.	
2. Grow NJ Tax Credit from Form 320	2.	
3: Wind Energy Facility from Form 322	3.	
4. Urban Transit Hub Tax Credit from Form 319	4.	
5. Business Retention and Relocation Tax Credit from Form 316	5.	
6. Neighborhood Revitalization State Tax Credit from Form 311	6.	
7. Film Production Tax Credit from Form 318	7.	
8. Sheltered Workshop Tax Credit from Form 317	8.	
9. AMA Tax Credit from Form 315	9.	
10. Economic Recovery Tax Credit from Form 313	10.	
11. Effluent Equipment Tax Credit from Form 312	11.	
12. HMO Assistance Fund Tax Credit from Form 310	12.	
13. Small New Jersey-Based High-Technology Business Investment Tax Credit from Form 308	13.	
14. New Jobs Investment Tax Credit from Form 304	14.	
15. Manufacturing Equipment and Employment Investment Tax Credit from Form 305	15.	
16. Research and Development Tax Credit from Form 306	16.	
17. Recycling Equipment Tax Credit from Form 303	17.	
18. Redevelopment Authority Project Tax Credit from Form 302	18.	
19. EITHER: a) Urban Enterprise Zone Employee Tax Credit from Form 300 OR b) Urban Enterprise Zone Investment Tax Credit from Form 301	19.	
20. Other Tax Credits (see instruction 41(t))	20.	
21. Total tax credits taken on this return - Add lines 1 through 20. Enter here and on page 1, line 5	21.	

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ALL CORPORATIONS MUST COMPLETE THIS SCHEDULE

AND SUBMIT IT WITH THEIR CBT-100S TAX RETURN

NAME AS SHOWN ON RETURN	FEDERAL ID NUMBER

SCHEDULE A-4 Periods Beginning On and After January 1, 2014 SUMMARY SCHEDULE (See Instruction 18)

Net Operating Loss Deduction and Carryover 1. Form 500, line 6 minus line 8	1.		6. Schedule J, Part II, line 1(h)	6.	
Interest and Intangible Costs and Expenses 2. Schedule G, Part I, line b	2.		**Net Operational Income Information** 7. Schedule O, Part III, line 31	7.	
3. Schedule G, Part II, line b	3.		**Dividend Exclusion Information** 8. Schedule R, line 4	8.	
Schedule J Information 4. Schedule J, Part II, line 1(f)	4.		9. Schedule R, line 6	9.	
5. Schedule J, Part II, line 1(g)	5.		**Schedule A-GR Information** 10. Schedule A-GR, line 6	10.	

SCHEDULE A-GR COMPUTATION OF NEW JERSEY GROSS RECEIPTS AND MINIMUM TAX (See Instruction 19)

1. Enter sales of tangible personal property shipped to points within New Jersey	1.	
2. Enter services performed in New Jersey	2.	
3. Enter rentals of property situated in New Jersey	3.	
4. Enter royalties for the use in New Jersey of patents and copyrights	4.	
5. Enter all other business receipts earned in New Jersey	5.	
6. Total New Jersey Gross Receipts	6.	
7. Enter minimum tax per instruction 10(d). Carry to page 1, line 6	7.	

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SCHEDULE B **BALANCE SHEET AS OF** _____, 20_____ **(See Instruction 20)**

Figures appearing below must be the same as year-end figures shown on the taxpayer's books. If not, explain and reconcile on rider.

Assets	Beginning of Tax Year	End of Tax Year
1. Cash		
2. Trade notes and accounts receivable (net)		
3. Loans to stockholders/affiliates		
4. Stock of subsidiaries		
5. Corporate stocks		
6. Bonds, mortgages and notes		
7. New Jersey State and local government obligations		
8. All other government obligations		
9. Patents and copyrights		
10. Deferred charges		
11. Goodwill		
12. All other intangible personal property (itemize)		
13. *Total intangible personal property* (total lines 1 to 12)		
14. Land		
15. Buildings and other improvements		
16. Machinery and equipment (net)		
17. Inventories		
18. All other tangible personalty (net) (itemize on rider)		
19. *Total real and tangible personal property* (total lines 14 to 18)		
20. Total assets (add lines 13 and 19)		
Liabilities and Stockholder's Equity		
21. Accounts payable		
22. Mortgages, notes, bonds payable in less than 1 year (attach schedule)		
23. Other current liabilities (attach schedule)		
24. Loans from stockholders/affiliates		
25. Mortgages, notes, bonds payable in 1 year or more (attach schedule)		
26. Other liabilities (attach schedule)		
27. Capital stock		
28. Paid-in or capital surplus		
29. Retained earnings - appropriated (attach schedule)		
30. Retained earnings - unappropriated		
31. Adjustments to shareholders' equity (attach schedule)		
32. Less cost of treasury stock		
33. Total liabilities and stockholder's equity (total lines 21 to 32)		

SCHEDULE C **RECONCILIATION OF INCOME PER BOOKS WITH INCOME PER RETURN (See Instruction 21)**

1. Net income per books		7. Income recorded on books this year not included in this return (itemize) (a) Tax-exempt interest $_____ (b) _____ (c) _____	
2. Federal income tax			
3. Excess of capital losses over capital gains			
4. Income subject to tax not recorded on books this year (itemize) _____ _____		8. Deductions in this tax return not charged against book income this year (itemize) (a) Depreciation $ _____ (b) Contributions Carryover $_____ _____	
5. Expenses recorded on books this year not deducted in this return (itemize) (a) Depreciation $_____ (b) Contributions Carryover $_____ (c) Other (itemize) $_____		9. Total of lines 7 and 8	
6. Total of lines 1 through 5		10. Income (Item 31, Sch. A) - line 6 less 9	

NAME AS SHOWN ON RETURN	FEDERAL ID NUMBER

SCHEDULE E GENERAL INFORMATION (See Instruction 22)

ALL TAXPAYERS MUST ANSWER THE FOLLOWING QUESTIONS. RIDERS MUST BE PROVIDED WHERE NECESSARY.

1. Type of business _____

_____

Principal products handled _____

_____

Internal Revenue Center where corresponding Federal tax return was filed _____

2. FINAL DETERMINATION OF NET INCOME BY FEDERAL GOVERNMENT (See Instruction 13)

Has a change or correction in the amount of taxable income of the reporting corporation or for any other corporation purchased, merged or consolidated with the reporting corporation, been finally determined by the Internal Revenue Service, and not previously reported to New Jersey?

Yes or No _____. **If Yes, an amended return must be filed.**

3. Is this corporation a Professional Corporation (PC) formed pursuant to NJSA 14A:17-1 et.seq. or any similar law from a possession or territory of the United States, a state, or political subdivision thereof? "Yes or No" _____. If yes, go to the next question.

How many licensed professionals are owners, shareholders, and/or employees from this PC as of the first day of the privilege period? _____. Attach a rider providing the names, addresses, and FID or SS numbers of the licensed professionals in the PC. If the number of licensed professionals is greater than 2, complete Schedule PC-Per Capita Licensed Professional Fee. See instruction 35 for examples of licensed professionals.

4. This question must be answered by corporations with income from sources outside the United States.

(a) Is income from sources outside the United States included in entire net income at Item 42 of Schedule A? Yes or No _____.

(b) If the answer is no, set forth such items of gross income, the source, the deductions and the amount of foreign taxes deemed paid (Section 78 Gross-up) thereon. Enter at Item 37(b), Schedule A the difference between the net of such income and the amount of foreign taxes paid thereon not previously deducted.

5. During the period covered by the return, did the taxpayer acquire or dispose of directly or indirectly a controlling interest in certain commercial properties? Yes or No _____.

SCHEDULE F CORPORATE OFFICERS - GENERAL INFORMATION AND COMPENSATION (See Instruction 23)

(1) Name and Current Address of Officer	(2) Social Security Number	(3) Title	(4) Dates Employed in this position		(5) Percent of Corporation Stock Owned	(6) Amount of Compensation
			From	To		

(a) Total compensation of officers	
(b) Less: Compensation of officers claimed elsewhere on the return	
(c) Balance of compensation of officers (enter here and on Schedule A, line 7, page 2)	

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SCHEDULE G - PART I INTEREST (See Instruction 24)

1. Was interest paid, accrued or incurred to a related member(s), deducted from entire net income? "Yes" or "No" _____. If "Yes", fill out the following schedule.

Name of Related Member	Federal ID Number	Relationship to Taxpayer	Amount Deducted

(a) Total amount of interest deducted	
(b) Less: Exceptions (see instruction 24)	( )
(c) Balance of interest deducted (carry to Schedule A, line 37(c))	

SCHEDULE G - PART II INTEREST EXPENSES AND COSTS AND INTANGIBLE EXPENSES AND COSTS (See Instruction 24)

1. Were intangible expenses and costs including intangible interest expenses and costs, paid, accrued or incurred to related members, deducted from entire net income? "Yes" or "No" _____. If "Yes", fill out the following schedule.

Name of Related Member	Federal ID Number	Relationship to Taxpayer	Type of Intangible Expense Deducted	Amount Deducted

(a) Total amount of intangible expenses and costs deducted	
(b) Less: Exceptions (see instruction 24)	( )
(c) Balance of intangible expenses and costs deducted (carry to Schedule A, line 37(d))	

SCHEDULE H TAXES (See Instructions 14 (e) and 25) Include all taxes paid or accrued during the accounting period wherever deducted on Schedule A.

	(A) Corporation Franchise/Business Taxes*	(B) Corporation Business/Occupancy Taxes*	(C) Property Taxes	(D) U.C.C. or Payroll Taxes	(E) Other Taxes (attach schedule)	(F) Total
1. New Jersey Taxes						
2. Other States & U.S. Possessions						
3. City and Local Taxes						
4. Taxes Paid to Foreign Countries						
5. Total						
6. Combine lines 5(a) and 5(b)						
7. Sales & Use Taxes Paid by a Utility Vendor						
8. Add lines 6 and 7 - Carry to Schedule A, line 34.						
9. Federal Taxes						
10. Total (Combine lines 5 and 9)						

*Include on line 4 taxes paid or accrued to any foreign country, state, province, territory, or subdivision thereof.

NAME AS SHOWN ON RETURN	FEDERAL ID NUMBER

SCHEDULE J	FOR PERIODS BEGINNING ON OR AFTER JANUARY 1, 2014
Parts I and II	**ALL TAXPAYERS, REGARDLESS OF THE AMOUNT OF ENTIRE NET INCOME REPORTED ON SCHEDULE A, LINE 42, OF THE CBT-100S, SHOULD COMPLETE SCHEDULE J. THIS SCHEDULE SHOULD BE OMITTED IF THE TAXPAYER DOES NOT HAVE RECEIPTS OUTSIDE NEW JERSEY; THE ALLOCATION FACTOR WILL BE 100% (1.000000).**

PART I ALL COMPANIES MUST ANSWER THE FOLLOWING QUESTIONS (See Instruction 27)

(a) Explain in detail internal controls used in distribution of receipts in and out of New Jersey, as shown in Part II _____

_____

(b) State the location of the actual seat of management or control of the corporation _____

PART II COMPUTATION OF ALLOCATION FACTOR (See Instruction 28A)

1. RECEIPTS	AMOUNT (omit cents)
(a) From sales of tangible personal property shipped to points within New Jersey.	
(b) From services performed in New Jersey.	
(c) From rentals of property situated in New Jersey.	
(d) From royalties for the use in New Jersey of patents and copyrights.	
(e) All other business receipts earned in New Jersey. (See instruction 29(c)).	
(f) Total New Jersey.receipts (Total of lines 1(a) to 1(e), inclusive).	
(g) Total receipts from all sales, services, rentals, royalties and other business transactions everywhere.	
(h) Allocation Factor (Percentage in New Jersey (line 1(f)) divided by line 1(g)). Enter result in Line 1(h) and carry to line 2, page 1, of the CBT-100S.	.

Complete by carrying the fraction to six (6) decimal places. Do not express as a percent. Example:

$\frac{123,456}{1,000,000}$ = .123456

SCHEDULE K SHAREHOLDERS' SHARES OF INCOME, DEDUCTIONS, ETC. (See Instruction 29)

PART I

1. Total number of shareholders . . . . . _____
2. Total number of nonresident shareholders . . . . . _____
3. a. Total number of nonconsenting shareholders . . . . . _____
   b. Percentage of stock owned . . . . . _____%

PART II NEW JERSEY S CORPORATION INCOME(LOSS)

1. Amount from Schedule A, line 21	1.	
2. Add the following amounts from Federal 1120S, Schedule K		
a. Net income (loss) from rental real estate activities . . . . . a _____		
b. Net income (loss) from other rental activities . . . . . b _____		
c. Interest income . . . . . c _____		
d. Dividend income . . . . . d _____		
e. Royalty income . . . . . e _____		
f. Net short-term capital gain (loss) . . . . . f _____		
g. Net long-term capital gain (loss) . . . . . g _____		
h. Other portfolio income (loss) . . . . . h _____		
i. Net gain (loss) under sections 1231 and/or 179 . . . . . i _____		
j. Other income . . . . . j _____		
k. Tax-exempt interest income . . . . . k _____		
l. Other tax-exempt income . . . . . l _____		
Total of 2(a) through 2(l)	2.	
3. Add line 1 plus line 2	3.	
4. Additions:		
a. Interest income on state and municipal bonds other than New Jersey . . . . . a _____		
b. New Jersey State and other states' income taxes deducted in arriving at line 3 including taxes paid on behalf of the shareholder . . . . . b _____		
c. All expenses included in line 3 to generate tax exempt income . c _____		
d. Losses included in line 3 from U.S. Treasury and other obligations pursuant to N.J.S.A. 54A:6-14 and 6-14.1 . . . . . d _____		
e. Other additions . . . . . e _____		
Total of 4(a) through 4(e)	4.	
5. Add line 3 plus line 4	5.	
6. Subtractions:		
a. U.S. Treasury and other interest income included in line 3 from investments exempt under N.J.S.A. 54A:6-14 and 6-14.1 . . . . . a _____		
b. Gains included in line 3 from U.S. Treasury and other obligations pursuant to N.J.S.A. 54A:6-14 and 6-14.1 . . . . . b _____		
c. IRC Section 179 expense from Federal Schedule K . . . . . c _____		
d. Federal 50% meals and entertainment limitation . . . . . d _____		
e. Charitable contributions from Federal Schedule K . . . . . e _____		
f. IRC Section 199 deduction from Form 501-GIT . . . . . f _____		
g. Other subtractions . . . . . g _____		
Total of 6(a) through 6(g)	6.	
7. New Jersey depreciation adjustment from Gross Income Tax Depreciation Adjustment Worksheet GIT-DEP	7.	
8. New Jersey S Corporation Income (Loss) - Line 5 minus line 6 plus or minus line 7	8.	

PART III ALLOCATION OF S CORPORATION INCOME(LOSS)

1. New Jersey S Corporation Income (Loss) (Part II, line 8)	1.	
a. Current period nonoperational activity (Schedule O, Part I, line 34)	1a	
2. Total operational income (loss) (line 1 minus line 1a)	2.	
3. Allocation factor (Schedule J, Part II, line 1h)	3.	
4. Allocated operational income (loss) (line 3 x line 2)	4.	
5. Allocated nonoperational income (loss) (Schedule O, Part III, line 31)	5.	
6. Total allocated income (loss) (line 4 plus line 5)	6.	
7. New Jersey CBT reported on CBT-100S (Page 1, line 4 minus line 5)	7.	
8. New Jersey allocated income (loss) (line 6 minus line 7)	8.	
9. Income (loss) not allocated to New Jersey (line 1 minus line 6)	9.	

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PART IV - A ANALYSIS OF NEW JERSEY ACCUMULATED ADJUSTMENTS ACCOUNT

	(A) New Jersey AAA	(B) Non New Jersey AAA	(C) Total of Columns (A) & (B)
1. Beginning balance			
2. Net pro rata share of S corporation income			
3. Other income/loss			
4. Other reductions (attach schedule)			
5. Total lines 1-4			
6. Distributions			
7. Ending balance (line 5 minus line 6)			

PART IV - B NEW JERSEY EARNINGS AND PROFITS

1. Beginning balance	1.	
2. Additions/Adjustments	2.	
3. Dividends paid	3.	
4. Ending balance (line 1 plus line 2 minus line 3)	4.	

PART V SUMMARY OF RESIDENT SHAREHOLDERS' PRO RATA SHARES

(A) Name	(B) Social Security Number	(C) Pro Rata Share Income/loss	(D) Distributions
1.			
2.			
3.			
4.			
5.			
6. Total			

PART VI SUMMARY OF CONSENTING NON-RESIDENT SHAREHOLDERS' PRO RATA SHARES

(A) Name	(B) Social Security Number	Pro Rata Share Income/Loss		(E) Distributions
		(C) Allocated to NJ	(D) Not Allocated to NJ	
1.				
2.				
3.				
4.				
5.				
6. Total				

PART VII SUMMARY OF NONCONSENTING SHAREHOLDERS' PRO RATA SHARES

(A) Name	(B) Social Security Number	Pro Rata Share Income/Loss		(E) Distributions	(F) Gross Income Tax Paid
		(C) Allocated to NJ	(D) Not Allocated to NJ		
1.					
2.					
3.					
4.					
5.					
6. Total					

SCHEDULE K LIQUIDATED - S CORPORATIONS SHAREHOLDERS' SHARES OF INCOME, DEDUCTIONS, ETC. **(See Instruction 30)**

PART I

1. Total number of shareholders . . . . . _____
2. Total number of nonresident shareholders . . . . . _____
3. a. Total number of nonconsenting shareholders . . . . . _____
   b. Percentage of stock owned . . . . . _____%
4. Enter date the assets were fully disposed . . . . . _____/_____/_____
5. Enter date the shareholders' stock was fully disposed . . _____/_____/_____

PART II NJ S CORPORATION INCOME(LOSS) WORKSHEET UPON COMPLETE LIQUIDATION		**Column A** S Corp Income Prior to Disposition of Assets	**Column B** Income, Gains/Losses from Disposition of Assets in Complete Liquidation
1. Amount from Schedule A, line 21	1.		
2. Add the following amounts from Federal 1120S, Schedule K			
a. Net income (loss) from rental real estate activities	2a.		
b. Net income (loss) from other rental activities	2b.		
c. Interest income	2c.		
d. Dividend income	2d.		
e. Royalty income	2e.		
f. Net short-term capital gain (loss)	2f.		
g. Net long-term capital gain (loss)	2g.		
h. Other portfolio income (loss)	2h.		
i. Net gain (loss) under sections 1231 and/or 179	2i.		
j. Other income	2j.		
k. Tax-exempt interest income	2k.		
l. Other tax-exempt income	2l.		
3. Add line 1 plus lines 2(a) through 2(l)	3.		
4. Additions:			
a. Interest income on state and municipal bonds other than NJ	4a.		
b. NJ State and other states' income taxes deducted in arriving at line 3 including taxes paid on behalf of the shareholder	4b.		
c. All expenses included in line 3 to generate tax exempt income	4c.		
d. Losses included in line 3 from U.S. Treasury and other obligations pursuant to N.J.S.A. 54A:6-14 and 6-14.1	4d.		
e. Other additions	4e.		
5. Add line 3 plus lines 4(a) through 4(e)	5.		
6. Subtractions:			
a. U.S. Treasury and other interest income included in line 3 from investments exempt under N.J.S.A. 54A:6-14 and 6-14.1	6a.		
b. Gains included in line 3 from U.S. Treasury and other obligations pursuant to N.J.S.A. 54A:6-14 and 6-14.1	6b.		
c. IRC Section 179 expense from Federal Schedule K	6c.		
d. Federal 50% meals and entertainment limitation	6d.		
e. Charitable contributions from Federal Schedule K	6e.		
f. New Jersey allowable IRC Section 199 deduction	6f.		
g. Other subtractions	6g.		
Total of 6(a) through 6(g)	6.		
7. New Jersey depreciation adjustment from Gross Income Tax Depreciation Adjustment Worksheet GIT-DEP	7.		
8. Total Income (Loss) - add line 5 minus line 6 plus or minus line 7	8.		

PART III ALLOCATION OF INCOME (LOSS)			
1. Income from Line 8, Part II Column A and Column B	1.		
a. Current period nonoperational activity (Schedule O, Part I, line 34)	1a.		
2. Total operational income (loss) (line 1 minus line 1a)	2.		
3. Allocation factor (Schedule J, Part II, line 1h)	3.		
4. Allocated operational income (loss) (line 3 x line 2)	4.		
5. Allocated nonoperational income (loss) (Schedule O, Part III, line 31)	5.		
6. Total allocated income (loss) (line 4 plus line 5)	6.		
7. New Jersey CBT reported on CBT-100S (Page 1, line 4 minus line 5)	7.		
8. New Jersey allocated income (loss) (line 6 minus line 7)	8.		
9. Income (loss) not allocated to New Jersey (line 1 minus line 6)	9.		

NAME AS SHOWN ON RETURN	FEDERAL ID NUMBER

SCHEDULE K LIQUIDATED - S CORPORATIONS SHAREHOLDERS' SHARES OF INCOME, DEDUCTIONS, ETC. **(See Instruction 30)**

PART IV - A ANALYSIS OF NEW JERSEY ACCUMULATED ADJUSTMENTS ACCOUNT

	(A) New Jersey AAA	(B) Non New Jersey AAA	(C) Total of Columns (A) & (B)
1. Beginning balance			
2. Net pro rata share of S corporation income			
3. Other income/loss			
4. Other reductions (attach schedule)			
5. Total lines 1-4			
6. Distributions			
7. Ending balance (line 5 minus line 6)			

PART IV - B NEW JERSEY EARNINGS AND PROFITS

1. Beginning balance	1.	
2. Additions/Adjustments	2.	
3. Dividends paid	3.	
4. Ending balance (line 1 plus line 2 minus line 3)	4.	

SCHEDULE K LIQUIDATED - S CORPORATIONS SHAREHOLDERS' SHARES OF INCOME, DEDUCTIONS, ETC. (See Instruction 30)

PART V SUMMARY OF RESIDENT SHAREHOLDERS' PRO RATA SHARES

(A) Name	(B) Social Security Number	(C) Pro Rata Share Income/Loss	(D) Gain/Loss on Disposition of Assets	(E) Distributions
1.				
2.				
3.				
4.				
5.				
6. Total				

PART VI SUMMARY OF CONSENTING NON-RESIDENT SHAREHOLDERS' PRO RATA SHARES

(A) Name	(B) Social Security Number	Pro Rata Share Income/Loss		Gain/Loss on Disposition of Assets		(G) Distributions
		(C) Allocated to NJ	(D) Not Allocated to NJ	(E) Allocated to NJ	(F) Not Allocated to NJ	
1.						
2.						
3.						
4.						
5.						
6. Total						

PART VII SUMMARY OF NONCONSENTING SHAREHOLDERS' PRO RATA SHARES

(A) Name	(B) Social Security Number	Pro Rata Share Income/Loss		Gain/Loss on Disposition of Assets		(G) Distributions	(H) Gross Income Tax Paid
		(C) Allocated to NJ	(D) Not Allocated to NJ	(E) Allocated to NJ	(F) Not Allocated to NJ		
1.							
2.							
3.							
4.							
5.							
6. Total							

NAME AS SHOWN ON RETURN	FEDERAL ID NUMBER

SCHEDULE P SUBSIDIARY INVESTMENT ANALYSIS (See Instruction 33)

NOTE: Taxpayers must hold at least 80% of the combined voting power of all classes of stock entitled to vote and at least 80% of the total number of shares of all other classes of stock, except non-voting stock which is limited and preferred as to dividends, for each subsidiary. Do not include advances to subsidiaries in book value.

(1) Name of Subsidiary	(2) Percentage of Interest		(3) Book Value (as reported in Schedule B)	(4) Dividend Income (as reported in Schedule A)
	Voting	Non-Voting		
Totals				

SCHEDULE P-1 PARTNERSHIP INVESTMENT ANALYSIS (See Instruction 34)

(1) Name of Partnership LLC, or Other Entity and Federal ID Number	(2) Date and State where Organized	(3) Percentage of Ownership	(4)		(5) Tax Accounting Method		(6) New Jersey Nexus		(7) Tax Payments Made on Behalf of Taxpayer by Partnerships
			Limited Partner	General Partner	Flow Through	Separate Accounting	Yes	No	
			☐	☐			☐	☐	
			☐	☐			☐	☐	
			☐	☐			☐	☐	
			☐	☐			☐	☐	
Total Column 7									

SCHEDULE PC PER CAPITA LICENSED PROFESSIONAL FEE (See Instruction 35)

1a. Enter number of resident and non-resident professionals with physical nexus with New Jersey _____ x $150	1a.	
1b. Enter number of non-resident professionals without physical nexus with New Jersey _____ x $150 x allocation factor of the PC	1b.	
1c. Total Fee Due - Add line 1(a) and line 1(b)	1c.	
2. Installment Payment - 50% of line 1(c)	2.	
3. Total Fee Due (line 1(c) plus line 2)	3.	
4. Less prior year 50% installment payment and credit (if applicable)	4.	( )
5. Balance of Fee Due (line 3 minus line 4). If the result is zero or above, enter this amount on page 1, line 8	5.	
6. Credit to next year's Professional Corporation Fee (if line 5 is below zero, enter the amount here)	6.	

SCHEDULE Q QUALIFIED SUBCHAPTER S SUBSIDIARIES (QSSS) (See Instruction 36)

1. Is this corporation a Qualified Subchapter S Subsidiary? . . . . . .Yes ☐ No ☐
   If yes, indicate the parent corporation's name, address, and FID # below. See instruction 36 for filing requirements.

2. Does this corporation own any Qualified Subchapter S Subsidiaries? . . . . . .Yes ☐ No ☐
   If yes, list all the QSSS's names, addresses, and FID#'s below. Attach additional rider if necessary. Separately note those subsidiaries that have made a New Jersey QSSS election and whose activities are included in this return.

SCHEDULE R DIVIDEND EXCLUSION (See Instruction 37)

1. Dividend income included in Schedule A	1.	
2. Less: Dividend Income - Schedule P, Column (4)	2.	( )
3. Balance (line 1 less line 2)	3.	
4. Less: Dividend income from investments where taxpayer owns less than 50% of voting stock and less than 50% of all other classes of stock	4.	( )
5. Balance (line 3 less line 4)	5.	
6. 50% of line 5	6.	
7. DIVIDEND EXCLUSION: Line 2 plus line 6 (Carry to Schedule A, line 41)	7.	

NAME AS SHOWN ON RETURN	FEDERAL ID NUMBER

SCHEDULE S - PART I DEPRECIATION AND SAFE HARBOR LEASING (See Instruction 38)

1. Section 179 Deduction	1.	
2. Special Depreciation Allowance - for certain property acquired after September 10, 2001	2.	
3. a) MACRS - for assets placed in service during **accounting periods** beginning on and after July 7, 1993	3a.	
b) MACRS - included in line 3(a) for assets on which bonus depreciation and excess section 179 depreciation taken	3b.	
4. MACRS - for assets placed in service during **accounting periods** beginning prior to July 7, 1993	4.	
5. ACRS	5.	
6. Other Depreciation - for assets placed in service after December 31, 1980	6.	
7. Other Depreciation - for assets placed in service prior to January 1, 1981	7.	
8. Listed Property - for assets placed in service during accounting periods beginning on and after July 7, 1993	8.	
9. Listed Property - for assets placed in service during accounting periods beginning prior to July 7, 1993	9.	
10. Total depreciation claimed in arriving at line 28, Schedule A	10.	

Attach Federal Form 4562 to Return and Include Federal Depreciation Worksheet

Adjustments at Line 36, Schedule A - Depreciation and Certain Safe Harbor Lease Transactions

11. **Additions**

a) Amounts from lines 4, 5, 6 and 9 above . . . . . a. _____

b) Special Depreciation Allowance - for assets placed in service during accounting periods beginning on and after January 1, 2002, and for which federal 30% or 50% bonus depreciation was taken in the current tax year. Include the initial 30% or 50% bonus amount and the regular depreciation on the adjusted basis. . . . . b. _____

c) Distributive share of ACRS and MACRS from a partnership . . . . . c. _____

d) Deductions on Federal return resulting from an election made pursuant to IRC Section 168(f)8 exclusive of elections made with respect to mass commuting vehicles.

Interest . . . . . _____

Rent . . . . . _____

Amortization of Transactional Costs . . . . . _____

Other Deductions . . . . . _____ d. _____

e) Section 179 depreciation in excess of New Jersey allowable deduction. Fiscal year filers refer to instruction 39 . . . . . e. _____

Total line 11 (lines a, b, c, d and e) . . . . . 11. _____

12. **Deductions**

a) New Jersey depreciation - (From Schedule S, Part II(A)) . . . . . a. _____

b) New Jersey depreciation - (From Schedule S, Part II(B)) . . . . . b. _____

c) Recomputed depreciation attributable to distributive share of recovery property from a partnership . . . . . c. _____

d) Any income included in the return with respect to property described at line 11(d) solely as a result of that election . . . . . d. _____

e) The lessee/user should enter the amount of depreciation which would have been allowable under the Internal Revenue Code at December 31, 1980 had there been no safe harbor lease election . . . . . e. _____

f) Excess of accumulated ACRS, MACRS, or bonus depreciation over accumulated NJ depreciation on physical disposal of recovery property (attach computations) . f . _____

Total line 12 (lines a, b, c, d, e and f) . . . . . 12. _____

13. **ADJUSTMENT** - (line 11 minus line 12) Enter at line 36, Schedule A . . . . . 13. _____

NAME AS SHOWN ON RETURN	FEDERAL ID NUMBER

SCHEDULE S - PART II(A) N.J. Depreciation on Recovery Property Placed in Service On or After January 1, 1981 and Prior to Taxpayers Fiscal or Calendar Accounting Periods Beginning On and After July 7, 1993.

(A) Description of Property	(B) Month, Day and Year placed in service*	(C) Use Federal basis	(D) Depreciation allowable in earlier years	(E) Method of figuring depreciation	(F) Life or rate	(G) N.J. depreciation computations
* Year placed in service acceptable for personal property only. DO NOT USE "VARIOUS" IN ANY COLUMN. Class Life Asset Depreciation Range (CLADR) System Depreciation - Attach Computations						
Total Column G						

INSTRUCTIONS

Column A - Do not classify as 3, 5, 10 or 15 year property. Classify consistent with Internal Revenue Code at December 31, 1980. Account for distributive share of partnership property and deductions separately. Do not include certain safe harbor lease property.

Column B - Clearly segregate property placed in service during each year. Depreciation on personal property is to be computed using the half-year convention such that one half year depreciation is to be claimed to the exclusion of any other depreciation convention allowable under the Internal Revenue Code at December 31, 1980 for property placed in service during the current year.

Column C - Basis is to be determined at the date property is placed in service and not as provided under the Internal Revenue Code at December 31, 1980. It is not to be restated where ACRS was accepted for certain property placed in service during 1981.

Column D - Depreciation allowable under the method adopted and consistently applied for property described. Do not adjust for the effect of any ACRS deducted on the New Jersey Corporation Business Tax Return for property placed in service during 1981.

Column E - Any method allowable under the Internal Revenue Code at December 31, 1980.

Column F - Any life or rate permissible under the Internal Revenue Code at December 31, 1980. (LIVES PERMISSIBLE UNDER THE IRS CODE AT DECEMBER 31, 1980 FREQUENTLY DIFFER FROM ACRS AND MACRS LIVES)

Column G - Consider any salvage value which was required to be considered under Internal Revenue Code at December 31, 1980. Do not claim depreciation in the year of disposal. Accumulated depreciation may not exceed accumulated ACRS and MACRS deductions over the life of the property and deductions for the final year or years are limited where ACRS was deducted on the New Jersey return for property placed in service during 1981.

NAME AS SHOWN ON RETURN	FEDERAL ID NUMBER

SCHEDULE S - PART II(B) **Special Depreciation Allowance - for assets placed in service during accounting periods beginning on and after January 1, 2002, and for which federal 30% or 50% bonus depreciation or excess section 179 depreciation was taken.**

(A) Description of Property	(B) Month, Day and Year placed in service*	(C) Use Federal basis	(D) Special Depreciation Allowance	(E) Depreciation allowable in earlier years	(F) Method of figuring depreciation	(G) Life or rate	(H) N.J. Depreciation Computations
Total Column H							

*Year placed in service acceptable for personal property only.

INSTRUCTIONS

Column A - Classify consistent with Internal Revenue Code.

Column B - Clearly segregate property placed in service during each year.

Column C - Basis is to be determined at the date property is placed in service and not as provided after taking the 30% or 50% first-year depreciation allowance.

Column D - State the amount of the 30% or 50% special depreciation allowance taken for the first year the property was placed in service.

Column E: Depreciation allowable under the method adopted and consistently applied for property described. Do not adjust for the effect of the 30% or 50% first-year bonus depreciation allowance.

Column F - Use the same method that was used for Federal purposes.

Column G - Use the same life that was used for Federal purposes.

Column H - Figure the depreciation amount as if the 30% or 50% special depreciation allowance was not in effect.

NAME AS SHOWN ON RETURN	FEDERAL ID NUMBER

SCHEDULE S - PART III NEW JERSEY DEPRECIATION FOR GAS, ELECTRIC, AND GAS AND ELECTRIC PUBLIC UTILITIES (See Instruction 38)

1. Total depreciation claimed in arriving at Schedule A, line 21 . . . . . 1._____
2. Federal depreciation for assets placed in service after January 1, 1998 . . . . . 2._____
3. Net (subtract line 2 from line 1) . . . . . 3._____
4. New Jersey depreciation allowable on the Single Asset Account. (Assets placed in service prior to January 1, 1998)
   a) Total adjusted Federal depreciable basis as of December 31, 1997 . . . . . a._____
   b) Excess book depreciable basis over Federal tax basis as of December 31, 1997 . . . . . b._____
   c) Less accumulated Federal basis for all single Asset Account property sold, retired, or disposed of to date . . . . . c._____
   d) Total (line 4(a) plus 4(b) less line 4(c)) . . . . . d._____
5. New Jersey depreciation (divide line 4(d) by 30) . . . . . 5._____
6. New Jersey adjustment
   a) Depreciation adjustment for assets placed in service prior to January 1, 1998 (subtract line 5 from line 3) . . . . . a._____
   b) Special bonus depreciation adjustment from Schedule S, Part I, line 13 . . . . . b._____
7. Total Adjustment (add lines 6a and 6b). Enter at line 36, Schedule A . . . . . 7._____

State of New Jersey
Division of Taxation

CERTIFICATION OF INACTIVITY

For the period beginning _____ , _____ and ending _____ , _____

Corporation Name	Federal ID Number

(NOTE: Attach this schedule to the taxpayer's CBT-100 or CBT-100S, whichever is applicable)

I certify that during the period covered by the attached tax return, the above named taxpayer had no business activities, no income, no assets, and, additionally in the case of a New Jersey S corporation, made no distributions and did not have any change in ownership.

Signature of Corporate Officer | Title | Date

INSTRUCTIONS

In lieu of completing the entire CBT-100 or CBT-100S tax return, an inactive corporation may complete this schedule and one of the following: pages 1 through 4 of the CBT-100 or pages 1 through 5 of the CBT-100S, in order to fulfill its filing obligations with the State of New Jersey. Note: If using third party software, the Taxpayer Information and Return Summary page must be included. An inactive corporation is a corporation that, during the entire period covered by the tax return, did not conduct any business, did not have any income, receipts or expenses, did not own any assets, and, additionally for New Jersey S corporations, did not make any distributions and did not have any change in ownership.

This schedule and the applicable pages from the Corporation Business Tax return must be filed annually by the taxpayer. Taxpayers must report the minimum tax liability and the installment payment (if applicable) on page 1 of the Corporation Business Tax return and submit the balance due with the Form CBT-100-V or Form CBT-100S-V, the Corporation Business Tax Payment Voucher.

Schedule I and page 1 of the Corporation Business Tax return must be signed by an officer of the corporation who is authorized to attest to the truth of the statements contained therein.

SCHEDULE **NJ-K-1**
(Form CBT-100S)
(07-14)

State of New Jersey
Division of Taxation
SHAREHOLDER'S SHARE OF INCOME / LOSS

2015

For calendar year 2015 or tax year beginning _____, _____, and ending _____, _____

Shareholder's identifying number	Federal employer identification number
Shareholder's name, address, and ZIP code	Corporation's name, address, and ZIP code

See Instruction 39 and Reverse Side

PART I

1. Shareholder's percentage of stock ownership for tax year . . . . . _____%
2. Shareholder . . . . . ☐ resident ☐ non-resident
3. Shareholder . . . . . ☐ consenting ☐ nonconsenting
4. Check applicable box: . . . . . ☐ Final NJ-K-1 ☐ Amended NJ-K-1
5. Date the shareholder's stock was fully disposed . . . . . _____

PART II

1. S Income/Loss allocated to NJ . . . . . _____
2. S Income/Loss not allocated to NJ . . . . . _____
3. Pro rata share of S Corporation Income/Loss (line 1 plus line 2) . . _____
4. Gain/Loss on disposition of assets allocated to NJ . . . . . _____
5. Gain/Loss on disposition of assets not allocated to NJ . . . . . _____
6. Total Gain/Loss from disposition of assets (line 4 plus line 5) . . . . . _____
7. Total payments made on behalf of shareholder . . . . . _____
8. Distributions . . . . . _____

Shareholder: Follow the reporting instructions contained in your NJ Income Tax return packet and in Tax Topic Bulletin GIT-9S, Income From S Corporations.

This schedule must be included with your NJ Income Tax return.

PART III SHAREHOLDER'S NJ ACCUMULATED ADJUSTMENTS ACCOUNT

	New Jersey AAA	Non New Jersey AAA
1. Beginning balance		
2. Income/Loss		
3. Other Income/Loss		
4. Other reductions		
5. Total lines 1-4		
6. Distributions		
7. Ending Balance (line 5 minus line 6)		

PART IV SHAREHOLDER'S NJ EARNINGS AND PROFITS ACCOUNT

1. Beginning balance . . . . . _____
2. Additions/Adjustments . . . . . _____
3. Dividends received . . . . . _____
4. Ending balance (line 1 plus line 2 minus line 3) . . . . . _____

PART V

1. Interest paid to shareholder (per 1099-INT) . . . . . _____
2. Indebtedness:
   a. From corporation to shareholder . . . . . _____
   b. From shareholder to corporation . . . . . _____
3. Shareholder's HEZ deduction . . . . . _____

THIS FORM MAY BE REPRODUCED

INSTRUCTIONS FOR SCHEDULE NJ-K-1

FOR ADDITIONAL INFORMATION REFER TO TAX TOPIC BULLETIN GIT-9S, INCOME FROM S CORPORATIONS (TO OBTAIN A COPY, SEE THE INDEX ON PAGE 16)

PART I

Line 1 Shareholder's percentage of stock ownership as reported on Federal 1120S.

Line 2 Indicate shareholder's residency status at year's end.

Line 3 Indicate whether shareholder is a consenting or nonconsenting shareholder.

Line 4 If applicable, indicate if this schedule is a final or amended NJ-K-1.

Line 5 Enter date shareholder received final distribution (cash and/or property).

PART II

Line 1 Enter shareholder's share of New Jersey allocated S corporation income/loss from Part III, line 8 of Schedule K or from Part III, line 8, Column A of Schedule K Liquidated.

New Jersey S corporations which claim a credit for taxes paid to other jurisdictions in accordance with N.J.A.C. 18:7-8.3 will report 100% of the shareholder's net pro rata share as allocated to New Jersey.

Line 2 Enter shareholder's share of S corporation income/loss not allocated to New Jersey from Part III, line 9 of Schedule K or from Part III, line 9, Column A of Schedule K Liquidated.

Line 4 Enter shareholder's share of New Jersey allocated income, gains/losses from disposition of assets from Part III, line 8, Column B of Schedule K Liquidated.

Line 5 Enter shareholder's share of income, gains/losses from disposition of assets not allocated to New Jersey from Part III, line 9, Column B of Schedule K Liquidated.

Line 7 Enter total payments made on behalf of the shareholder as reported in Part VII, Column (F) of Schedule K or in Part VII, Column (H) of Schedule K Liquidated.

Line 8 Enter distributions shareholder received during the year as reported in Part V, VI or VII, of Schedule K or Schedule K Liquidated.

PART III

Lines 1 - 7 Enter shareholder's share of New Jersey Accumulated Adjustments (AAA) from Part IV-A, Schedule K or Schedule K Liquidated.

PART IV

Lines 1 - 4 Enter shareholder's share of New Jersey Earnings and Profits from Part IV-B, Schedule K or Schedule K Liquidated.

PART V

Line 1 Enter the amount of any interest paid to the shareholder which should be reported by the S corporation on Federal Form 1099-INT. Include any other interest paid to the shareholder that was deducted by the S corporation in arriving at income reflected in Part II, line 8 of Schedule K or Schedule K Liquidated.

Line 2

a. Enter the total amount of the corporation's indebtedness to the shareholder at year's end or prior to final distribution.

b. Enter the total amount of the shareholder's indebtedness to the corporation at year's end or prior to final distribution.

Line 3 If a New Jersey electing S corporation is a qualified primary care medical or dental practice located in or within 5 miles of a Health Enterprise Zone (HEZ), the corporation must determine if the shareholders are entitled to an HEZ deduction and the amount. The shareholder's deduction is entered on the shareholder's Schedule NJ-K-1 and deducted on the shareholder's Gross Income Tax return. Refer to the Division's website, www.state.nj.us/treasury/taxation/, for qualification and calculation information.

NOTE: A New Jersey electing S corporation doing business in New Jersey may file a NJ-1080-C composite return on behalf of its qualified nonresident shareholders who elect to be included in the composite filing. Every participating shareholder must make the election to be part of the composite return in writing each year by using Form NJ-1080-E, Election to Participate in Composite Return, or a form substantially similar.

FOR OFFICIAL USE ONLY

New Jersey Gross Income Tax

Payment on Behalf of Nonconsenting Shareholders

NJ 1040-SC (09-15)

Tax Year Beginning _____ and Ending _____

New Jersey S Corporation Information			Shareholder Information		
Federal Identification Number	NJ Corporation Number		Social Security Number _____ / _____ / _____		
Taxpayer Name			Last Name	First name	
Address			Street Address		
City	State	Zip Code	City	State	Zip Code

Amount of Payment from Schedule K, Part VII, Column (F) or Schedule K Liquidated, Part VII, Column (H) of the CBT-100S $ ___,___.__

THIS FORM MAY BE REPRODUCED

FOR OFFICIAL USE ONLY

New Jersey Gross Income Tax

Payment on Behalf of Nonconsenting Shareholders

NJ 1040-SC (09-15)

Tax Year Beginning _____ and Ending _____

New Jersey S Corporation Information			Shareholder Information		
Federal Identification Number	NJ Corporation Number		Social Security Number _____ / _____ / _____		
Taxpayer Name			Last Name	First Name	
Address			Street Address		
City	State	Zip Code	City	State	Zip Code

Amount of Payment from Schedule K, Part VII, Column (F) or Schedule K Liquidated, Part VII, Column (H) of the CBT-100S $ ___,___.__

THIS FORM MAY BE REPRODUCED

FOR OFFICIAL USE ONLY

New Jersey Gross Income Tax

Payment on Behalf of Nonconsenting Shareholders

NJ 1040-SC (09-15)

Tax Year Beginning _____ and Ending _____

New Jersey S Corporation Information			Shareholder Information		
Federal Identification Number	NJ Corporation Number		Social Security Number _____ / _____ / _____		
Taxpayer Name			Last Name	First Name	
Address			Street Address		
City	State	Zip Code	City	State	Zip Code

Amount of Payment from Schedule K, Part VII, Column (F) or Schedule K Liquidated, Part VII, Column (H) of the CBT-100S $ ___,___.__

THIS FORM MAY BE REPRODUCED

INSTRUCTIONS FOR NJ-1040-SC

For the S Corporation:

1. A separate form must be completed for each nonconsenting shareholder and submitted with the CBT-100S. Attach the completed form(s) to the front of page 1 of the CBT-100S that is filed by the corporation.
2. Payment Due Date;

   Payment should be remitted no later than the time for the filing of the CBT-100S for the accounting or privilege period of the S corporation.
3. The payment amount on the NJ-1040-SC should match the amount on the individual shareholder's NJ-K-1, Part II, line 4.
4. The remittance for the total of all NJ-1040-SC forms is to be included with any corporation business tax due as shown on page 1 of the CBT-100S form.
5. A copy of the completed form must be supplied to each shareholder on whose behalf it was filed on or before the due date of the CBT-100S.

For the Shareholder:

1. Payments made by the S corporation on behalf of the shareholder does not release the shareholder of his responsibility for making estimated payments or filing a New Jersey Gross Income Tax Return as required under the New Jersey Gross Income Tax Statutes.
2. A copy of the NJ-1040-SC form must accompany the New Jersey Gross Income Tax return you file. The payment is to be claimed on the return along with any other estimated payments you have made.
3. Be sure to keep a copy of the form for your records.

INSTRUCTIONS FOR NJ-1040-SC

For the S Corporation:

1. A separate form must be completed for each nonconsenting shareholder and submitted with the CBT-100S. Attach the completed form(s) to the front of page 1 of the CBT-100S that is filed by the corporation.
2. Payment Due Date;

   Payment should be remitted no later than the time for the filing of the CBT-100S for the accounting or privilege period of the S corporation.
3. The payment amount on the NJ-1040-SC should match the amount on the individual shareholder's NJ-K-1, Part II, line 4.
4. The remittance for the total of all NJ-1040-SC forms is to be included with any corporation business tax due as shown on page 1 of the CBT-100S form.
5. A copy of the completed form must be supplied to each shareholder on whose behalf it was filed on or before the due date of the CBT-100S.

For the Shareholder:

1. Payments made by the S corporation on behalf of the shareholder does not release the shareholder of his responsibility for making estimated payments or filing a New Jersey Gross Income Tax Return as required under the New Jersey Gross Income Tax Statutes.
2. A copy of the NJ-1040-SC form must accompany the New Jersey Gross Income Tax return you file. The payment is to be claimed on the return along with any other estimated payments you have made.
3. Be sure to keep a copy of the form for your records.

INSTRUCTIONS FOR NJ-1040-SC

For the S Corporation:

1. A separate form must be completed for each nonconsenting shareholder and submitted with the CBT-100S. Attach the completed form(s) to the front of page 1 of the CBT-100S that is filed by the corporation.
2. Payment Due Date;

   Payment should be remitted no later than the time for the filing of the CBT-100S for the accounting or privilege period of the S corporation.
3. The payment amount on the NJ-1040-SC should match the amount on the individual shareholder's NJ-K-1, Part II, line 4.
4. The remittance for the total of all NJ-1040-SC forms is to be included with any corporation business tax due as shown on page 1 of the CBT-100S form.
5. A copy of the completed form must be supplied to each shareholder on whose behalf it was filed on or before the due date of the CBT-100S.

For the Shareholder:

1. Payments made by the S corporation on behalf of the shareholder does not release the shareholder of his responsibility for making estimated payments or filing a New Jersey Gross Income Tax Return as required under the New Jersey Gross Income Tax Statutes.
2. A copy of the NJ-1040-SC form must accompany the New Jersey Gross Income Tax return you file. The payment is to be claimed on the return along with any other estimated payments you have made.
3. Be sure to keep a copy of the form for your records.

CBT-100S-V **CORPORATION BUSINESS TAX—PAYMENT VOUCHER**

2015

For the period beginning _____, 20_____ and ending _____, 20_____

Federal Employer I.D. Number | Corporation Number

Corporation Name

Mailing Address

City | State | Zip Code

Return this voucher with your payment.
Make checks payable to: State of New Jersey – CBT
Write the Federal ID number and tax year on the check.

Mail To: **Corporation Business Tax**
PO Box 644
Trenton, NJ 08646-0644

Enter amount of payment here:

$

02209