NJ-1040
1996

STATE OF NEW JERSEY
INCOME TAX-RESIDENT RETURN

For Tax Year Jan.-Dec. 31, 1996 Or Other Tax Year Beginning _____, 1996, Month Ending ____, 19 ____

5R Check block ☐ if application for Federal extension is enclosed. Check here if your address has changed ☐

For Privacy Act Notification, See Instructions

Your Social Security Number	Last Name, First Name and Initial (Joint filers enter first name and initial of each – Enter spouse last name ONLY if different)	Place label on form you file. Make all necessary changes on label.
Spouse's Social Security Number	Home Address (Number and Street, including apartment number or rural route)	
County/Municipality Code (See Table p. 33)	City, Town, Post Office — State — Zip Code	

FILING STATUS (Check only ONE box)

1. ☐ Single
2. ☐ Married, filing joint return
3. ☐ Married, filing separate return Enter Spouse's Social Security Number in the boxes provided above
4. ☐ Head of Household
5. ☐ Qualifying Widow(er)

EXEMPTIONS — ENTER NUMBERS HERE

6. Regular ☒ Yourself ☐ Spouse — 6
7. Age 65 or Over ☐ Yourself ☐ Spouse — 7
8. Blind or Disabled ☐ Yourself ☐ Spouse — 8
9. Number of your qualified dependent children ..... — 9
10. Number of other dependents ..... — 10
11. Dependents attending colleges ..... — 11
12. Totals (For Line 12a - Add Lines 6, 7, 8 and 11) (For Line 12b - Add Lines 9 and 10) ..... — 12a — 12b

RESIDENCY STATUS

13. If you were a New Jersey resident for ONLY part of the taxable year, give the period of New Jersey residency: From MM/DD/YY To MM/DD/YY

GUBERNATORIAL ELECTIONS FUND

Do you wish to designate $1 of your taxes for this fund? ☐ Yes ☐ No
If joint return, does your spouse wish to designate $1? ☐ Yes ☐ No

Note: If you check the Yes box(es) it will not increase your tax or reduce your refund.

14. Wages, salaries, tips, and other employee compensation (Enclose W-2) ... 14
15a. Taxable interest income 15a
15b. Tax exempt interest income 15b
DO NOT include on Line 15a
16. Dividends 16
17. Net profits from business (Enclose copy of Federal Schedule C, Form 1040) 17
18. Net gains or income from disposition of property (Schedule B, Line 4) 18
19. Pensions, Annuities and IRA Withdrawals
a. Taxable Amount Received ... 19a
b. Less N.J. Pension Exclusion 19b
c. Subtract Line 19b from Line 19a 19c
20. Distributive Share of Partnership Income (See instruction page 16) 20
21. Net pro rata share of S Corporation Income (See instruction page 16) 21
22. Net gain or income from rents, royalties, patents & copyrights ..... (Schedule C, Line 3) 22
23. Net Gambling Winnings 23
24. Alimony and separate maintenance payments received 24
25. Other (See instruction page 16) 25
26. Total Income (Add Lines 14, 15a, 16, 17, 18, 19c, 20, 21, 22, 23, 24, and 25) 26

27. Total Income (From Line 26, page 1) 27

28. Other Retirement Income Exclusion (See Worksheet and instr. page 17) ... 28

29. **New Jersey Gross Income** (Subtract Line 28 from Line 27) 29
If $7,500 or less see instruction page 18.

30a. Exemptions: From Line 12a _____ x $1,000 = _____

30b. From Line 12b _____ x $1,500 = _____

30c. Total Exemption Amount (Add Line 30a and Line 30b) 30c
Part Year Residents See Instruction page 4.

31. Medical Expenses (See Worksheet and instruction page 18) 31

32. Alimony and Separate Maintenance Payments 32

33. Total Exemptions and Deductions (Add Lines 30c, 31 and 32) 33

34. Taxable Income (Subtract Line 33 from Line 29) 34
If zero or less, MAKE NO ENTRY.

35. Property Tax Deduction (See instruction page 18) 35

36. **NEW JERSEY TAXABLE INCOME** (Subtract Line 35 from Line 34) 36
If zero or less, MAKE NO ENTRY.

37. TAX (From Tax Tables, page 35) 37

38. Credit For Income Taxes Paid to Other Jurisdictions (See instructions) 38

39. Balance of Tax (Subtract Line 38 from Line 37) 39

40. Use Tax Due on Out-of-State Purchases (See instruction page 21) 40
If no Use Tax, enter ZERO.

41. Total Tax (Add Line 39 and Line 40) 41

42. **Total New Jersey Income Tax Withheld** (Enclose Forms W-2 and 1099R) 42

43. Property Tax Credit (See instruction page 21) 43

44. New Jersey Estimated Tax Payments/Credit from 1995 tax return 44
Check ☐ if Form NJ-2210 is enclosed.

45. EXCESS New Jersey WD/UI/HC Withheld (See instr. page 21) (Enclose Form NJ-2450). 45

46. EXCESS New Jersey Disability Insurance Withheld (See instr. page 22) 46
(Enclose Form NJ-2450)

47. **Total Payments/Credits** (Add Lines 42 through 46) 47

48. If payments (Line 47) are LESS THAN tax (Line 41) enter AMOUNT OF TAX YOU OWE 48

If you owe tax, you may make a donation by entering an amount on Lines 52, 53, 54, 55 and/or 56 and adding this to your check amount.

49. If payments (Line 47) are MORE THAN tax (Line 41) enter OVERPAYMENT here and on line 50, page 3 49

Name(s) as shown on Form NJ-1040 | Your Social Security Number

NOTE: AN ENTRY ON LINES 51, 52, 53, 54, 55 and/or 56 WILL REDUCE YOUR TAX REFUND

50. Amount of Overpayment (From Line 49, page 2) 50

Deductions from Overpayment on Line 50 which you elect to credit to:

51. Your 1997 tax 51

52. The N.J. Endangered Wildlife Fund ..... ☐ $5 ☐ $10 ☐ Other 52

53. N.J. Children's Trust Fund To Prevent Child Abuse ..... ☐ $5 ☐ $10 ☐ Other 53

54. The N.J. Vietnam Veterans' Memorial Fund ..... ☐ $5 ☐ $10 ☐ Other 54

55. N.J. Breast Cancer Research Fund ..... ☐ $5 ☐ $10 ☐ Other 55

56. The Battleship New Jersey Memorial Fund ..... ☐ $5 ☐ $10 ☐ Other 56

ENTER AMOUNT OF CONTRIBUTION

57. Total Deductions from Overpayment (Add Lines 51 through 56) 57

58. REFUND (Amount to be sent to you, Line 50 LESS Line 57) 58

Schedule 1 - Property Tax Deduction/Credit

Complete both columns of this schedule to find out whether the Property Tax Deduction or the Property Tax Credit is better for you. ***Do not*** *complete this schedule if you claim a credit for taxes paid to other jurisdictions. Complete Schedule A.*

1. **Property Tax.** Enter the property tax you paid in 1996. Renters enter 18% of rent paid in 1996. **See Instructions.** 1. _____
2. **Property Tax Deduction.** Enter 50% of Line 1 (Line 1 x .50) or $2,500, whichever is less. Also enter this amount on Line 4 below. **See Instructions.** 2. _____

	Column A	Column B
3. Taxable Income (Copy from Line 34 of your NJ-1040)	3.	3.
4. Property Tax Deduction (Copy from Line 2 of this schedule)	4.	- 0 -
5. Taxable Income After Property Tax Deduction (Subtract Line 4 from Line 3)	5.	5.
6. Tax you would pay on Line 5 amount (Go to Tax Tables or Tax Rate Schedules and enter amount)	6.	6.
7. Now, subtract Line 6, Column A from Line 6, Column B and enter the result here		7.

Is this amount $25 or more?

☐ Yes. You receive a greater tax benefit by taking the Property Tax Deduction. Enter the amount on Line 4 of this worksheet on Line 35 of Form NJ-1040. Make no entry on Line 43 of Form NJ-1040 and complete the balance of the return.

☐ No. You receive a greater tax benefit by taking the Property Tax Credit. Enter $25 on Line 43 of Form NJ-1040. Make no entry on Line 35 of Form NJ-1040 and complete the balance of the return. **See Instructions.**

Division Use

SIGN HERE

Under the penalties of perjury, I declare that I have examined this income tax return and Homestead Property Tax Rebate Application, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. If prepared by a person other than taxpayer, this declaration is based on all information of which the preparer has any knowledge.

Your Signature | Date

Spouse's Signature (If filing jointly, BOTH must sign) | Date

If you do not need forms mailed to you next year, check box (See instruction page 8) ☐

Paid Preparer's Signature | Federal Identification Number

Firm's Name | Federal Employer Identification Number

Pay amount on line 48 in full. Write Social Security number on check or money order and make payable to:

STATE OF NEW JERSEY - TGI

Mail your check or money order with your payment voucher (NJ-1040-V) in the small window envelope.

Mail your return in the larger envelope and affix the appropriate mailing label.

If you have an amount due on line 48 use the label for **CN-111**. If not, use the label for **CN-555**.

(REV 9-96)