



New Jersey
Amended Resident Income Tax Return

7x

For Tax Year January 1, 2019 – December 31, 2019, Or Other Tax Year Beginning _____, 2019, Ending _____, 2020

Your Social Security Number	Last Name, First Name, and Initial (Joint filers enter first name and initial of each -Enter spouse/CU partner last name only if different)		
Spouse's/CU Partner's Social Security Number	Home Address (Number and Street, incl. apt. # or rural route)		Change of address <input type="checkbox"/>
County/Municipality Code	City, Town, Post Office	State	ZIP Code
NJ RESIDENCY STATUS Part-year residents, provide months/days you were a New Jersey resident during 2019: From <u> </u> <u>19</u> To <u> </u> <u>19</u> <small>MONTH DAY YEAR MONTH DAY YEAR</small>			

FILING STATUS	EXEMPTIONS	As Originally Reported	Amended
On Original Return On Amended Return 1. <input type="checkbox"/> <input type="checkbox"/> Single 2. <input type="checkbox"/> <input type="checkbox"/> Married/CU Couple, filing joint return 3. <input type="checkbox"/> <input type="checkbox"/> Married/CU Partner, filing separate return 4. <input type="checkbox"/> <input type="checkbox"/> Head of Household 5. <input type="checkbox"/> <input type="checkbox"/> Qualifying Widow(er)/Surviving CU Partner	6. Regular <input checked="" type="checkbox"/> Yourself <input type="checkbox"/> Spouse/CU Partner <input type="checkbox"/> Domestic Partner 7. Age 65 or over <input type="checkbox"/> Yourself <input type="checkbox"/> Spouse/CU Partner 8. Blind or Disabled <input type="checkbox"/> Yourself <input type="checkbox"/> Spouse/CU Partner 9. Veteran Exemption <input type="checkbox"/> Yourself <input type="checkbox"/> Spouse/CU Partner 10. Number of your qualified dependent children 11. Number of other dependents 12. Dependents attending colleges (See instr. NJ-1040) 13a. Add lines 6, 7, 8, and 12. 13b. Add lines 10 and 11. 13c. Enter amount from line 9.	6.	7.
		8.	9.
		10.	11.
		12.	13a.
		13b.	13c.

DEPENDENT INFORMATION	14. Dependent's Last Name, First Name, Middle Initial	Dependent's Social Security Number	Birth Year	Check box if dependent does not have health insurance
a	_____	____/____/____	_____	<input type="checkbox"/>
b	_____	____/____/____	_____	<input type="checkbox"/>
c	_____	____/____/____	_____	<input type="checkbox"/>
d	_____	____/____/____	_____	<input type="checkbox"/>

GUBERNATORIAL ELECTIONS FUND	Do you want to designate \$1 of your taxes for this fund?	<input type="checkbox"/>	Yes	Note: If you check the "Yes" box(es), it will not increase your tax or reduce your refund.
	If joint return, does your spouse/CU Partner want to designate \$1?	<input type="checkbox"/>	Yes	

SIGN HERE	Under penalties of perjury, I declare that I have examined this return, 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. _____ Date _____ Spouse's/CU Partner's Signature (if filing jointly, BOTH must sign)	Pay amount on line 66 in full. Write Social Security number(s) on check or money order and make payable to: State of New Jersey – TGI Division of Taxation Revenue Processing Center PO Box 664 Trenton, NJ, 08646-0664 You can also pay by e-check or credit card.																				
	If enclosing copy of death certificate for deceased taxpayer, check box (See instructions NJ-1040) <input type="checkbox"/> Drivers License # <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> (Voluntary. See instructions NJ-1040.)																					
	I authorize the Division of Taxation to discuss my return and enclosures with my preparer (below) <input type="checkbox"/> Paid Preparer's Signature _____ Federal Identification Number _____ Firm's name _____ Federal Employer Identification Number _____																					



Name(s) and Social Security Number

BOTH COLUMNS MUST BE FULLY COMPLETED

	As Originally Reported	Amended (See Instructions)
15. Wages, salaries, tips, and other employee compensation	15.	
16a. Taxable interest income.....	16a.	
16b. Tax-exempt interest income. Do not include on line 16a.....	16b.	
17. Dividends.....	17.	
18. Net profits from business.....	18.	
19. Net gains or income from disposition of property	19.	
20a. Pensions, Annuities, and IRA Withdrawals	20a.	
20b. Excludable Pensions, Annuities, and IRA Withdrawals	20b.	
21. Distributive Share of Partnership Income	21.	
22. Net pro rata share of S Corporation Income.....	22.	
23. Net gains or income from rents, royalties, patents, and copyrights	23.	
24. Net Gambling Winnings.....	24.	
25. Alimony and Separate Maintenance Payments received	25.	
26. Other.....	26.	
27. Total Income (Add lines 15, 16a, 17, 18, 19, 20a, and 21 through 26)	27.	
28a. Retirement/Pension Exclusion.....	28a.	
28b. Other Retirement Income Exclusion.....	28b.	
28c. Total Exclusion Amount (Add lines 28a and 28b)	28c.	
29. New Jersey Gross Income (Subtract line 28c from line 27).....	29.	
30. Total Exemption Amount (See instructions).....	30.	
31. Medical Expenses (See instructions NJ-1040)	31.	
32. Alimony and Separate Maintenance Payments.....	32.	
33. Qualified Conservation Contribution.....	33.	
34. Health Enterprise Zone Deduction	34.	
35. Alternative Business Calculation Adjustment (See instructions NJ-1040).....	35.	
36. Total Exemptions and Deductions (Add lines 30 through 35).....	36.	
37. Taxable Income (Subtract line 36 from line 29)	37.	
38a. Total Property Taxes (18% of Rent) Paid (See instr. NJ-1040)....	38a.	

38b. Block Lot Qualifier

38c. County/Municipality Code Check box if you completed Worksheet G. (See instr. NJ-1040)

38d. Indicate your residency status during 2019 (fill in only one oval) Homeowner Tenant Both

39. Property Tax Deduction (See instructions NJ-1040).....	39.	
40. New Jersey Taxable Income (Subtract line 39 from line 37).....	40.	
41. Tax on Amount on line 40 (See instructions)	41.	
42. Credit For Income Taxes Paid to Other Jurisdictions Enter other jurisdiction code (See instr. NJ-1040)..... <input type="text"/> <input type="text"/>	42.	
43. Balance of Tax (Subtract line 42 from line 41).....	43.	
44. Child and Dependent Care Credit (See instructions NJ-1040).....	44.	
45. Balance of Tax (Subtract line 44 from line 43).....	45.	
46. Sheltered Workshop Tax Credit (See instructions NJ-1040)	46.	
47. Balance of Tax (Subtract line 46 from line 45).....	47.	



Name(s) and Social Security Number

		BOTH COLUMNS MUST BE FULLY COMPLETED			
		As Originally Reported		Amended (See Instructions)	
48. Gold Star Family Counseling Credit (See instructions NJ-1040)	48.				
49. Balance of Tax After Credits (Subtract line 48 from line 47)	49.				
50. Use Tax Due on Internet, Mail-Order, or Other Out-of-State Purchases (See instructions NJ-1040).....	50.				
51. Interest on Underpayment of Estimated Tax (See instructions NJ-1040) Check box if Form NJ-2210 is enclosed <input type="checkbox"/>	51.				
52. Shared Responsibility Payment Check box if Schedule HCC is enclosed <input type="checkbox"/>	52.				
53. Total Tax Due (Add lines 49 through 52)	53.				
54. Total New Jersey Income Tax Withheld	54.				
55. Property Tax Credit (See instructions NJ-1040)	55.				
56. New Jersey Estimated Tax Payments/Credit from 2018 tax return	56.				
57. New Jersey Earned Income Tax Credit (See instructions NJ-1040)	57.				
58. Excess New Jersey UI/WF/SWF Withheld (See instructions NJ-1040)	58.				
59. Excess New Jersey Disability Insurance Withheld (See instructions NJ-1040)	59.				
60. Excess New Jersey Family Leave Insurance Withheld (See instructions NJ-1040)	60.				
61. Wounded Warrior Caregivers Credit (See instructions NJ-1040)...	61.				
62. Amount Paid with original return, assessments, and/or with request for extension to file	62.				
63. Total payments/credits (Add lines 54 through 62)	63.				
64. Refund previously issued from Original Return	64.				
65. Net Payments (Subtract line 64 from line 63).....	65.				
66. If payments (line 65) are LESS THAN tax (line 53), enter AMOUNT OF TAX YOU OWE.	66.				
67. If payments (line 65) are MORE THAN tax (line 53), enter OVERPAYMENT	67.				
68. Amount of line 67 to be (A) REFUNDED.....	68a.				
(B) CREDITED to your 2020 tax.....	68b.				

Enter name, Social Security number, and address as shown on original return (if same as indicated on Page 1, write "Same"). If changing from separate to joint return, enter names, Social Security numbers, and addresses used on original returns. (Note: You cannot change from joint to separate returns after the due date has passed unless you have done so for federal tax purposes.)

Explanation of Changes to Income, Deductions, and Credits. Enter the line reference for which you are reporting a change and give the reason for each change. You **must** enclose copies of your W-2s, 1099s, and supporting schedules.

If amending line 42, complete calculations below:

(Income from Other Jurisdictions) _____ X _____ = _____

(Income from New Jersey sources) _____ (New Jersey Tax line 41)

Use of Form NJ-1040X

You must use Form NJ-1040X for the appropriate tax year to **change (amend)** any information reported on your original resident Income Tax return (Form NJ-1040 or return that was filed using approved vendor software). If you have already filed a 2019 resident Income Tax return and you need to change any of the information reported or provide information that was missing, you must use the 2019 Form NJ-1040X. **Failure to use Form NJ-1040X to amend a resident return will delay the processing of your return and/or refund.**

NOTE: You must fill out **both** the “As Originally Reported” and “Amended” columns of Form NJ-1040X completely, even though certain items in the “Amended” column are not being amended.

Time Period for Refunds. Amended returns claiming a refund must be filed within three years from the time the return was filed or two years from the time the tax was paid, whichever is later. If the return is not received within this time limit, it will be considered past the statute and the refund claim will be disallowed.

Amending Nonresident Returns. New Jersey does not have a separate form for amending nonresident returns. To amend a nonresident return, use Form NJ-1040NR for the appropriate tax year and write “AMENDED” across the top. **Do not use Form NJ-1040X to amend a nonresident return.**

Enclosures with Form NJ-1040X

If you are amending an item of income, deduction, or credit that requires supporting documents, you must enclose the applicable schedule or form when filing Form NJ-1040X.

Forms W-2 and 1099. You must enclose copies of your W-2s and/or 1099s with Form NJ-1040X if you are amending (by increasing) taxes withheld or if you are claiming excess New Jersey unemployment insurance/workforce development partnership fund/supplemental workforce fund contributions, family leave insurance contributions, and/or disability insurance contributions.

Returns Filed Electronically. If you filed your original return electronically, enclose with Form NJ-1040X **all** supporting schedules or forms (W-2, Schedules NJ-COJ and NJ-DOP, NJ-BUS-1, NJ-BUS-2, NJK-1, etc.) that you would have enclosed if you had filed the original return on paper — including those that support items that are not being amended.

When to File

File Form NJ-1040X only **after** you have filed your original resident Income Tax return and you need to change the original return. You cannot use Form NJ-1040X to file an **original** resident return.

Where to File

Mail Amended Returns (Form NJ-1040X) to:
STATE OF NEW JERSEY
DIVISION OF TAXATION
REVENUE PROCESSING CENTER
PO BOX 664
TRENTON NJ 08646-0664

Name and Social Security Number

Your name and Social Security number must be entered on Form NJ-1040X and all accompanying schedules. If you are filing a joint return, include both Social Security numbers.

Taxpayer Signature

You must sign and date your NJ-1040X in blue or black ink. **Both husband and wife/civil union partners must sign a joint amended return.** A return without the proper signatures cannot be processed.

Tax Preparers

Anyone who prepares a return for a fee must sign the return as a “Paid Preparer” and enter their Social Security number or federal preparer tax identification number. Include the company or corporation name and federal identification number if applicable. A tax preparer who fails to sign the return or provide a tax identification number may incur a \$25 penalty for each omission.

Calendar Year or Fiscal Year Ended

Like the resident Income Tax return, Form NJ-1040X is different for each year. The calendar year or fiscal year must be the same as the year covered by the original return that is being amended. Example: John Smith discovers an error on his 2018 New Jersey resident Income Tax return while preparing his tax return for 2019. To correct the error on his 2018 tax return, he must file Form NJ-1040X for Tax Year 2018. The calendar year on his NJ-1040X will be 2018 even though he is preparing the NJ-1040X in 2020.

Line-by-Line Instructions

Name and Address

Print or type your name(s), complete address, and ZIP Code in the space provided on the return. If filing jointly, list the names of both spouses/civil union partners in the same order as on the original return. Check the “Change of Address” box if your address has changed since the last time you filed a New Jersey return.

Social Security Number

Enter your Social Security number in the space provided on the return. If you are married or a civil union couple and filing a joint amended return, report both filers’ numbers in the order in which the names were listed on the original return. If you are filing separately, you must also enter your spouse’s/civil

union partner's Social Security number. If the Social Security number(s) is different than that reported on your original return, indicate the original number(s) in the space provided on page 3 of Form NJ-1040X.

County/Municipality Code

See "County/Municipality Code" in the instructions for Form NJ-1040.

NJ Residency Status

If this amended return does not cover a 12-month period, list the month and day in the tax year your residency began and the month and day in the tax year it ended.

Filing Status (Lines 1–5)

See "Filing Status" in the resident Income Tax return instructions. Be sure to indicate your filing status in both the "On Original Return" and the "On Amended Return" columns, even if you are not amending your filing status. If your original return was filed separately and you are filing a joint amended return, indicate both filers' original filing information in the space provided on page 3 of Form NJ-1040X.

Note: You cannot change your filing status after the due date for filing the original return has passed unless you have done so for federal income tax purposes.

Exemptions (Lines 6–13)

See "Exemptions" in the resident Income Tax return instructions. You must complete both the "As Originally Reported" and "Amended" columns, even if you are not amending the number of exemptions reported on the original resident Income Tax return filed. Enter on line 13a the total of lines 6, 7, 8, and 12 in each column. Enter on line 13b the total of lines 10 and 11 in each column. Enter on line 13c the number from line 9.

Calculate the amount of your personal exemption allowance on line 30 by following these four steps:

1. Multiply the total number of exemptions on line 13a by \$1,000.
2. Multiply the total number of exemptions on line 13b by \$1,500.
3. Multiply the total number of exemptions on line 13c by \$6,000.
4. Add the total amount from steps 1 through 3 and enter the result on line 30. Part-year residents must prorate the amount to be entered in each column on line 30 based on the number of months as a New Jersey resident. For this calculation, 15 days or more is a month.

$$\text{Total Exemptions} \times \frac{\text{Mos. NJ Resident}}{12} = \text{line 30}$$

Dependent Information – Line 14

Enter on line 14 the name, Social Security number, and birth year for each dependent claimed. Also, check the box for each

dependent who did *not* have health insurance coverage (including NJ FamilyCare/Medicaid, Medicare, private, or other health insurance) on the date the original return was filed. **Do not check the box for any dependents who had health insurance.** If you have more than four dependents, enter the required information for the first four dependents on lines 14a–d and enclose a statement with the return listing the information for the *additional* dependents.

Gubernatorial Elections Fund

If you checked "Yes" on your original return, omit this section.

If you did not check "Yes" on your original return and now want to do so, check the appropriate box. For more information on the Public Financing Program, contact the New Jersey Election Law Enforcement Commission at 1-888-313-ELEC (toll-free within New Jersey) or 609-292-8700 or online at elec.nj.gov. Checking the box(es) will not increase your tax or reduce your refund.

Income and Deductions (Lines 15–39)

You must complete both the "As Originally Reported" and "Amended" columns fully, even if you are not amending all the line items through line 65. Example: John Smith does not want to amend line 17 on his Form NJ-1040X but he is amending line 18.

John Smith should complete line 17 and line 18 as follows:

Line	As Originally Reported		Amended (See Instructions)	
	2345	60	2345	60
17. Dividends	2345	60		60
18. Net profits from business	4272	00		00

See the instructions for Form NJ-1040.

Part-year residents are subject to tax on all income received while residents of New Jersey and must prorate their exemptions, deductions, credits, and exclusions to reflect the period covered by the return. (See "Part-Year Residents" in the instructions for Form NJ-1040.)

Tax Calculation – Line 41

Calculate your State tax by using the Tax Rate Schedules on page 3. Choose the correct table for your filing status. Multiply the New Jersey Taxable Income (line 40) by the applicable tax rate, subtract the proper amount shown on the chart, and enter the result on line 41. If your taxable income on line 40 is under \$100,000, you can use the Tax Table in the resident Income Tax return instructions (Form NJ-1040) to determine your tax instead of the Tax Rate Schedules.

Credit for Income Taxes Paid to Other Jurisdiction(s) – Line 42

If you are amending your credit for income taxes paid to other jurisdictions, complete the calculations on page 3 of Form NJ-1040X with your amended figures. See the Form NJ-1040 instructions for information on calculating the credit.

2019 Tax Rate Schedules

For filing status: Single Married/CU Partner, Filing Separate Return					Table A
If line 40 is:			Multiply	Subtract	Your Tax
Over	But Not Over	×	line 40 by:	–	
\$ 0	\$ 20,000	×	.014	–	\$ 0
20,000	35,000	×	.0175	–	70.00
35,000	40,000	×	.035	–	682.50
40,000	75,000	×	.05525	–	1,492.50
75,000	500,000	×	.0637	–	2,126.25
500,000	5,000,000	×	.0897	–	15,126.25
5,000,000	and over	×	.1075	–	104,126.25

For filing status: Married/CU Couple, Filing Joint Return Head of Household Qualifying Widow(er)/Surviving CU Partner					Table B
If line 40 is:			Multiply	Subtract	Your Tax
Over		×	line 40 by:	–	
\$ 0	\$ 20,000	×	.014	–	\$ 0
20,000	50,000	×	.0175	–	70.00
50,000	70,000	×	.0245	–	420.00
70,000	80,000	×	.035	–	1,154.50
80,000	150,000	×	.05525	–	2,775.00
150,000	500,000	×	.0637	–	4,042.50
500,000	5,000,000	×	.0897	–	17,042.50
5,000,000	and over	×	.1075	–	106,042.50

New Jersey Earned Income Tax Credit – Line 57

If you are amending your return to apply for the New Jersey Earned Income Tax Credit, you must enter an amount on each line in the “As Originally Reported” and “Amended” columns, even though certain items are not being amended. In the “Explanation of Changes” box on page 3 of Form NJ-1040X, enter your federal earned income credit amount. (Civil union couples, enter the federal earned income credit amount you would have been eligible to receive on a joint federal return. See the Form NJ-1040 instructions.) Then enter 39% of your federal earned income credit in the “Amended” column for line 57. The Division of Taxation audits returns to ensure compliance with the eligibility requirements for this credit. You may be asked to provide additional documentation to support your claim.

Amounts Previously Paid – Line 62

If you made a payment with your 2019 resident return or with an extension request, or if you paid as assessment for your 2019 return, include those amounts in both columns, “As Originally Reported” and “Amended.”

Refund Previously Issued From Original Return – Line 64

If you were previously issued a refund for your 2019 resident return, enter the amount of the refund you actually received in both columns, “As Originally Reported” and “Amended.” This amount may be different than the amount originally requested on

Form NJ-1040. If you were not previously issued a refund, make no entry.

Balance Due or Refund (Lines 66 and 67)

Payments. If your New Jersey Total Tax Due (line 53) is larger than your Net Payments (line 65), you have a balance due. Subtract line 65 from line 53 and enter the result on line 66. Payment can be made by:

Check or Money Order, payable to “State of New Jersey – TGI.” Write your Social Security number on the check or money order. If you are filing a joint return, include both Social Security numbers.

Electronic Deduction From Bank Account (E-Check), from the Division’s website (njtaxation.org). E-check payments also can be made by contacting the Division’s Customer Service Center at 609-292-6400 or by visiting a Regional Information Center (see page 4). You will need your Social Security number and date of birth to make a payment. **Note:** E-check payments made using an account that is funded from a financial institution outside the United States will not be accepted.

Credit Card, online (njtaxation.org) or by phone (1-888-673-7694) using a Visa, American Express, MasterCard, or Discover credit card. Credit card payments also can be made by contacting the Division’s Customer Service Center at 609-292-6400 or by visiting a Regional Information Center (see page 4). Fees apply when you pay by credit card. The fee is added to your actual tax payment.

NOTE: Penalties and interest are imposed whenever tax is paid after the original due date of Form NJ-1040. See “Penalties and Interest” in the Form NJ-1040 instructions.

Refunds. If your Net Payments (line 65) are larger than your New Jersey Total Tax Due (line 53), you have overpaid your tax. Subtract line 53 from line 65, enter the result on line 67, and then complete line 68.

Amount to be Refunded/Credited to Your 2020 Tax (Lines 68A and B)

Enter on:

- ◆ Line 68A the amount of overpayment (line 67) to be refunded to you; and/or
- ◆ Line 68B the amount of overpayment to be credited against your 2020 tax liability.

Explanation of Changes

In the space provided, explain the reason for changes to income, deductions, and/or credits as originally reported. If additional space is needed, enclose a statement that includes your name and Social Security number.

Items to Check Before Mailing Your Return

- ✓ Use the 2019 Form NJ-1040X to amend a 2019 Form NJ-1040 resident Income Tax return only.
- ✓ Check for correct name, address, and Social Security number(s). Your amended return (Form NJ-1040X) cannot be processed without a Social Security number.
- ✓ Fill out both columns (“As Originally Reported” and “Amended”) completely.
- ✓ Enclose required supporting documents when amending income items, deductions, or credits.
- ✓ Enclose a copy of your W-2s and/or 1099s (see page 1).
- ✓ If original return was filed electronically, enclose **all** supporting schedules or forms that would have been enclosed with an original paper return – including supporting documents for items not being amended.
- ✓ If there is a balance due on your amended return (Form NJ-1040X) and you are filing the amended return after the original due date of your resident return (Form NJ-1040), your payment should include the amount of tax due plus penalties and interest to avoid additional charges.
- ✓ If you are paying by check or money order, write your Social Security number on the check or money order. If you are filing a joint return, include both Social Security numbers. **(You can also pay by e-check or credit card.)**
- ✓ Sign and date your return. **Both spouses/civil union partners must sign a joint return.** Your amended return cannot be processed without the proper signatures.
- ✓ Keep a copy of your amended return and all supporting documents, forms, schedules, and worksheets.

When You Need Information...

by phone...

Call our Automated Tax Information System
1-800-323-4400 – (within NJ, NY, PA, DE, and MD) **or**
609-826-4400. Touch-tone phones only.

- ◆ Listen to recorded tax information on many topics;
- ◆ Order certain forms and publications through our message system;
- ◆ Get information on 2019 refunds.

Contact our Customer Service Center

609-292-6400 – Speak directly to a Division of Taxation representative for tax information and assistance. See website for hours of operation.

Text Telephone Service (TTY/TDD) for Hearing-Impaired Users

1-800-286-6613 – (toll-free within NJ, NY, PA, DE, and MD) **or 609-984-7300.** These numbers are accessible *only* from TTY devices.

- ◆ Submit a text message on any New Jersey tax matter;
- ◆ Receive a reply through NJ Relay Services (711).

online...

Visit the New Jersey Division of Taxation Website

Many State tax forms and publications are available on our website: njtaxation.org

You can also reach us by email with general State tax questions at: nj.taxation@treas.nj.gov

Do not include confidential information such as Social Security or federal tax identification numbers, liability or payment amounts, dates of birth, or bank account numbers in your email.

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state.nj.us/treasury/taxation/listservic.shtml

in person...

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Regional Information Centers provide individual assistance at various locations throughout the State. Call the Automated Tax Information System or visit our website for the address of the center nearest you.