



Name(s) as shown on Form NJ-1040

14. Wages, salaries, tips, and other employee compensation (Enclose W-2)
Be sure to use State wages from Box 16 of your W-2(s). See instructions 14 [][] , [][][][] , [][][][] . [][]

15a. Taxable interest income (See instructions)
(Enclose federal Schedule B if over \$1,500) 15a [][] , [][][][] , [][][][] . [][]

15b. Tax-exempt interest income (See instructions)
(Enclose Schedule) DO NOT include on Line 15a 15b [][] , [][][][] , [][][][] . [][]

16. Dividends 16 [][] , [][][][] , [][][][] . [][]

17. Net profits from business (Schedule NJ-BUS-1, Part I, Line 4)
(Enclose copy of federal Schedule C, Form 1040) 17 [][] , [][][][] , [][][][] . [][]

18. Net gains or income from disposition of property (Schedule B, Line 4) 18 [][] , [][][][] , [][][][] . [][]

19a. Pensions, Annuities, and IRA Withdrawals (See instruction page 22) 19a [][] , [][][][] , [][][][] . [][]

19b. Excludable Pensions, Annuities, and IRA Withdrawals .. 19b [][] , [][][][] , [][][][] . [][]

20. Distributive Share of Partnership Income (Schedule NJ-BUS-1, Part II, Line 4)
(See instruction page 25) (Enclose Schedule NJ-K-1 or federal Schedule K-1) 20 [][] , [][][][] , [][][][] . [][]

21. Net pro rata share of S Corporation Income (Schedule NJ-BUS-1, Part III, Line 4)
(See instruction page 25) (Enclose Schedule NJ-K-1 or federal Schedule K-1) .. 21 [][] , [][][][] , [][][][] . [][]

22. Net gains or income from rents, royalties, patents & copyrights
(Schedule NJ-BUS-1, Part IV, Line 4) 22 [][] , [][][][] , [][][][] . [][]

23. Net Gambling Winnings (See instruction page 25) 23 [][] , [][][][] , [][][][] . [][]

24. Alimony and separate maintenance payments received 24 [][] , [][][][] , [][][][] . [][]

25. Other (Enclose Schedule) (See instruction page 25) 25 [][] , [][][][] , [][][][] . [][]

26. Total Income (Add Lines 14, 15a, 16, 17, 18, 19a, and 20 through 25) 26 [][] , [][][][] , [][][][] . [][]

27a. Pension Exclusion (See instruction page 26) 27a [][] , [][][][] . [][]

27b. Other Retirement Income Exclusion (See Worksheet and instr. page 26) ... 27b [][] , [][][][] . [][]

27c. Total Exclusion Amount (Add Line 27a and Line 27b) 27c [][] , [][][][] . [][]

28. **New Jersey Gross Income** (Subtract Line 27c from Line 26) 28 [][] , [][][][] , [][][][] . [][]
(See instruction page 28)

29. Total Exemption Amount (See instruction page 28 to calculate amount) 29 [][][][] , [][][][] . [][]
(Part-Year Residents see instruction page 7)

30. Medical Expenses 30 [][][][] , [][][][] . [][]
(See Worksheet and instruction page 28)

31. Alimony and Separate Maintenance Payments 31 [][][][] , [][][][] . [][]

32. Qualified Conservation Contribution 32 [][][][] , [][][][] . [][]

33. Health Enterprise Zone Deduction 33 [][][][] , [][][][] . [][]

34. Alternative Business Calculation Adjustment (Schedule NJ-BUS-2, Line 11) 34 [][][][] , [][][][] . [][]

35. Total Exemptions and Deductions (Add Lines 29, 30, 31, 32, 33, and 34) 35 [][][][] , [][][][] . [][]

36. Taxable Income (Subtract Line 35 from Line 28) If zero or less, MAKE NO ENTRY. 36 [][] , [][][][] , [][][][] . [][]

37a. Total Property Taxes (18% of Rent) Paid (See instruction page 30) 37a [][] , [][][][] , [][][][] . [][]

37b. Block [][][][][] . [][][][][] Lot [][][][][] . [][][][][] Qualifier [][][][][]

37c. County/Municipality Code [][][][] Fill in oval if you completed Worksheet G-1 (See instruction page 33)

38. Property Tax Deduction (From Worksheet G. See instruction page 33)..... 38 [][] , [][][][] . [][]

39. **New Jersey Taxable Income** (Subtract Line 38 from Line 36)
If zero or less, MAKE NO ENTRY..... 39 [][] , [][][][] , [][][][] . [][]

Your Social Security Number



Name(s) as shown on Form NJ-1040

Form with 66 numbered lines for tax calculations, including TAX, Credit For Income Taxes, Balance of Tax, Total Tax and Penalty, Total New Jersey Income Tax Withheld, and various credits and deductions.

SIGN YOUR RETURN ON PAGE 1

