STATE OF NEW JERSEY 2016 PROPERTY TAX REIMBURSEMENT

PTR INCOME REPORT

So	cial Security Number:	Spouse's/CU Partner's Socia	al Securi	ity Number:		
Na	ame:	fortage of the last of the las		Destruction (All Visible and A		
See had If y e	Last Name, First Name and Initial (Joint filers ent FERMINING INCOME) the instructions for information on possible sour no income in a particular category, leave that line ou have a net loss in any income category, leaving in the same household, combine your income in the same household, combine your income category.	rces of income and how to determin ne blank. Losses in one category of ave that line blank. If you were m	e the an income arried or	nount to be reported in each categor cannot be used to reduce total incor r in a civil union as of December 31		
INCOME CATEGORIES		2015		2016		
a	Social Security Benefits (including Medicare Part B premiums) paid to or on behalf of applicant. Enter total amount from Box 5 of Form SSA-1099 or Form RRB-1099					
b.	Pension and Retirement Benefits (including IRA and annuity income) See instructions for calculating amount.					
C.	Salaries, Wages, Bonuses, Commissions, and Fees					
d.	Unemployment Benefits					
e.	Disability Benefits, whether public or private (including veterans' and black lung benefits).					
f.	Interest (taxable and exempt)					
g.	Dividends					
h.	Capital Gains					
i.	Net Rental Income					
j.	Net Profits From Business					
k.	Net Distributive Share of Partnership Income .					
I.	Net Pro Rata Share of S Corporation Income .					
m.	Support Payments					
n.	Inheritances, Bequests, and Death Benefits					
0.	Royalties					
p.	Gambling and Lottery Winnings (including New Jersey Lottery)					
q.	All Other Income					
Add lines a-q in each column.		TOTAL 2015 INCOME		TOTAL 2016 INCOME		
Total annual income cannot → exceed amounts shown.		Was your total 2015 income \$87,007* or less?		Was your total 2016 income \$87,007* or less?		
		☐ Yes. See 2016 income eligibility.		☐ Yes. You met 2016 income limit.		
		No. STOP. You are not eligible for the reimbursement, and you should not file this application. *Subject to change. See "Impact of State Budget" on page 1 of instructions		No. STOP. You are not eligible for the reimbursement, and you should not file this application. *Subject to change. See "Impact of State Budget" on page 1 of instructions		