Part-Year Residents and Nonresidents Understanding Income Tax

View of a home on Spring Lake.

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This bulletin explains:

- 1. Determining your residency;
- 2. Your tax responsibilities;
- 3. How to complete a part-year New Jersey Income Tax return; and
- 4. When a part-year resident must file **both** resident and nonresident Income Tax returns.

Determining Residency

For Gross Income Tax residency determination issues regarding a military service member and their spouse, New Jersey follows the federal Servicemembers Civil Relief Act, 50 U.S.C. § 3901, et seq, which includes the Military Spouses Residency Relief Act and Veterans Auto and Education Improvement Act of 2022. If you are not a current military service member and/or the spouse of an active service member, your residency is determined by where you were **domiciled** during the tax year. If you moved in to or out of New Jersey for part of the year, you are a part-year resident and may need to file a resident tax return to report the income received for the period you resided here. If you are not domiciled in New Jersey, but received income from sources within New Jersey, you may need to file a nonresident tax return. Income from sources within New Jersey for a nonresident individual means the income from the categories of gross income enumerated and classified under chapter 5 of the New Jersey Gross Income Tax Act to the extent that the income is earned, received or acquired from sources within New Jersey.

Domicile is the place and state you consider your permanent home — the place where you intend to return after a period of absence (e.g., vacation, business assignment, educational leave).

You have only one domicile, although you may have more than one place to live. Your domicile continues until you establish a new permanent home elsewhere.

The Division considers many factors when determining if New Jersey is your domicile, including:

- Your intent;
- Where you register to vote;
- Your driver's license and vehicle registration;
- Where you have family ties;
- Whether your federal tax return lists New Jersey as a home address;
- Location of bank accounts;
- Whether you participated in a New Jersey property tax relief program.

Permanent Home means a residence that you maintain permanently as your principal residence (main home), whether or not you own it.

Your home is not considered permanent if you maintain it only during a temporary period of time to accomplish a specific purpose (e.g., temporary job assignment). There are, however, specific guidelines for military personnel (see <u>Military Personnel and Families</u>).

If New Jersey is your domicile, you are considered a resident for New Jersey tax purposes, unless:

- 1. You did not maintain a permanent home in New Jersey;
- 2. You maintained a permanent home outside New Jersey; and
- 3. You did not spend more than 30 days in New Jersey.

If New Jersey **is not** your domicile, you are only considered a resident if you maintain a *permanent* home and spend more than 183 days here.

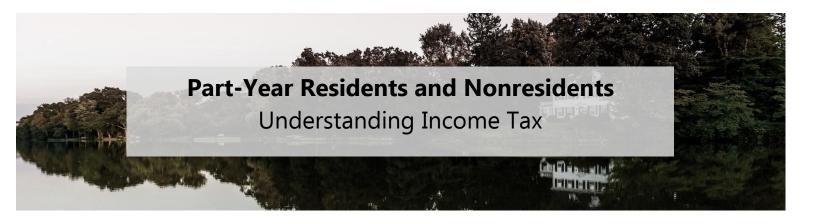
Income Filing Threshold

Your residency status and income determine whether you are required to file a New Jersey Income Tax return. You are responsible for New Jersey Income Tax, and must file, if your gross income exceeds the following:

Filing Thresholds

Filing Status	In-State and Out-of-State Gross Income for the Entire Year
Single Married/CU Partner Filing Separate Return	\$10,000
Married/CU Couple Filing Joint Return Head of Household Qualifying Widow(er)/Surviving CU Partner	\$20,000

You do not have to file a New Jersey return under the following circumstances: You received no income during the part of the year you were a resident, and you had no *New Jersey source* income during the part of the year you were a nonresident.



Part-Year Resident or Part-Year Nonresident

If you change your domicile and meet the definition of a resident or nonresident for only part of the year, you are a resident for part of the year (*part-year resident*) and a nonresident for the remainder of that year (*part-year nonresident*).

Filing Requirements

Your filing status and gross income determine whether you have to file a New Jersey Income Tax return. Anyone who meets the income requirements must file.

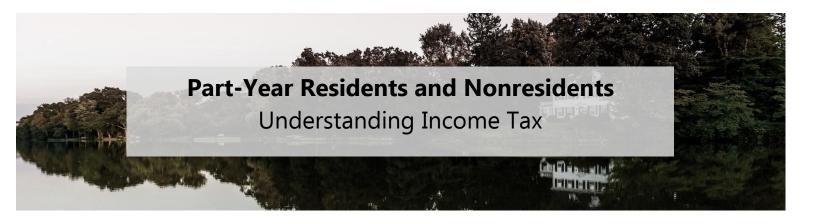
See Who Must File to find out whether you are required to file.

Part-year residents must use <u>Form NJ-1040</u> and indicate the period of their New Jersey residency. The return should show only the income received during that period. Likewise, **part-year nonresidents** must use <u>Form NJ-1040NR</u> and indicate the period of time they were residents.

If you received income from New Jersey sources during **both** your residency and nonresidency periods, you must file both a NJ-1040 and a NJ-1040NR. You must report the income you received during the time you were a resident on your resident return. Report the income received while you were a nonresident on your nonresident return.

Examples

- 1. A taxpayer was a New Jersey resident from January 1 through December 31. They file a *full-year resident* return showing the income they received that year.
- 2. Two married taxpayers were New Jersey residents from May 1 to December 31. They had no New Jersey income prior to becoming residents. They must file a *part-year resident* return and report the income they received during their period of residency (May to December).
- 3. A taxpayer was a full-year resident of New York who worked in New Jersey from July through November. They file a *full-year nonresident* return because they were a nonresident for the entire year. Their New Jersey nonresident return will show the income they received during the period they were a nonresident (i.e., January to December).
- 4. A taxpayer worked in New Jersey for the entire year. From January 1 to March 31, they were a New Jersey resident. From April 1 to December 31, he was a Delaware resident. They must file two New Jersey Income Tax returns:



- A *part-year resident* return showing the income they received during the three months they were a New Jersey resident; and
- A *part-year nonresident* return showing their income during the period they were a nonresident of New Jersey.

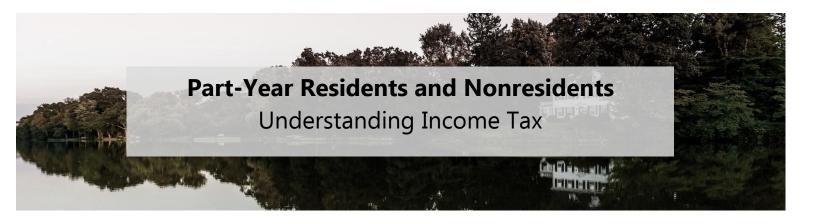
Both Part-Year Resident and Nonresident

If you were a resident for part of the year, you were a nonresident for the remainder of that year. File part-year resident and/or nonresident returns as follows:

- You must file both a part-year resident return and a part-year nonresident return if:
 - Your gross income from all sources (both in-state and out-of-state) for the entire year was more than the filing threshold amount (see <u>chart</u> on page 3);
 - You received income (whether from New Jersey sources or not) during the part of the year you were a resident; and
 - You received any amount of income from New Jersey sources during the part of the year you were a nonresident.
- File a part-year resident return if:
 - You received income during the part of the year you were a resident; and
 - Your income for the entire year is over the filing threshold (see <u>chart</u>).
- File a part-year nonresident return if:
 - You received income from New Jersey during the part of the year you were a nonresident; and
 - Your income for the entire year is over the filing threshold (see <u>chart</u>).

Examples

1. A single taxpayer was a resident of California for 10 months and a resident of New Jersey for two months. Their income as a California resident totaled \$23,000, and the income they received during the two months they were a resident of New Jersey was \$2,900. The taxpayer is subject to tax on the \$2,900 they received as a New Jersey resident because their income from everywhere for the *entire* year was more than the \$10,000 filing threshold amount.



2. A single taxpayer was a New Jersey resident from January through September, when they moved to Florida and became a resident there. Their income as a resident totaled \$5,800, and their income while a Florida resident was \$600. The taxpayer is not required to file a return, and they owe no New Jersey Income Tax on the \$5,800 because their income from everywhere for the *entire* year was less than the \$10,000 filing threshold amount. However, the taxpayer **must file** a part-year resident return to claim any refund of New Jersey Income Tax that was either withheld or remitted through estimated payments.

When they file their New Jersey return, they must also enclose a copy of their federal income tax return. If they did not file a federal return, they must enclose an informal statement – written, signed, and dated by them – to certify that their income for the year was less than \$10,000.

How Residents and Nonresidents Are Taxed

Residents

Residents are subject to tax on their income from all sources, whether the income is from inside or outside New Jersey. As a part-year resident, your resident return must include all income you received during the time you were a resident. Married/civil union couples filing jointly must report the income of both spouses.

Part-year residents must *prorate* all of their exemptions, deductions, and credits, in addition to pension and other retirement income exclusions, to reflect the time period covered by their return. (In this publication, prorate means to allocate proportionally over a set time period.) See *Completing a Part-Year Resident Return*.

For more information on completing the resident return, see instructions for Form NJ-1040.

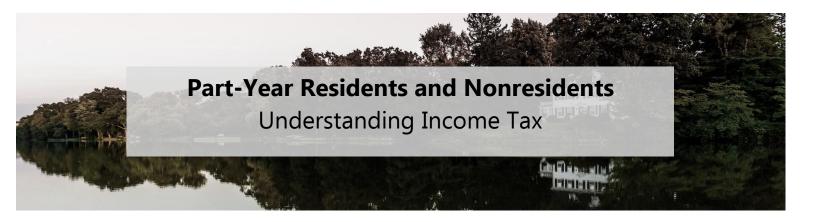
Nonresidents

For nonresidents, New Jersey Income Tax liability is based on the percentage of their total income that comes from New Jersey. The income section of the nonresident return has two columns:

- 1. Column A, income from everywhere, in which you report total income from all sources (both inside and outside New Jersey combined); and
- 2. Column B, income from only New Jersey sources.

Pennsylvania residents, see page 24.

As a nonresident, you must calculate your tax on income from all sources as if you were a resident, and then prorate your tax based on your New Jersey source income.



For more information on completing the nonresident return, see <u>instructions for Form NJ-1040NR</u>.

Nonresident service members

You are *not* required to include your military pay on the New Jersey nonresident return. This is in accordance with federal legislation (Service members Civil Relief Act, P.L. No. 108-189). Do not report military pay in Column A or Column B of Form NJ-1040NR.

Income you receive as a nonresident from New Jersey sources other than military pay is taxable.

In addition, under the federal Military Spouses Residency Relief Act (P.L. 111-97), a military service member's nonmilitary spouse who meets certain requirements is allowed to keep a tax domicile while moving from state to state. Under the Act, a qualified civilian spouse is considered a nonresident and is *not* subject to New Jersey Income Tax on wages earned in New Jersey. Nonresident civilian spouses are subject to tax on all other types of income from New Jersey sources, such as a gain from the sale of property.

Military, see Military Personnel and Families.

Completing a Part-Year Resident Return

- Enter your New Jersey residency period above line 1;
- Report income, withholdings, and payments for the period of New Jersey residency only;
- Prorate exemptions, deductions, exclusions, and credits based on residency period;
- If you also complete a part-year nonresident return, allocate your income, withholdings, and payments between the two returns as appropriate.

Part-year residents, provide months/days you were a New Jersey resident during 2023:

From: MM/DD/2 3 To: MM/DD/2 3

1. NJ Residency Status. Show the beginning and ending dates of your residency period. If you were a resident for 15 days or more of a month, that month counts as a month of residence. So, if you were a resident from January 27 to July 21, you were a resident for six months.

Part-Year Residents and Nonresidents Understanding Income Tax

15.	Wages, salaries, tips, and other employee compensation (State wages fr Box 16 of enclosed W-2(s)) (See instructions)									
16a	Taxable interest income (Enclose federal Schedule B if over \$1,500)			1	П		П			
	(See instructions)	16a.		-	щ		ш	ш.	_	
16b.	Tax-exempt interest income (Enclose Schedule) (See instructions) Do not include on line 16a	16b.	ш		Ш		L			
17	Dividends									
18.				i		7	$\overline{}$		$\overline{}$	
	(Enclose federal Schedule C)	18.	#	╬	4	4	닏	닉	Щ	
19.	Net gains or income from disposition of property (Schedule NJ-DOP, line	4) 19.	Щ.	Щ	Ц.	4	Ц	Щ	Щ	
202	Taxable pension, annuity, and IRA distributions/withdrawals (See instructions)	one) 20a				Ш	ш			
200.	lando periori, armitty, and nor distributions with drawns (See instruction	0113)204.	$\overline{}$	T			T	┰		
	Excludable pension, annuity, and IRA distributions/withdrawals				ш		_	1		
21.	Distributive Share of Partnership Income (Schedule NJ-BUS-1, Part II, lin			1		$\neg \vdash$	П			
20	(Enclose Schedule NJK-1 or federal Schedule K-1)				#	===	느	_	느	
22.	Net pro rata share of S Corporation Income (Schedule NJ-BUS-1, Part III			Ш		Ш	ш			
23	(Enclose Schedule NJ-K-1 or federal Schedule K-1)	22.			=	==	=	=	=	
23.	(Schedule NJ-BUS-1, Part IV, line 4)	23			ш		ш	ш	ш	
						$\neg \vdash$	П			
24.	Net gambling winnings (See instructions)	24.	-	╬	-	= =	Н	片	뭐	
25.	Alimony and separate maintenance payments received	25.		Щ	Ш	<u> </u>	Ш	Ш	Ш	
26.	Other (Enclose documents) (See instructions)	26.								
Inco	ome. Complete lines 15–26. Enter the total amount yo	ou received	in each	cate	aorv	of inc	ome	wh	ile v	ou
	e a New Jersey resident.				97				,	
WCI	e a New Jersey resident.									
	Talallana (4.445 45.40475			Ш			П			
21.	Total Income (Add lines 15, 16a, 17 through 20a, and 21 through 26)	21.	++	-			-			
28a	Pension/Retirement Exclusion (See instructions)	28a.					ı			
	Other Retirement Income Exclusion (See Worksheet D and						1			
	instructions pages 20–21)	28b.								
200	Total Exclusion Amount (Add lines 28a and 28b)		286							
	New Jersey Gross Income (Subtract line 28c from line 27)		20L.							
	(See instructions)	29								

3. Pension and Other Retirement Income Exclusion.

2.

a. Retirement/Pension Exclusion (line 28a). This is only available if your entire income for the year was \$150,000 or less. If your income for the entire year is between \$0 and \$100,000, prorate the maximum exclusion amount from this chart based on the number of months you were a New Jersey resident. See the example on the next page. If your income for the entire year is over \$100,000, do not prorate the exclusion amount. See instructions for Form NJ-1040.

If you and your spouse file a joint return, and only one of you is 62 or older or disabled, you can claim the full amount of the prorated exclusion. However, only the income of the one who is 62 or older or disabled can be excluded.

b. Other Retirement Income Exclusion (line 28b). If you (and/or your spouse if filing jointly) were 62 or older on the last day of the tax year, you may qualify to exclude other income on line 28b.

There are two parts to the total exclusion:

- 1. Part I, the unclaimed portion of your prorated pension exclusion; and
- **2. Part II**, a special exclusion for taxpayers who cannot receive Social Security or Railroad Retirement benefits.

Prorating the Pension Exclusion:

Total Pension Exclusion Amount x $\frac{\text{Months of NJ Residence}}{12}$ = Prorated Pension Exclusion Amount

Example

A 65-year-old, single taxpayer who was a New Jersey resident for four months of the 2023 Tax Year prorates the pension exclusion amount like this: $\frac{4}{12} = $15,000$

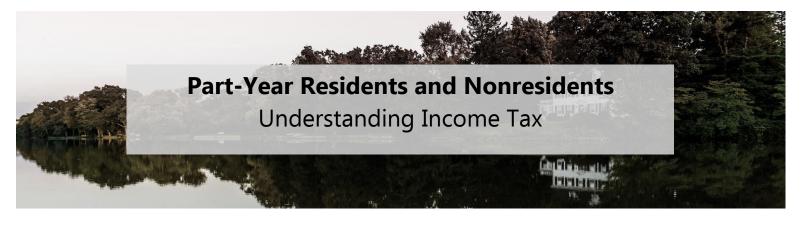
Do not complete Worksheet D in the NJ-1040 instructions to calculate the total exclusion amount you are eligible to claim. Instead, use Worksheet E.

More Information. For more detailed information on pensions, annuities, and IRAs, see <u>Retirement Income</u> and <u>Roth IRAs</u>. For information on calculating your partnership and S corporation income, see <u>Income From Partnerships</u> and <u>Income from S Corporations</u>.

4. Exemptions. You must prorate the total exemption allowance amount (line 13) based on the number of months you were a resident. For this calculation, 15 days or more equals a full month. Use the formula below, and then enter the prorated exemption amount on line 30.

Prorating the Exemption Allowance:

Line 13 × Months of NJ Residence = Prorated Exemption Amount



30.	Exemption Amount (Enter amount from line 13. Part-year residents see instr.)	L	<u> </u>	Ш	Щ			┙
31.	Medical Expenses (See Worksheet F and instructions)							_
32.	Alimony and separate maintenance payments (See instructions)							_
33.	Qualified Conservation Contribution							_
34.	Health Enterprise Zone Deduction34.							J
35.	Alternative Business Calculation Adjustment (Schedule NJ-BUS-2, line 11)							
36.	Organ/Bone Marrow Donation Deduction (See instructions)]
	NJBEST b. NJCLASS c. NJ Hig Deduction Deduction Tuition	her Ed.	П	П		П	Ť	ī
20	, , , , , , , , , , , , , , , , , , ,	Dea.	T			П		Ť
38.	Total Exemptions and Deductions (Add lines 30 through 37c)	訲	t	H	H			f
39.	Taxable Income (Subtract line 38 from line 29)							

5. Deductions.

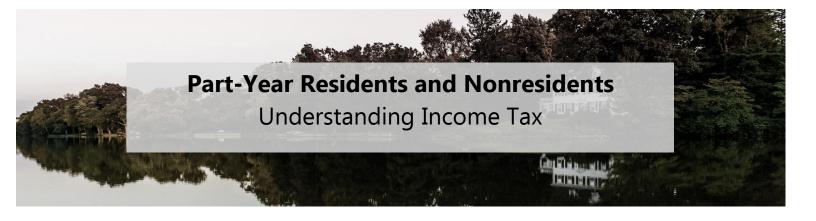
- a. Medical Expenses (line 31). You can deduct certain medical expenses for which you were not reimbursed by insurance or any other plan, qualified Archer medical savings account (MSA) contributions, and selfemployed health insurance costs. Complete Worksheet F, located in the NJ-1040 instructions, to calculate your deduction for medical expenses while you were a resident.
- b. Alimony and Separate Maintenance Payments (line 32). You can deduct alimony and separate maintenance payments paid while you were a resident. You cannot deduct child support payments. Refer to the **Tax Guide on divorce** for more information.
- c. Qualified Conservation Contribution (line 33). You can deduct the amount of any qualified conservation contribution you made while you were a resident.
- d. Health Enterprise Zone (line 34). If you provide primary care services in a qualified medical or dental practice you own, that is located in or within five miles of a designated Health Enterprise Zone (HEZ), you may be able to deduct a percentage of the net income from that practice. See Health Enterprise Zones for information on how to calculate the HEZ deduction.
- e. Alternative Business Calculation Adjustment (line 35). If you report net business loss(es) on Schedule NJ-BUS-1, Business Income Summary Schedule, you may be eligible for an income adjustment based on the loss(es) incurred during your residency period. Complete Schedule NJ-BUS-2, Form NJ-1040 to calculate the adjustment amount.



- f. Organ/Bone Marrow Donation Deduction (line 36). If you donated an organ or bone marrow to another person for transplantation, you may be eligible to deduct up to \$10,000 of unreimbursed expenses for travel, lodging, and lost wages as a result of your donation. The deductions must be claimed in the year in which the expenses occurred, and you may be asked to provide supporting documentation.
- g. New Jersey College Affordability Deductions (line 37a-c). If your gross income was \$200,000 or less, you may be eligible to deduct certain educational expenses. You can deduct up to \$10,000 of contributions made during the year into an NJBEST (New Jersey Better Educational Savings Trust) account on line 37a; deduct up to \$2,500 of principal and interest paid during the year on an NJCLASS (New Jersey College Loans to Assist State Students) loan on line 37b; or if you, your spouse, or your dependent enroll in or attend a New Jersey institution of higher education, you can deduct up to \$10,000 for tuition costs paid during the year on line 37c.

New Jersey does not allow deductions for adjustments taken on the federal return, such as employee business expenses or IRA and Keogh Plan contributions.

40a. Total Property Taxes (18% of Rent) Paid (See instructions page 25)40a. 40b. Indicate your residency status during 2023 (fill in only one oval)	Tenant	Both
41. Property Tax Deduction (From Worksheet H) (See instructions)		



Worksheet H Property Tax Deduction/Credit

Review the eligibility requirements on page 25 before completing Worksheet H. Part-year residents see page 30.

 Property Taxes. Enter the property taxes from line 40a, Form NJ-1040. 	1
Senior Franza (Property Tay Reimburgement) applicants must use their base year amount	

Senior Freeze (Property Tax Reimbursement) applicants must use their base year amount (See instructions on page 30.)

2. Property Tax Deduction. Is the amount on line 1 of this worksheet \$15,000 or more (\$7,500 or more if you and your spouse file separate returns but maintained the same main home)?

Complete both columns of this worksheet to find out whether the deduction or the credit is better for you.

- Yes. Enter \$15,000 (\$7,500 if you and your spouse file separate returns but maintained the same main home).
- No. Enter the amount from line 1.
 2.

STOP — if you are claiming a credit for taxes paid to other jurisdictions.

Complete only lines 1 and 2. Then complete Schedule NJ-COJ and Worksheet I.

(See instructions on page 31.)

- 8. Is the line 7 amount \$50 or more (\$25 if you and your spouse file separate returns but maintained the same main home)?
 Part-year residents see page 30 before answering "No."
 - Yes. The Property Tax Deduction is more beneficial for you. Make the following entries on your return.

Form NJ-1040	Enter amount from
Line 41	Line 4, column A
Line 42	Line 5, column A
Line 43	Line 6, column A
Line 56	Make no entry

No. The Property Tax Credit is more beneficial for you. Make the following entries on your return.

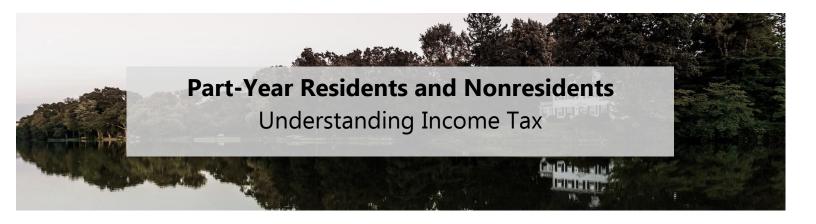
Form NJ-1040	Enter amount fron
Line 41	Make no entry
Line 42	Line 5, column B
Line 43	Line 6, column B
Line 56	\$50 (\$25 if you an

56 \$50 (\$25 if you and your spouse file separate returns but maintained the same main

home). Part-year residents must prorate this amount. (See instructions on

page 30.)

(Keep for your records)



6. Total Property Taxes (18% of Rent) Paid (line 40a). Enter the property taxes, or 18% of your rent, due and paid on your qualified principal residence (main home) while you were a resident.

Property Tax Deduction/Credit (line 41/line 56). Part-year residents may be eligible to claim a deduction (up to 100% of property taxes due and paid or up to \$15,000, whichever is less) or a refundable credit (up to \$50) for property taxes, or 18% of rent, due and paid during their residency period.

If you do not claim credit for taxes paid to another jurisdiction, complete Worksheet H to determine the property tax deduction and whether you should take the property tax deduction on line 41, Form NJ-1040 or the property tax credit on line 56.

If you claim credit for taxes paid to another jurisdiction, first complete lines 1 and 2 of Worksheet H, and then complete Schedule NJ-COJ and Worksheet I to make this determination. Enter on line 1 of Worksheet H the amount of property taxes, or 18% of rent due and paid, while you were a resident from line 40a, Form NJ-1040.

Complete the remainder of the worksheet according to the instructions. The maximum credit for a full-year resident is \$50 (or \$25 if you and your spouse file separate returns but lived together). You must prorate this amount based on the number of months you were a resident. For example, if you were a resident for nine months, you are eligible for a maximum credit of \$37.50. After prorating, answer the question at line 8 of Worksheet H based on this prorated amount. This will determine whether you will receive a greater benefit by taking the property tax deduction or claiming the prorated credit.

More Information. For information on claiming credit for taxes paid to another jurisdiction, see <u>Credit for Taxes</u>

Paid to Other Jurisdictions (Wage Income), and <u>Credit for Taxes Paid to Other Jurisdictions</u>

(<u>Business/Nonwage Income</u>). For more detailed information on the Property Tax Deduction/Credit, see the instructions for Form NJ-1040.

	46. Sheltered Workshop Tax Credit	46.		I		I	
8.	Sheltered Workshop Tax Credit (line 46). Enter the amount of you Part IV, line 12 of <u>Form GIT-317</u> . Allocate the total amount of the cred part-year nonresident returns, if appropriate.		•				
	47. Gold Star Family Counseling Credit (See instructions)	47		Т	ī	T	1

9. Gold Star Family Counseling Credit (line 47). This credit is for mental health care professionals who provided counseling through the Gold Star Family Counseling program. The amount of the credit is equal to the number of hours of counseling provided through the program (a minimum of 20 hours and a maximum of 40 hours per year) multiplied by the TRICARE rate for the service. The credit is nonrefundable and cannot reduce your Income Tax liability to an amount less than zero.

If you claim this credit, we will need to verify your eligibility. You will be asked to provide *copies* of the following:

- A statement with the number of counseling hours donated to Gold Star families in New Jersey along with the TRICARE rate for those counseling services; and
- A letter from the Gold Star Counseling Program verifying your participation; and
- A copy of your New Jersey State license from one of the following:
 - The State Board of Medical Examiners, the State Board of Psychological Examiners, the State Board of Social Work Examiners, the State Board of Marriage and Family Therapy Examiners, the Alcohol and Drug Counselor Committee, the Professional Counselor Examiners Committee, or the Certified Psychoanalysts Advisory Committee.



10. Credit for Employer of Organ/Bone Marrow Donor (line 48). If you are an employer who provided paid time off to an employee who missed work to donate an organ or bone marrow for transplantation, you may be able to claim a credit. The paid time off must have been in addition to any other paid time off for which the employee was entitled. If you qualify, you can take a credit of 25% of the employee's salary for up to 30 days of time missed from work for each donation.

You may be asked to **provide documentation** indicating that you are eligible to claim the credit, such as employee pay statements and a letter from a physician.

53c	. Shared Respon	sibility Payment (See instructions)		53c.					
	REQUIRED	Enclose Schedule NJ-HCC an	d fill in							
54.	Total Tax Due ((Add lines 50 through 53c)		54.		JС	Т			

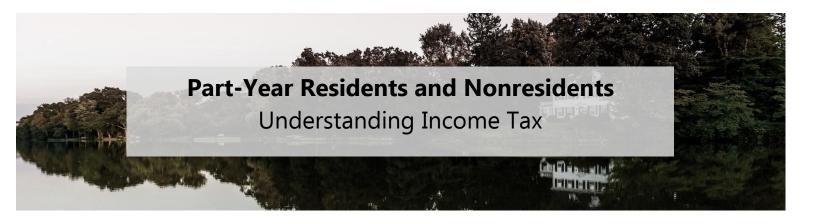
11. Shared Responsibility Payment (line 53c). If you are a resident who is required to file a return, you must have minimum essential health coverage for the year, unless you qualify for an exemption, or qualify for a waiver by participating in the New Jersey Easy Enrollment Health Insurance Program. Part-year residents must have coverage or qualify for an exemption for each month of their New Jersey residency or qualify for a waiver. If you or anyone in your tax household did not have the required coverage and does not qualify for an exemption, you owe a shared responsibility payment.

Your tax household includes you, your spouse (if filing jointly), and any individuals you claim as dependents on your NJ-1040. It also includes individuals you can, but do not, claim as dependents on your return.

Refer to the <u>NJ-1040 instructions</u> for more information on how to complete <u>Schedule NJ-HCC</u> and calculate your shared responsibility payment.

If your income on line 29 is under the filing threshold for your filing status, you do not owe a shared responsibility payment. *Do not* complete line 53c.

55.	Total NJ Income Tax Withheld (Enclose Forms W-2 and 1099)(Part-year residents, see instr.)	
56.]
57.	New Jersey Estimated Tax Payments/Credit from 2022 tax return57.	_
58.	New Jersey Earned Income Tax Credit (See instructions)	_
59.		_
60.	Excess New Jersey Disability Insurance Withheld (Enclose Form NJ-2450) (See instructions)	
61.	Excess New Jersey Family Leave Insurance Withheld (Enclose Form NJ-2450) (See instructions)61.	_
62.	Wounded Warrior Caregivers Credit (See instructions)	J
63.	Pass-Through Business Alternative Income Tax Credit (See instructions)63.]
64.	Child and Dependent Care Credit (See instructions)	
	# of dependents age 5 or	٦
65.	New Jersey Child Tax Credit (See instructions) younger on 12/31/23	i
66.	Total Withholdings, Credits, and Payments (Add lines 55 through 65)	



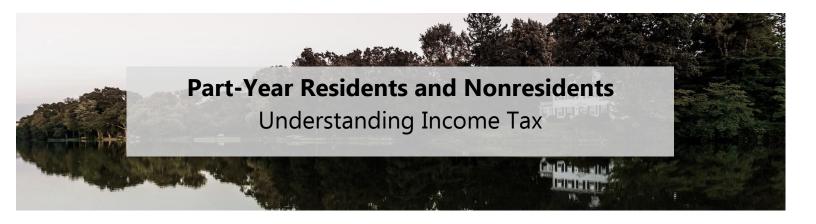
12. Tax Withheld/Property Tax Credit/Estimated Payments.

- a. Line 55. Enter the amount of New Jersey Income Tax withheld from wages you earned or other payments you received while you were a resident. If your employer combined wages you earned as a resident and wages you earned as a nonresident on the same W-2, allocate the New Jersey Income Tax withheld (box 17) between your part-year resident and part-year nonresident returns and enter only the tax withheld while you were a resident. If you did not earn any of the wages on the W-2 while a nonresident, report the total New Jersey tax withheld that is shown on the W-2.
- b. Line 56. Enter the amount of your prorated credit (if any).
- c. Line 57. Enter the amount of estimated payments to New Jersey for your period of residency. If you made estimated payments both as a resident and as a nonresident, enter on your part-year resident return the payment(s) made to meet the tax liability for your period of residency. Enter on the part-year nonresident return the payment(s) made to satisfy your tax liability during your non-residency period. Also enter any amounts paid to qualify for an extension of time to file.
- **13. New Jersey Earned Income Tax Credit (line 58).** You must file Form NJ-1040 to receive a New Jersey Earned Income Tax Credit. Most residents who are eligible **and** file for a federal earned income credit can also receive a New Jersey credit equal to 40% of the federal benefit. Calculate the amount with this formula:

Federal earned	l incoma cra	adit	× 4	_
reuerar earneu		-()	A 4	_

Part-year residents must prorate the credit based on the number of months you were a resident.

If the IRS is calculating your federal credit, fill in the first oval below line 58, Form NJ-1040. The IRS is expected to provide clarifying information to the Division of Taxation. Please allow at least 90 days for the Division to process the information, after which the New Jersey Earned Income Tax Credit will be issued as part of your Income Tax refund.



PRORATING THE NEW JERSEY EARNED INCOME TAX CREDIT:

Total New Jersey EITC Amount $\times \frac{\text{Months of NJ Residence}}{12} = \text{Prorated New Jersey EITC Amount}$

14. Wounded Warrior Caregivers Credit (line 62). This credit is for resident taxpayers who provided care for a relative who is a qualified armed services member and has gross income of \$100,000 or less (married, filing joint; head of household; qualifying widow(er)) or \$50,000 or less (single; married, filing separate).

A relative is a:

Spouse Parent Child Brother Sister
Grandparent Grandchild Aunt Uncle First Cousin
Nephew Niece Great-grandparent Great-grandchild

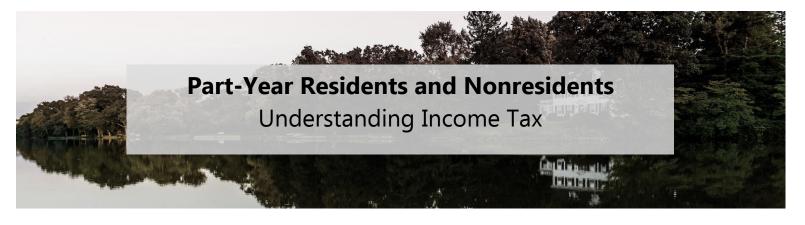
A qualifying armed services member is a person who:

- Was honorably discharged or released under honorable circumstances by the last day of the tax year;
 and
- Has a disability emerging from active U.S. military service in war or conflict on or after September 11, 2001; **and**
- Has either a 100% disability rating or receives individual employability benefits. (Those benefits result from one disability of at least 60% or two disabilities with a combined rating of at least 70%, and one of the two disabilities is at least 40%); **and**
- Lived with you in New Jersey for at least six months of the tax year.

Complete <u>Schedule NJ-WWC</u> to calculate the credit. If two or more people care for the same person, the credit is divided based on the share of total care expenses for the year. If you claim the credit, you will be asked to provide *copies* of the following:

- Your Schedule NJ-WWC;
- A letter from the Department of Veterans Affairs stating that the qualified armed service member has Individual Unemployability status; **and**
- Your most recent VA benefit letter.

Part-year residents must use their income for the entire year when determining eligibility.

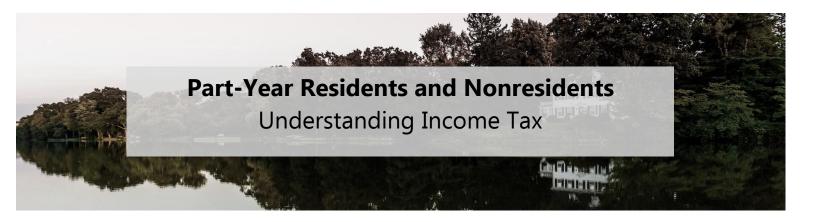


63.	ass-Through Business Alternative Income Tax Credit (See instructions)		Ш		
64.	Child and Dependent Care Credit (See instructions)	64.			
	Fill in if you are a CU couple claiming the Child and Dependent Care Credit				
65.	# of dependents age 5 or New Jersey Child Tax Credit (See instructions)	65]

- **15. Pass-Through Business Alternative Income Tax Credit (line 63).** For more information on the Pass-Through Business Alternative Income Tax Credit, visit our <u>website</u>.
- **16. Child and Dependent Care Credit (line 64).** This credit is available to certain taxpayers who have taxable income, shown on line 42, of \$150,000 or less, and paid someone to care for a qualifying person so they can work or look for work. To qualify, you must be allowed a federal credit for child and dependent care expenses. If your filing status is married, filing separately, you are only eligible for the credit if you meet certain exceptions for federal purposes.

			rksheet J bendent Care (Credit	
1.	•	it for child and dependent care	expenses	1	
2.	Enter your taxable inco line 42, NJ-1040. If bla	me from nk, enter zero2			
3.	Enter the percentage be	low based on the amount on lin	ne 2.		
	If line 2 is		Enter %		
	\$30,000 or less		50%		
	Over \$30,000	but not over \$60,000	40%		
	Over \$60,000	but not over \$90,000	30%		
	Over \$90,000	but not over \$120,000	20%		
	Over \$120,000	but not over \$150,000	10%		
	Over \$150,000		not eligible	3	%
4.		ercentage on line 3. Also enter year residents see page 44		4	
		(Keep f	or your records)		

PRORATING THE CREDI	T ALLOWANCE:	
Total Credit Amount ×	Months of NJ Residence 12	= Credit Amount



17. New Jersey Child Tax Credit (line 65). If your taxable income is \$80,000 or less, you are eligible for a credit for each dependent who is under the age of 6 on the last day of the tax year. If your filing status is married filing separately, you are not eligible for this credit.



2023 NJ-1040-HW

l		Prop	erty Tax Credit Ap rrior Caregivers (plication	lication
	our Social Security Number (required)	Last Name, First Name, Initial			nitial of each. Enter ONLY if different.)
	Spouse's/CU Partner's SSN (if filing jointly)	Home Address (Number and S	Street, including apartm	ent number)	
(County/Municipality Code (See Table page 52)	City, Town, Post Office		State	ZIP Code
	Single	Fill in [if your address ha	s changed	
3.	Married/CU Couple, filing joint return Married/CU Partner, filing separate return Head of Household Qualifying Widow(er)/Surviving CU Partner	NJ RESIDENCY STATUS 6. Part-year residents, provid you were a New Jersey re		84 84	D D/2 3
If yo	u can use Form NJ-1040-HW evenue are applying for the Property Tax Credegivers Credit, complete Part II. If you are t I — Property Tax Credit Indicate whether at any time during 2023 you principal residence (main home) on which were both a homeowner and a tenant during the property to the principal residence (main home) on which were both a homeowner and a tenant during the principal residence (main home) on which were both a homeowner and a tenant during the principal residence (main home) on which were both a homeowner and a tenant during the principal residence (main home).	dit, complete Part I. If y re applying for both cre ou either owned a home property taxes (or rent) w	ou are applying f edits, complete bo or rented a dwellin	or the Wooth Parts I	ounded Warrior and II. ersey as your
	Homeowner Tena	nt Both	N	lone (l	Fill in only one)
	If "Homeowner" or "Tenant" or "Both," you main home. If "None," you are not eligible			axes or ren	t paid on your
8a.	On December 31, 2023, were you age 65		rself E use/CU Partner	Yes Yes	No No
8b.	On December 31, 2023, were you blind or		rself [use/CU Partner [Yes Yes	No No
	If you (and your spouse/CU partner) answer for the Property Tax Credit.	ered "No," to all the ques	tions at lines 8a an	d 8b, you	are not eligible
9.	On October 1, 2023, did you own and occuyour main home?	ıpy a home in New Jerse	y as Yes		□ No

Part	t II — Wounded Warrior Caregivers Credit
10.	Did you provide care for a relative who was a qualifying armed services member (see instructions)?
	If "Yes," enter the name and Social Security number of the qualifying service member.
	Last Name, First Name, Middle Initial
	Enter your relationship to the qualifying service member.
	You may be asked to provide proof to substantiate your claim.
	If "No," you are not eligible for a Wounded Warrior Caregivers Credit. Do not complete Part II.
11a.	Enter the 2023 federal disability compensation of the armed services member
11b.	Maximum credit allowed 675
11c.	Enter the lesser of line 11a or line 11b11c.
12.	Were you the only caregiver for this service member during the tax year?
	If "No," enter your share (percentage) of the total care expenses for the year%
13.	If you answered "Yes" at line 12, enter the amount from line 11c.
	If you answered "No" at line 12, multiply the amount from

18. Property Tax Credit and Wounded Warrior Caregivers Credit Application Only. Certain eligible senior/disabled homeowners and tenants can use the Property Tax Credit Application (Form NJ-1040-HW) instead of Form NJ-1040 to apply for the Property Tax Credit and/or the Wounded Warrior Caregivers Credit only.

If you are applying for the Property Tax Credit, use Form NJ-1040-HW *only* if you:

- Were 65 or older or blind or disabled on December 31, 2023; and
- Had gross income from everywhere (in-state and out-of-state) for the entire year of \$20,000 or less (or \$10,000 or less if filing status is single or married/CU partner, filing separate return); **and**
- Have not filed and will not file a 2023 New Jersey resident Income Tax return; and
- Did not own your principal residence in New Jersey on October 1, 2023.

Do not file Form NJ-1040-HW if you owned and occupied your principal residence in New Jersey on October 1, 2023. Your property tax credit will be included with your ANCHOR benefit, provided you file a ANCHOR application.

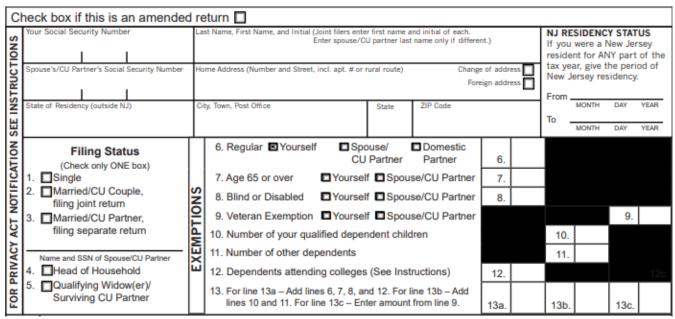
If you are applying for the Wounded Warrior Caregiver Credit, use Form NJ-1040HW *only* if you:

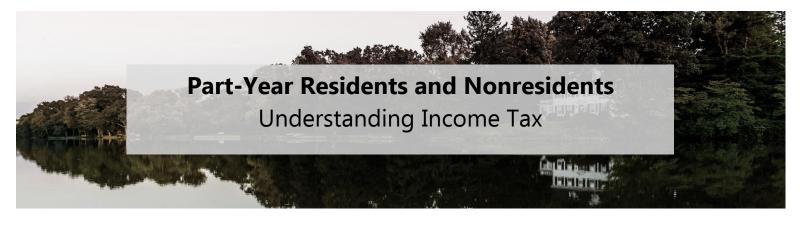
- Have not filed and will not file a 2023 New Jersey resident Income Tax return; and
- Had gross income from everywhere (in-state and out-of-state) for the entire year of \$20,000 or less (or \$10,000 or less if filing status is single or married/CU partner, filing separate return). Part-year residents must use income for the entire year.

Completing a Part-Year Nonresident Return

Important Points:

- Enter the dates you were a New Jersey resident above line 1;
- Report income, withholdings, and payments for the period of New Jersey nonresidency only;
- When reporting your income, fill out both Column A and Column B completely;
- Prorate exemptions, deductions, exclusions, and credits based on the nonresidency period;
- If you also complete a part-year resident return, allocate your income, withholdings, and payments between the part-year resident and part-year nonresident returns as appropriate.



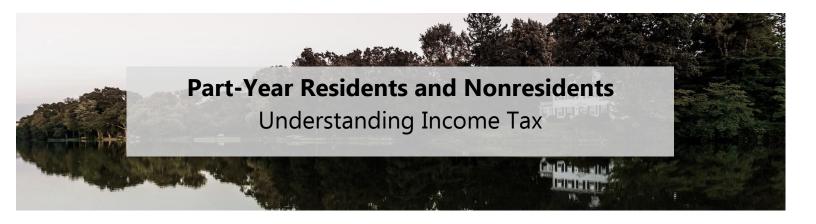


1. Residency Status.

- a. Complete the "State of Residency (outside NJ)" box below your Social Security number(s) at the top of the return. Indicate where you lived outside New Jersey while you were a nonresident. If you lived at more than one location, give the most recent.
- b. Show the beginning and ending dates of your New Jersey residency during the tax year.

When you file a part-year nonresident return, you are likely to be required to file a part-year resident return, too (see <u>page 5</u>). The part-year resident return covers the period of New Jersey residency shown above line 1, and the part-year nonresident return covers the portion of the year you were *not a resident of New Jersey*.

Driver's License # State	An	(Column A) nount of Gross Income (Everywhere)	e	Amo	(Column B) ount From New Jer Sources	sey
15. Wages, salaries, tips, and other employee compensation Check box if you completed lines 69 through 75	15.			15.		
16. Interest	16.			16.		
17. Dividends	17.			17.		
18. Net profits from business (Schedule NJ-BUS-1, Part I, line 4)	18.			18.		
19. Net gains or income from disposition of property (From line 68)	19.			19.		
Net gains or income from rents, royalties, patents, and copyrights (Schedule NJ-BUS-1, Part II, line 4)	20.			20.		
21. Net gambling winnings (See Instructions)	21.			21.		
22. Taxable pensions, annuities, and IRA distributions/withdrawals	22.					
23. Distributive Share of Partnership Income (Schedule NJ-BUS-1, Part III, line 4)	23.			23.		
24. Net pro rata share of S Corporation Income (Schedule NJ-BUS-1, Part IV, line 4)	24.			24.		
25. Alimony and separate maintenance payments received	25.					25
26. Other – State Nature and Source	26.			26.		
27. Total Income (Add lines 15 through 26)	27.			27.		
28a. Pension/Retirement Exclusion (See Instructions)	28a.					
28b. Other Retirement Income Exclusion (See Worksheet and Instructions)	28b.		28	Bb.		
28c. Total Exclusion Amount (Add line 28a and line 28b)	28c.		28	8c.		
29. Gross Income (Subtract line 28c from line 27)	29.		- 2	29.		



2. Income. Complete *both* Columns A and B, lines 15 to 27. *Include only income you received while a nonresident.* Report in Column A income from all sources (both inside and outside New Jersey) as if you were a resident; in Column B, show your income from New Jersey sources. Follow the nonresident return instructions for completing each line. For every entry in Column A, there should be an entry on the corresponding line in Column B. If none of the income in Column A is from New Jersey sources, enter "0" in Column B. In some circumstances, the amount in Column B can be more than the amount in Column A.

You do not need to report income on line 22, Column B since pension, annuity, and IRA income is not taxable for nonresidents.

No entry is needed on line 25, Column B, since alimony and separate maintenance payments received are not taxable for nonresidents.

Pennsylvania residents are not subject to Income Tax on wages they earn in New Jersey. Therefore, if you are a Pennsylvania resident, you must report **all** your wages in Column A, and enter "0" in Column B.

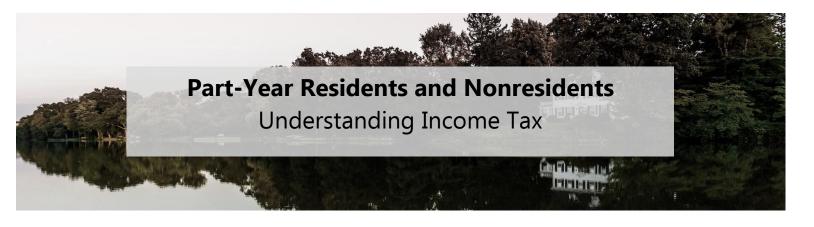
Pennsylvania residents are subject to New Jersey tax on other types of income from New Jersey sources.

3. Pension and Other Retirement Income Exclusion.

a. *Pension Exclusion (line 28a).* Column A: If you were a New Jersey nonresident for only part of the year and had total income from all sources for the entire year of \$150,000 or less, you may qualify for a pension exclusion if you meet the other eligibility requirements. If your income for the entire year is \$0 through \$100,000, prorate the maximum exclusion amount from **this chart** based on the number of months you were a nonresident. Time spent as a nonresident for 15 days or more equals one full month. (See the description of how to **prorate** the pension exclusion amount on page 9).

Column B: Do not make an entry in Column B since pension, annuity, and IRA income is not taxable for nonresidents.

- b. Other Retirement Income Exclusion (line 28b, Columns A and B). If you (and/or your spouse, if filing jointly) were 62 or older on the last day of the year, you may qualify to exclude other income on line 28b. There are two parts to the total exclusion. Part I is the unclaimed portion of your prorated pension exclusion, and Part II is a special exclusion for taxpayers who cannot receive Social Security or Railroad Retirement benefits. Do not complete Worksheet D in the NJ-1040NR instructions to calculate the total exclusion amount you are eligible to claim. Instead, use Worksheet E in the NJ-1040NR instructions to calculate your total exclusion as follows:
 - Part I. Total the earned income (wages, net profits from business, partnership income, and S
 corporation income) you received from all sources for the *entire* year.



If your earned income for the entire year was \$3,000 or less, and you did not use the entire prorated pension exclusion on line 28a, you may use the unclaimed pension exclusion on line 28b if your total income from all sources for the entire year – before subtracting a pension exclusion – was \$150,000 or less;

• Part II. If you cannot receive Social Security or Railroad Retirement benefits, but would have been eligible for benefits had you fully participated in either program, you also may be eligible for an additional exclusion, whether or not you used all of your prorated pension exclusion on line 28a.

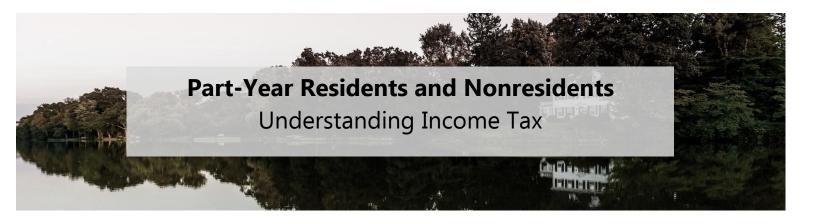
When you and your spouse file a joint return, and only one of you is 62 or older, you can claim the full amount of the prorated exclusion. However, only the income of the one who is 62 or older can be excluded.

More Information. For information on calculating your partnership and S corporation income, see <u>Income From Partnerships</u> and <u>Income From S Corporations</u>. For more information on pension, annuity, and IRA withdrawal income and the New Jersey income exclusions, see <u>Retirement Income</u>.

30. Total Exemption Amount (See Instructions)	30.			
31. Medical Expenses (See Worksheet and Instructions)	31.			
32. Alimony and separate maintenance payments	32.			
33. Qualified Conservation Contribution	33.			
34. Health Enterprise Zone Deduction	34.			
35. Alternative Business Calculation Adjustment (Schedule NJ-BUS-2, line 11)	35.			
36. Organ/Bone Marrow Donation Deduction (See instructions)	36.			
37a. NJBEST Deduction	37a.			
37b. NJCLASS Deduction	37b.			
37c. NJ Higher Education Tuition Deduction	37c.			
38. Total Exemptions and Deductions (Add lines 30 through 37c)	38.			
39. Taxable Income (Subtract line 38 from line 29, column A)	39.			
I '			1	

4. Exemptions.

You must prorate the total exemption allowance amount (line 13) based on the number of months you were a New Jersey nonresident. For this calculation, 15 days or more equals a full month. Use the formula below, and then enter the prorated exemption amount on line 30.



PRORATING THE EXEMPTION ALLOWANCE:

Line 13 × Months of NJ Nonresidence = Prorated Exemption Amount

5. Deductions.

- a. *Medical Expenses (line 31).* You can deduct certain medical expenses for which you were not reimbursed by insurance or any other plan, qualified Archer medical savings account (MSA) contributions, and health insurance costs of the self-employed. Complete Worksheet F in the <u>nonresident return instructions</u> to calculate your deduction for medical expenses. Include only those expenses that you incurred and paid while you were a nonresident.
- b. *Alimony and Separate Maintenance Payments (line 32).* You can deduct alimony and separate maintenance payments paid while a nonresident. Child support payments **are not** deductible.
- c. *Qualified Conservation Contribution (line 33).* You can deduct the amount of any qualified conservation contribution you made while a nonresident.
- d. *Health Enterprise Zone (line 34).* If you provide primary care services in a qualified medical or dental practice you own, that is located in or within five miles of a designated Health Enterprise Zone (HEZ), you may be able to deduct a percentage of the net income from that practice. For information on the HEZ deduction, see Health Enterprise Zones.
- e. Alternative Business Calculation Adjustment (line 35). If you report net business loss(es) on Schedule NJ-BUS-1, you may be eligible for an income adjustment based on the losses you incurred while a nonresident. Complete Schedule NJ-BUS-2 to calculate the amount of your adjustment.
- f. Organ/Bone Marrow Donation Deduction (line 36). If you donated an organ or bone marrow to another person for transplantation, you may be eligible to deduct up to \$10,000 of unreimbursed expenses for travel, lodging, and lost wages as a result of your donation. The deductions must be claimed in the year in which the expenses occurred, and you may be asked to provide <u>supporting documentation</u>.
- g. New Jersey College Affordability Deductions (line 37a-c). If your gross income was \$200,000 or less, you may be eligible to deduct certain educational expenses. You can deduct up to \$10,000 of contributions made during the year into and NJBEST account on line 37a; deduct up to \$2,500 of principal and interest paid during the year on an NJCLASS loan on line 37b; or if you, your spouse, or your dependent enroll in

or attend a New Jersey institution of higher education, you can deduct up to \$10,000 for tuition costs paid during the year on line 37c.

You cannot take deductions for adjustments listed on your federal return, such as employee business expenses or IRA and Keogh Plan contributions.

42. New Jersey Tax (Multiply amount from line 40x% from line 41)		
43. Sheltered Workshop Tax Credit (Enclose GIT-317. See Instructions)	43.	

6. Sheltered Workshop Tax Credit (line 43). Enter the amount of your Sheltered Workshop Tax Credit from Part IV, line 12 of Form GIT-317. Allocate the total amount of the credit between your part-year resident and part-year nonresident returns if appropriate.

44. Gold Star Family Counseling Credit (See Instructions)	44.	

7. Gold Star Family Counseling Credit (line 44). Enter the amount of credit you can take if you are a mental health care professional who provided counseling through the Gold Star Family Counseling program. If you were a part-year nonresident, include only the hours of counseling provided through the program while you were a New Jersey nonresident.

45. Credit for Employer of Organ/Bone Marrow Donor (See instructions)	45.	

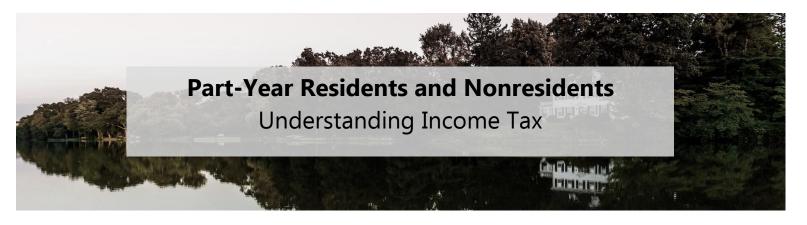
8. Credit for Employer of Organ/Bone Marrow Donor (line 45). If you are an employer who provided paid time off to an employee who missed work to donate an organ or bone marrow for transplantation, you may be able to claim a credit. The paid time off must have been in addition to any other paid time off for which the employee was entitled. If you qualify, you can take a credit of 25% of the employee's salary for up to 30 days of time missed from work for each donation.

You may be asked to **provide documentation** indicating that you are eligible to claim the credit, such as employee pay statements and a letter from a physician.

50. Total New Jersey Income Tax Withheld (From enclosed Forms W-2 and 1099) (Part-year nonresidents see instructions)	50.		T.,			
51. New Jersey Estimated Tax Payments/Credit from 2022 return (Sellers of NJ real property see instructions)	51.		• P	Also enter on line 51: Payments made in connection with sale of NJ		
52. Tax paid on your behalf by Partnership(s)	52.		property Payments by S corpo-			
53. Excess NJ UI/WF/SWF Withheld (Enclose Form NJ-2450)	53.			ition for nonresident hareholder	I	
54. Excess NJ Disability Insurance Withheld (Enclose Form NJ-2450)	54.					
55. Excess NJ Family Leave Insurance Withheld (Enclose Form NJ-2450)	55.					
56. Pass-Through Business Alternative Income Tax Credit (See instructions)	56.					
57. Total Payments/Credits (Add lines 50 through 56)	57.					

9. Tax Withheld/Estimated Payments.

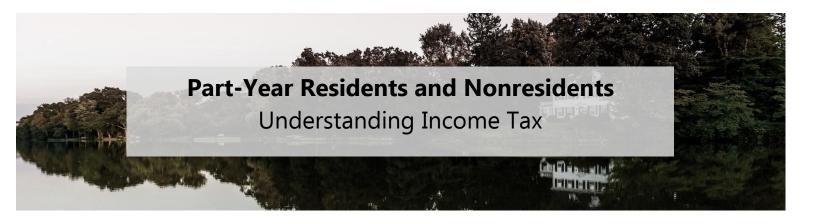
- a. Line 50. Enter the amount of New Jersey Income Tax withheld from wages you earned or other payments you received while you were a nonresident. If you sold real estate in New Jersey, **do not** include the 2% nonresident seller's tax payment on this line. If your employer reported your total earnings on one W-2, allocate the New Jersey Income Tax withheld between your part-year resident and part-year nonresident returns if you earned wages from New Jersey as a both resident and as a nonresident.
- b. Line 51. Enter the amount of estimated payments made to New Jersey while you were a nonresident. If you sold real estate in New Jersey, include the 2% nonresident seller's tax payment on this line. If you made estimated payments both as a resident and as a nonresident, enter on your part-year resident return the payment(s) made to meet the tax liability for your period of New Jersey residency. Enter on the part-year nonresident return the payment(s) made to satisfy your tax liability during the part of the year you were a nonresident. Also, enter any amounts paid to qualify for an extension of time to file.
- **10. Pass-Through Business Alternative Income Tax Credit (line 56).** For more information on the Pass-Through Business Alternative Income Tax Credit, visit our <u>website</u>.



Part II	Part II Allocation of Wage and Salary Income Earned Partly Inside and Outside New Jersey See instructions if compensation depends entirely on volunt transacted or if other basis of allocation is used. Note: Residents of states that impose a convenience of the instructions before completing Part II.				
69. Amount re	oorted on line 15 in column A required to	be allocated	69.		
70. Total days	70.				
71. Deduct nonworking days (Sundays, Saturdays, holidays, sick leave, vacation, etc.)					
72. Total days worked in taxable year (subtract line 71 from line 70)					
73. Deduct days worked outside New Jersey					
74. Days worked in New Jersey (subtract line 73 from line 72)					
75. Allocation				de this amount on 5, col. B)	

11. Allocation of Wage and Salary Income Earned Partly Inside and Outside New Jersey. Complete this section only when you have wage/salary income earned partly inside and partly outside New Jersey, and you cannot readily determine the amount of wage/salary income from New Jersey. For purposes of completing this section, "total days" on line 70 means the number of days covered by your part-year return. Complete lines 69 to 75 accordingly.

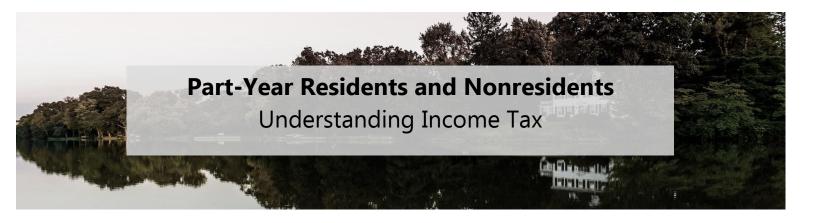
Check the box at line 15 if you complete this section.



Sample Returns

Part-Year Resident/Part-Year Nonresident

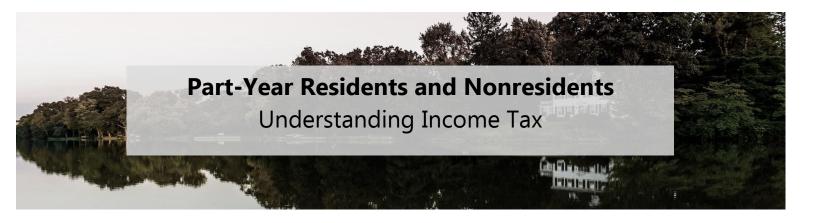
- Arnav and Kashvi Patel are married and they file jointly. They have two dependents: their 1-year-old child and Arnav's 67-year-old mother;
- The family moved to New Jersey on April 1. They rented an apartment for \$1,800 a month;
- Arnav worked for the same New Jersey employer all year; wages for the year were \$97,000;
- Kashvi's wages for a part-time job in New Jersey from September to December were \$6,000;
- The couple received \$1,400 in interest on their joint accounts and \$480 in dividends for the year;
- On March 1, they sold 200 shares of jointly held stock in ABC Corp. for \$3,500. They purchased the stock in 2019 for \$2,800;
- They won \$75 in the New York Lottery on February 3 and \$62 in the New Jersey Lottery on July 29;
- New Jersey Income Tax withheld: \$1,983 for Arnav and \$104 for Kashvi;
- They made four estimated tax payments of \$50 each to New Jersey on April 15, June 15, September 15, and January 15 of the following year.



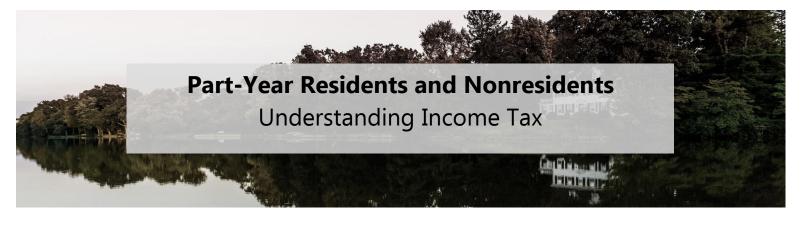
NJ-1040NR 040NW01230 New Jersey Income T		eturn o	Other 1	Tax Year	ry 1, 2023 – December 3 Beginning Ending	_, 2023
5-N		Check box conf	if appl	ication for number	federal extension is attache	d or enter
Check box if this is an amended return [Your Social Security humber Last Name, First Name, and Initial (Joint flers enter fire)	eman le	and initial of each		20	NJ RESIDENCY STATU	10
	ar tree has	I name only if differen	of addre		If you were a New Jers resident for ANY part of tax year, give the perio	of the
000 99 9917 123 Main St.	State		ign addre		New Jersey residency. From 04/01/2023	YEAR
Montclair	IJ	07043			To 12/31/2023	YEAR
Filing Status (Check only ONE box) 1. Single 2. Married/CU Couple, filing joint return 3. Married/CU Partner, filing separate return 6. Regular 7. Age 65 or over 7. Age 65 or over 9. Veteran Exemption 10. Number of your qualified depends	artner	Domestic Partner	6.	2		
1. Single 7. Age 65 or over		ise/CU Partner	7.			
filing joint return 8. Blind or Disabled Yourself		ise/CU Partner	8.			- 50
2. Married/CU Couple, filing joint return 3. Married/CU Partner, filing separate return 2. Married/CU Partner, filing separate return 3. Married/CU Partner, filing separate return 3. Married/CU Partner, filing separate return 4. Number of your qualified depends		Para commence and a second			10. 1	
Name and SSN of Spouse/CU Partner 11. Number of other dependents	SVODICE	506.52			11. 1	
Name and SSN of SpouserCO Partner 4.	tee Ins	tructions)	12.			120
Name and SSN of Spouse/CU Partner 4. Head of Household 5. Qualifying Widow(er)/ Surviving CU Partner 11. Number of other dependents 12. Dependents attending colleges (5) 13. For line 13a – Add lines 6,7, 8, and lines 10 and 11. For line 13c – Enter			13a.	2	13b 2 13c.	
14. Dependent's Last Name, First Name, Middle Initial		dent's Social Se	-			905
Patel, Kiran B Patel, Lakshmi c	00	0 / 82	/_ 40	321	2022	- 500
b Patel, Lakshmi	00	0 / 77	1_ 57	718	1956	
			L	10	30	
o <u>z</u>		1	1		22	
GUBERNATORIAL Do you want to designate \$1 of your taxes for this fund? I joint		Yes N			u check the "Yes" box(es	
ELECTIONS FUND return, does your spouse/CU partner want to designate \$1?		Yes N		und.	rease your tax or reduce	your
Driver's License ≠ State	,	(Column A Amount of Gross (Everywhere	Income		(Column B) Amount From New Jer Sources	sey
15. Wages, salaries, tips, and other employee compensation Check box if you completed lines 69 through 75	. 15	24,	250	1	24,250	
16. Interest	. 16	5.	350	<u></u>	6.	
17. Dividends	. 17	7.	120	1	7.	
18. Net profits from business (Schedule NJ-BUS-1, Part I, line 4)	. 18	3.		1	18.	33
19. Net gains or income from disposition of property (From line 68)	_	9.	700	1	9.	
Net gains or income from rents, royalties, patents, and copyrights (Schedule NJ-BUS-1, Part II, line 4)		1.		2	20.	
21. Net gambling wnnings (See Instructions)	. 21	I.		2	21.	
22. Taxable pensions, annuities, and IRA distributions/withdrawais	. 22	2.		83	199	22
Distributive Share of Partnership Income (Schedule NJ-BUS-1, Part III, line 4)	. 23	3.		2	23.	22
24. Net pro rata share of S Corporation Income (Schedule NJ-BUS-1, Part IV, line 4)	. 24	1.	88	2	24.	á
25. Allmony and separate maintenance payments received	. 25	5.				25.
26. Other – State Nature and Source	. 26	5.		2	26.	
27. Total Income (Add lines 15 through 26)	. 27	7. 25,4	120	2	24,250	

Part-Year Residents and Nonresidents Understanding Income Tax

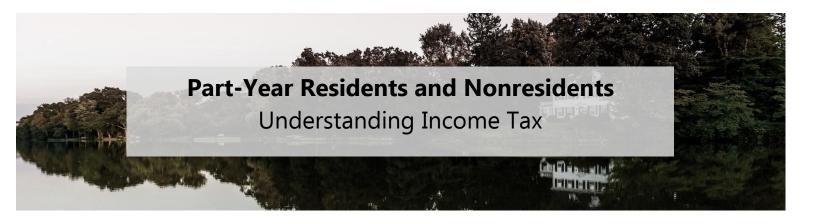
				N.	J-1040NR (2023) Pag	e 2		
Name(s) as shown on Form NJ-1040NR Patel Amav & Kashvi					r Social Security Num DO 99 99	ber 85		
28a. Pension/Retirement Exclusion (See Instructions)	28a.							
28b. Other Retirement Income Exclusion (See Worksheet and Instructions)	28b.			28b.				
28c. Total Exclusion Amount (Add line 28a and line 28b)	28c.			28c.				
29. Gross Income (Subtract line 28c from line 27)	29.	25,420		29.	24,250			
30. Total Exemption Amount (See Instructions)	30.	1,250				\neg		
31. Medical Expenses (See Worksheet and Instructions)	31.							
32. Alimony and separate maintenance payments	32.							
33. Qualified Conservation Contribution	33.							
34. Health Enterprise Zone Deduction	34.							
35. Alternative Business Calculation Adjustment (Schedule NJ-BUS-2, line 11)	35.							
	36.							
36. Organ/Bone Marrow Donation Deduction (See Instructions)								
37a. NJBEST Deduction	37a.							
37b. NJCLASS Deduction	37b.							
37c. NJ Higher Education Tuition Deduction	37c.	1,250	-	4				
38. Total Exemptions and Deductions (Add lines 30 through 37c)	38.	24,170						
39. Taxable Income (Subtract line 38 from line 29, column A)	39.	353						
40. Tax on amount on line 39 (From Tax Table)	40.	303						
A. (line 29)						_		
42. New Jersey Tax (Multiply amount from line 40353.00 x95.40% from	m line 4	1)		42.	337			
43. Sheltered Workshop Tax Credit (Enclose GIT-317. See Instructions)				43.		_		
44. Gold Star Family Counseling Credit (See Instructions)				44.				
45. Credit for Employer of Organ/Bone Marrow Donor (See Instructions)				45.		_		
46. Total Credits (Add lines 43, 44, and 45)				46.		_		
47. Balance of Tax After Credits (Subtract line 46 from line 42)				47.	337			
48. Interest on Underpayment of Estimated Tax. Check box ☐ If Form NJ-2210NR	ls encl	osed		48.				
49. Total Tax Due (Add line 47 and line 48)				49.	337			
50. Total New Jersey Income Tax Withheld (From enclosed Forms W-2 and 1099) (Part-year nonresidents see instructions)	50.	496						
51. New Jersey Estimated Tax Payments/Credit from 2022 return (Sellers of NJ real property see Instructions)	51.	50		• P	enter on line 51: syments made in oc- sotion with sale of N			
52. Tax paid on your behalf by Partnership(s)	52.			neotion with sale of NJ real property - Payments by 8 oorpo-				
53. Excess NJ UI/WF/SWF Withheld (Enclose Form NJ-2450)	53.			ration for nonresident shareholder				
54. Excess NJ Disability Insurance Withheld (Enclose Form NJ-2450)	54.	0	00	1				
55. Excess NJ Family Leave Insurance Withheld (Enclose Form NJ-2450)	55.			7				
56. Pass-Through Business Alternative Income Tax Credit (See Instructions)	56.							



	ne(s) as shown on Form NJ-1040NR el Amav & Kashvi						You	r Social Security N	
57	. Total Payments/Credits (Add lines 50 through	n 58)					57.	54	46
58	If line 57 is less than line 49, you have tax du Subtract line 57 from line 49 and enter the ar If you owe tax, you can still make a donation	mount you o					58.		
59	. If line 57 is more than line 49, you have an ov Subtract line 49 from line 57 and enter the ov						59.	20	9
60	. Amount from line 59 you want to credit to you	ır 2024 tax					60.		
61	. Amount you want to credit to:						NOTE An en	: try on lines 60 thr	rough
	(A) N.J. Endangered Wildlife Fund	\$10	□ \$20,	Other	61A.	8	61F w	ill reduce your ta	refund
	(B) N.J. Children's Trust Fund	\$10	\$20 ,	Other	61B.				
	(C) N.J. Vietnam Veterans' Memorial Fund	□\$10	\$20 ,	Other	61C.		26		
	(D) N.J. Breast Cancer Research Fund	□\$10	\$20 ,	Other	61D.				
	(E) U.S.S. N.J. Educational Museum Fund	□ \$10.	\$20 ,	Other	61E.	*			
	(F) Designated Contribution	\$10.	\$20 ,	Other	61F.	10	93		
62	. Total Adjustments to Tax Due/Overpayment (Add lines 60	through	61F)			62.		
63	. Balance due (If line 58 is more than zero, add	d line 58 and	d line 62)				63.		581. 8
	. Refund amount (If line 59 is more than zero,						500	20	09
Ш	Under penalties of perjury, I declare that I have examined this knowledge and belief, it is true, correct, and complete. If prepwhich the preparer has any knowledge.		on other than	i taxpayer, this o	declaration is	based on all information o	full. W number order Stat Divi	mount on line 63 frite Social Securi er(s) on check or and make payabl e of New Jersey- sion of Taxation	ity money e to: - TGI
ERE	Your Signature Da If enclosing copy of death certificate for deceased ta					ing jointly, BOTH must sig	PO	enue Processing Box 244	
Z	I authorize the Division of Taxation to discuss my ret			Charles and the same of the sa	teri Carana		00 000000	nton, NJ 08646-02 an also make a pa	
SIGNHER								website: nj.gov/	
	Paid Preparer's Signature				Federal Ideni	tification Number	**		
20 /40	Firm's Name			Firm's F	ederal Emplo	yerldentification Number	13		



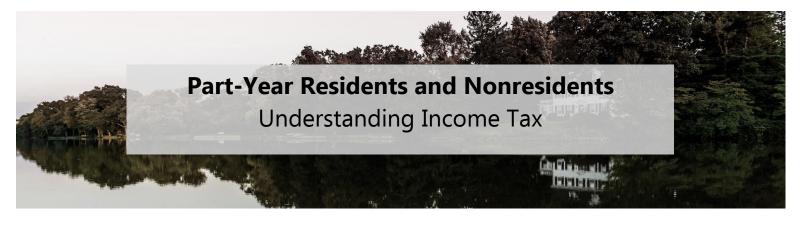
Net Gains or Income From Disposition of Property List the net gains or income, less net loss, derived from the sale, exchange, or other disposition of property including real or personal whether tangible or intangible as reported on federal Schedule D.								orted
(a) Kind of property and description	(b) Date aquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Gross sales	(e) Cost or o basis as adju (see instructi and expense of		ted ns)	(f) Gain or (los (d less e)	ss)
65. 200 shares ABC Corp.	2/15/2019	3/1/2023	3,500		2,800		700	
66. Capital Gains Distribution						66.		
67. Other Net Gains						67.		
68. Net Gains (Add lines 65, 66, and 67) (Enter here and o	n line 19) (If loss	s, enter zero)			68.	700	
Allocation of Wage and Salary Income Earned Partly Inside and Outside New Jersey See instructions if compensation depends entirely on volume of business transacted or if other basis of allocation is used. Note: Residents of states that impose a convenience of the employer test, see instructions before completing Part II.								
69. Amount reported on line 15 in colum	nn A required to be	allocated				69.		
70. Total days in taxable year						70.		
71. Deduct nonworking days (Sundays,	Saturdays, holiday	s, sick leave, va	cation, etc.)			71.		
72. Total days worked in taxable year (s	ubtract line 71 from	line 70)				72.		
73. Deduct days worked outside New Jo	ersey					73.		
74. Days worked in New Jersey (subtra	ct line 73 from line 7	72)				74.		
	Line 74) x (Ente		= (Salary				de this amount on 5, col. B)	
Allocation of Business Income to New Jersey	(S	Gee instructions	if other than Form	ula Ba	sis of allocation is	s used	l.)	
Business Allocation Percentage (From S								
Enter below the line number and amour allocation percentage to determine amo				n A tha	t is required to be	alloca	ated and multiply l	by
From Line No\$		х	% = \$					
From Line No \$.		_x	% = \$					
From Line No\$		х	% = \$					



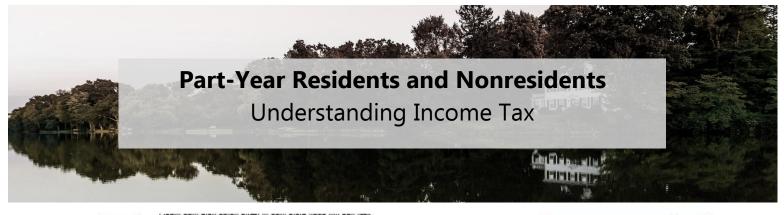
040HP01230			New Jer	NJ-1040 sey Resident Tax Return
SR.	Affix preprinted label belo			
Your Social Security Number (required)	Last Name, First Name, Initial (Joint Filer		and middle initi	al of each. Enter
0 0 0 9 9 9 9 8 5	Patel, Aarnav & Kashvi	ouse sico partilei	s last fiallie Of	(LT il dillerent.)
Spouse's/CU Partner's SSN (if filing jointly)	Home Address (Number and Street, inc	luding apartmen	t number)	
0 0 0 9 9 9 9 1 7	123 Main St			
County/Municipality Code (See Table page 52)	City, Town, Post Office		State	ZIP Code
0 7 1 3	Montclair		NJ	07043
Fill in if federal extension filed. Fill in	if the address above is a foreign addre	ess. Fill in	if your ad	dress has changed.
Part-year residents, provide months/days you were a Ne	w Jorsey resident during 2023:	Finantina Ele		
From: 0/1 4/1 /0 10 / 2 3 To: 1/1 2/1		Fiscal year file Enter month of	-	2024
Filling Status Fill in only one. 1. Single 2. Married/CU Couple, filing joint return 3. Married/CU Partner, filing separate ret 4. Head of Household 5. Qualifying Widow(er)/Surviving CU Par Indicate the year of your spouse's/CU	Enter spouse's/CU partner's	5 SSN 2022	3	
Fill in the ovals that apply. You must enter a total in the b	oxes to the right and complete the calcul	ation.		
8. Regular Self	Spouse/ Domesti	ic	x \$1,000 =	2000.
7. Senior 65+ (Born Self	Spouse/CU Partner		x \$1,000 =	
in 1958 or earlier)	opouseroo i ainiei		x \$1,000 =	
8. Blind/Disabled Self	Spouse/CU Partner			
9. Veteran Self	Spouse/CU Partner		x \$6,000 =	1500
10. Qualified Dependent Children		1	x \$1,500 =	
11. Other Dependents		1	x \$1,500 =	1500
12. Dependents Attending Colleges (See instructions)			x \$1,000 =	
13. Total Exemption Amount (Add totals from the lines at	6 through 12)	13.	5 0	0 0 0
14. Dependent Information. Provide the following informa-	-			No Health
Last Name, First Name, Middle Initial Patel, Kiran	O 0 0 8 2 4 6 2	2 1	irth Year 2 0 2	Insurance 2
Patel, Lakshmi				=
	Δ 0 0 7 7 5 7 1	1 8	1 9 5	
		44 !	-	\vdash
Division 1 2 3	4 5 6		7	

Part-Year Residents and Nonresidents Understanding Income Tax

					Y	our 8c	cial 8	ecurity			.99-9	985
1	Patel Ar			orm NJ-10	140							
	Wages, salaries, tips, and other employee compensation (State wages from				-							
	Box 16 of enclosed W-2(s)) (See instructions)	15.		Ц_	4	7	8	7	5	0	0	0
16a.	Taxable interest income (Enclose federal Schedule B if over \$1,500) (See instructions)	185			Ш		1	0	5	0	0	0
16b.	Tax-exempt interest income (Enclose schedule)	IUa.	ī	тт	Ť	T	T	T	т	т		
	(See instructions) Do not include on line 16a			_	**	H	一			0	0	0
	Dividends	17.		<u> —</u>	4	닏	닏	3	Б	U	U	U
18.	Net profits from business (Schedule NJ-BUS-1, Part I, line 4) (Enclose federal Schedule C)	18.										
19.	Net gains or income from disposition of property (Schedule NJ-DOP, line 4)			耳	L		Ц					
20a.	Taxable pension, annuity, and IRA distributions/withdrawals (See instructions)	20a.		ш		Ш	Ш	Ш	Ш	Ш	Ш	Ш
	Excludable pension, annuity, and IRA distributions/withdrawals (See instr) 20b. Distributive Share of Partnership Income (Schedule NJ-BUS-1, Part II, line 4)			Д	ļ	Į	耳	匚	I	ᆜ		
	(Enclose Schedule NJK-1 or federal Schedule K-1)			Щ		Ш	Ш	Ш	Ш	Ш	Ш	Ш
22.	Net pro rata share of S Corporation Income (Schedule NJ-BUS-1, Part III, line (Enclose Schedule NJ-K-1 or federal Schedule K-1)			П	Ш		П	П		П		П
23.	Net gains or income from rents, royalties, patents, and copyrights			Ħ		П	П	П	П	П	П	一
	(Schedule NJ-BUS-1, Part IV, line 4)	23.		+	₩	H	H	H	H	H	H	H
24.	Net gambling winnings (See instructions)	24.		ㅗ	╄	닏	Н	닏	Щ	Ц	Ц	Щ
25.	Alimony and separate maintenance payments received	25.		Н-	▙	Н	Н	Н	Н	Н		Н
26.	Other (Enclose documents) (See instructions)	26.	_	╄	┡	H	Н	닏	Н	Н	닏	Н
27.	Total Income (Add lines 15, 16a, 17 through 20a, and 21 through 26)		ш	Ц_	<u> </u>	8	0	1	6	0	0	0
28a.	Pension/Retirement Exclusion (See instructions)	L	L	ш	┸	L	L	L	J			
28b.	Other Retirement Income Exclusion (See Worksheet D and instructions pages 20–21)		г	ш	т	т	Ш	т	1			
					T	Н	Ħ	Ħ	Н			
28c. 29.	Total Exclusion Amount (Add lines 28a and 28b)			28c.		H	H	H	H	H		H
	(See instructions)).	ш	ш	4	8	0	1	6	0	0	0
30.	Exemption Amount (Enter amount from line 13. Part-year residents see instr.)			30.	F	H	3	7	5	0	0	0
31.	Medical Expenses (See Worksheet F and instructions)			31.	⊨	Н	H	닏	닏	H	Н	닏
32.	Alimony and separate maintenance payments (See instructions)			32.	L	Ш	Ш	Ш	Ш	Ц	Ш	Ш
33.	Qualified Conservation Contribution			33.		Н	Ц	Н	Н	Н		
34.	Health Enterprise Zone Deduction			34.	Ь	Ш	Ш	Ш	Ш	Ш	Ш	ш
35.	Alternative Business Calculation Adjustment (Schedule NJ-BUS-2, line 11)			35.	느		Ц	Ц	Ц	Ц	Ц	Ц
36.	Organ/Bone Marrow Donation Deduction (See instructions)			36.		Ш	Ш	Ш	Ш	Ш	Ш	Ш
37a.	NJBEST Deduction b. NJCLASS Deduction			c. NJ High Tuition								
38.	Total Exemptions and Deductions (Add lines 30 through 37c)		38			Ш	3	7	5	0	0	0
39.	Taxable Income (Subtract line 38 from line 29)38).		Щ		7	6	4	1	0	0	0
40a.	Total Property Taxes (18% of Rent) Paid (See instructions page 25)40a.	Ц			2	9	1	6	0	0		
	Indicate your residency status during 2023 (fill in only one oval)	Hor	neow	mer	X	Ter	nant				Both	
41	Property Tax Deduction (From Worksheet H) (See instructions)			4	1.		2	9	1	6	0	0
	_										_	



		Īv	nur Sr	rcial 3	ecurity	e Nium	her		
	0.40HP0.32.30 Name(s) as shown on Form NJ-10		001 01		ccurry	, 144111		99-9	985
Pa	ge 3 Patel Amav & Kashvi								
42.	New Jersey Taxable Income (Subtract line 41 from line 39)	F	7	3	4	9	4	0	0
43.	Tax on amount on line 42 (Tax Table page 54)		ш	1	4	1	7	0	0
44.	Credit For Income Taxes Paid to Other Jurisdictions								
	(Enclose Schedule NJ-COJ) (See instructions)			Ш	Ш	ш	Ц	닏	ш
45.	Balance of Tax (Subtract line 44 from line 43)45.	Ļ	Н	1	4	1	7	0	0
46.	Sheltered Workshop Tax Credit		ш	ш		ш	Ш		
47.	Gold Star Family Counseling Credit (See instructions)47.				Ц	Ц	Ц		
48.	Credit for Employer of Organ/Bone Marrow Donor (See instructions)48.	⊨	H	H	H	Н	Н	님	H
	Total Credits (Add lines 46 through 48)49.	느	ш	Ш	Ш	Ш	Ш	Ш	Ш
50.	Balance of Tax After Credits (Subtract line 49 from line 45) If zero or less, make no entry	Ш		1	4	1	7	0	0
51.	Use Tax Due on Internet, Mail-Order, or Other Out-of-State Purchases			Н		Ε	0		0
	(See instructions) If no Use Tax, enter 0.0051.		Н	Н	Щ	Н	U	0	U
52.	Interest on Underpayment of Estimated Tax	ш	Ш	Ш		Ш	Ш	Ш	
	Fill in if Form NJ-2210 is enclosed								
	Fill in oval if anyone in your tax household does not currently have health insurance. (Enclose NJ-EZ Enroll form)(See instructions)								
53b.	If you indicated at line 53a that someone in your tax household does not have health insurance, fill in oval to allow Get Covered New Jersey to help you obtain coverage								
				П		П	П		
530.	Shared Responsibility Payment (See instructions)							_	
				1	4	4	7	ο	0
	Total Tax Due (Add lines 50 through 53c)	-	H	H		H	_	_	
00.	(Enclose Forms W-2 and 1099)(Part-year residents, see instr.)		ш	1	5	9	1	0	0
56.	Property Tax Credit (See instructions page 25)			56					
57.	New Jersey Estimated Tax Payments/Credit from 2022 tax return			Ш	1	5	0	0	0
				П		П			
58.	New Jersey Earned Income Tax Credit (See instructions)	58		_				_	
59.	Excess New Jersey UI/WF/SWF Withheld (Enclose Form NJ-2450) (See instructions)	59		Ш		Ш	Ш	Ш	
	Excess New Jersey Disability Insurance Withheld (Enclose Form NJ-2450) (See instructions)						0	0	0
61.	Excess New Jersey Family Leave Insurance Withheld (Enclose Form NJ-2450) (See instructions)	61							
62.	Wounded Warrior Caregivers Credit (See instructions)	62		닖	H	Н	Н	님	H
63.	Pass-Through Business Alternative Income Tax Credit (See instructions)		Н	H	H	H	H	H	H
64.	Child and Dependent Care Credit (See instructions)	64.		ш	ш	ш	Ш	ш	ш
	Fill in if you are a CU couple claiming the Child and Dependent Care Credit							$\overline{}$	
65.	New Jersey Child Tax Credit (See instructions)younger on 12/31/23	65.		Ш	Ш	Ш	Ш	Ш	
66	Total Withholdings, Credits, and Payments (Add lines 55 through 65)			1	7	4	1	0	0
	If line 88 is less than line 54, you have tax due.							H	
	Subtract line 68 from line 54 and enter the amount you owe			Ш		ш	Ш	Ш	
ı	If you owe tax, you can still make a donation on lines 70 through 77.								
	_							_	



	040HP04230				Your Bocal	Security.		000	99-9	985
Pa	ge 4		Patel Amay & Kash							
68.	If the total on line 66 is more than line 54, y Subtract line 54 from line 66 and enter the		AUG8/		П	3	2	4	0	0
09. 70	Amount from line 08 you want to credit to y Contribution to N.J.	our 2024 lax	09.		ш	Щ	Ц	Ц		Ц
	Endangered Wildlife Fund	\$10 \$20	Other		70.		Ш	Ш		
71.	Contribution to N.J. Children's Trust Fund To Prevent Child Abuse	□\$10 □\$20	Other		71					
72.	Contribution to N.J. Vietnam Veterans' Memorial Fund									
73.	Contribution to N.J. Breast Cancer Research Fund	\$10 \$20			73					
74.	Contribution to U.S.S. New Jersey Educational Museum Fund				74.					
75.	Other Designated Contribution (See instructions)	\$10 \$20	Other	ter Code	75.					
70.	Other Designated Contribution (See instructions)	\$10 \$20		ter Code	76.					
77.			En	ter Code	77					
78.	Total Adjustments to Tax Due/Overpaymen (Add lines 09 through 77)	t amount	7.73							
79.	Balance due (If line 67 is more than zero, a Fill in if paying by e-check or credit		79.		П					
80.	Refund amount (If line 68 is more than ze	ro, subtract line 78 from	line 68)80.			3	2	4	0	0



Worksheet H - Property Tax Deduction/Credit

Review the eligibility requirements on page 25 before completing Worksheet H. Part-year residents, see page 30.

Complete both columns of this worksheet to find out whether the deduction or the credit is better for you.

 Property Taxes. Enter the property taxes from line 40a, Form NJ-1040.
 Senior Freeze (Property Tax Reimbursement) applicants must use their base year amount. (See instructions on page 30.)

2,916

2. **Property Tax Deduction.** Is the amount on line 1 of this worksheet \$15,000 or more (\$7,500 or more if you and your spouse file separate returns but maintained the same main home)?

Yes. Enter \$15,000 (\$7,500 if you and your spouse file separate returns but maintained the same main home).

No. Enter the amount from line 1.

2. 2,916

STOP — if you are claiming a credit for taxes paid to other jurisdictions.

Complete only lines 1 and 2. Then complete Schedule NJ-COJ and Worksheet I. (See instructions on page 31.)

3.	Taxable Income (From line 39 of Form NJ-1040)
4.	Property Tax Deduction (From line 2 above)

	Column A	Column B					
3.	76,410	3.	76,410				
4.	2,916	4.	- 0 -				
5.	73,494	5.	76,410				
6.	1,417	6.	1,520				

- New Jersey Taxable Income (Subtract line 4 from line 3)
 Tax on line 5 amount (From Tax Table or Tax Rate Schedules)
- 7. Subtract line 6, column A from line 6, column B
- 8. **Is the line 7 amount \$50 or more** (\$25 if you and your spouse file separate returns but maintained the same main home?) **Part-year residents,** see page 30 before answering "No."
 - Yes. The Property Tax Deduction is more beneficial for you. Make the following entries on your return.

Form NJ-1040	Enter amount from
Line 41	Line 4, column A
Line 42	Line 5, column A
Line 43	Line 6, column A
Line 56	Make no entry

No. The Property Tax Credit is more beneficial for you. Make the following entries on your return.

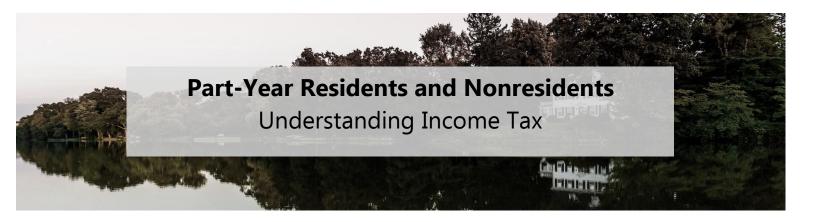
orm NJ-1040	Enter amount fro
Line 41	Make no entry
Line 42	Line 5, column B
Line 43	Line 6, column B
1. 20	¢EO (¢OE :C

Line 56 \$50 (\$25 if you and your spouse file separate returns but maintained the same

 $\label{eq:main-home} \mbox{ main home). } \textbf{Part-year residents} \mbox{ must prorate this amount. (See instructions on the context of the c$

page 30.)

(Keep for your records)



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The forms and amounts referred to in this Bulletin are those for Tax Year 2023. This document is designed to provide guidance to taxpayers and is accurate as of the date issued.

Any reference in this publication to a spouse also refers to a spouse who entered into a valid same-sex marriage in another state or foreign nation and a partner in a civil union (CU) recognized under New Jersey law.