

NJ-1040 Overview

NJ 1040 for Familiarization



NJ 1040 Paper Page 1

- Page I of the NJ 1040 Tax Form includes:
 - Taxpayer personal information
 - County/Municipality Code
 - NJ Filing Status
 - Exemptions
 - Dependent information
 - Gubernatorial Election Fund Check Boxes
 - Signature Box



NJ 1040 Page 1

**NJ-1040
2010**



**STATE OF NEW JERSEY
INCOME TAX-RESIDENT RETURN**

5R

For Tax Year Jan.-Dec. 31, 2010, Or Other Tax Year Beginning _____, 2010, Month Ending , 20

↓ IMPORTANT! YOU MUST ENTER YOUR SSN (s). ↓ Fill in if application for Federal extension is enclosed or enter confirmation #

Your Social Security Number <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		Last Name, First Name and Initial <small>(Joint filers enter first name and initial of each - Enter spouse/CU partner last name ONLY if different)</small>			
Spouse's/CU Partner's Social Security Number <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		Home Address (Number and Street, including apartment number or rural route)			
County/Municipality Code (See Table p. 51) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		City, Town, Post Office		State	Zip Code

NJ RESIDENCY STATUS If you were a New Jersey resident for ONLY part of the taxable year, give the period of New Jersey residency: From / / To / /

Please label on form if all preprinted information is correct. Otherwise, print or type your name and address.

FILING STATUS	(Fill in only one)							
	1. <input type="checkbox"/> Single							
	2. <input type="checkbox"/> Married/CU Couple, filing joint return							
	3. <input type="checkbox"/> Married/CU Partner, filing separate return. Enter Spouse's/ CU Partner Social Security Number in the boxes above							
	4. <input type="checkbox"/> Head of household							
	5. <input type="checkbox"/> Qualifying widow(er)/ Surviving CU Partner							
	EXEMPTIONS	6. Regular	<input type="checkbox"/> Yourself	<input type="checkbox"/> Spouse/ CU Partner	<input type="checkbox"/> Domestic Partner	6		
		7. Age 65 or Over	<input type="checkbox"/> Yourself	<input type="checkbox"/> Spouse/CU Partner		7		
		8. Blind or Disabled	<input type="checkbox"/> Yourself	<input type="checkbox"/> Spouse/CU Partner		8		
		9. Number of your qualified dependent children				9		
		10. Number of other dependents				10		
		11. Dependents attending colleges				11		
12. Totals (For Line 12a - Add Lines 6, 7, 8, and 11) (For Line 12b - Add Lines 9 and 10)				12a		12b		

ENTER NUMBERS HERE



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DEPENDENTS	13. Dependent's Last Name, First Name, Middle Initial	Dependent's Social Security Number	Birth Year	Did an over-18 dependent not have health insurance including NJ FamilyCare/ Medicaid, Medicare, private or other (see instructions)	
	a	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
	b	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
	c	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
	d	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

GUBERNATORIAL ELECTIONS FUND	Do you wish to designate \$1 of your taxes for this fund?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Note: if you fill in the Yes oval(s), it will not increase your tax liability.
	If joint return, does your spouse/CU partner wish to designate \$1?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

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.

<input type="text"/>	<input type="text"/>
Your Signature	Date
<input type="text"/>	<input type="text"/>
Spouse's/CU Partner's Signature (if filing jointly, BOTH must sign)	Date

If you do not need forms mailed to you next year, fill in (See instruction page 16)

I authorize the Division of Taxation to discuss my return and enclosures with my preparer (below)

<input type="text"/>	Federal Identification Number
Paid Preparer's Signature	<input type="text"/>
<input type="text"/>	Federal Employer Identification Number
Firm's Name	<input type="text"/>

IF REFUND:
 NJ Division of Taxation
 Revenue Processing Center
 PO Box 555
 Trenton, NJ 08647-0555
 You may also pay by e-check or credit card. For more information go to:
www.state.nj.us/treasury/taxation

STATE OF NEW JERSEY - TGI
 Mail your check or money order with your NJ-1040-V payment voucher and your return to:
 NJ Division of Taxation
 Revenue Processing Center
 PO Box 111
 Trenton, NJ 08645-0111

Division Use	1	2				3					4	5	6				7		
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NJ 1040 Paper Page 2

- Page 2 of the NJ Tax Form includes
 - Income
 - Exclusions
 - Exemptions
 - Deductions
 - NJ Taxable income
 - NJ Tax



NJ 1040 Page 2

Name(s) as shown on Form NJ-1040		Your Social Security Number			
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 (Enclose copy of Federal Schedule C, Form 1040)	17				
18. Net gains or income from disposition of property (Schedule B, Line 4)	18				
19. Pensions, Annuities, and IRA Withdrawals (See instruction page 24)	19				
20. Distributive Share of Partnership Income (See instruction page 27) (Enclose Schedule)	20				
21. Net pro rata share of S Corporation Income (See instruction page 27) (Enclose Schedule)	21				
22. Net gain or income from rents, royalties, patents & copyrights (Schedule C, Line 3)	22				
23. Net Gambling Winnings (See instruction page 27)	23				
24. Alimony and separate maintenance payments received	24				
25. Other (Enclose Schedule) (See instruction page 28)	25				
26. Total Income (Add Lines 14, 15a, and 16 through 25)	26				



NJ 1040 Paper Page 3

- Page 3 of the NJ Tax Form includes
 - Credits
 - Use tax on out of state purchases
 - Penalties
 - Amount owed
 - Amount to be refunded



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Name(s) as shown on Form NJ-1040	Your Social Security Number
39. TAX (From Line 38, page 2)	39 <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
40. Credit For Income Taxes Paid to Other Jurisdictions Enter other jurisdiction code (See instructions)..... <input type="text"/> <input type="text"/>	40 <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
41. Balance of Tax (Subtract Line 40 from Line 39)	41 <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
42. Sheltered Workshop Tax Credit	42 <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
43. Balance of Tax after Credit (Subtract Line 42 from Line 41)	43 <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
44. Use Tax Due on Out-of-State Purchases (See instruction page 38) If no Use Tax, enter ZERO (0.00).	44 <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
45. Penalty for Underpayment of Estimated Tax. Fill in <input type="text"/> if Form NJ-2210 is enclosed.	45 <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
46. Total Tax and Penalty (Add Lines 43, 44, and 45)	46 <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
47. Total New Jersey Income Tax Withheld (From enclosed Forms W-2 and 1099)	47 <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
48. Property Tax Credit (See instruction page 35)	48 <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
49. New Jersey Estimated Tax Payments/Credit from 2009 tax return	49 <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
50. New Jersey Earned Income Tax Credit (See instruction page 40)	50 <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
Fill in <input type="text"/> if you had the IRS figure your Federal Earned Income Credit only one	<input type="text"/>
Fill in oval if you are a CU couple claiming the NJ Earned Income Tax Credit	<input type="text"/>
51. EXCESS New Jersey UI/WF/SWF Withheld (See instr. page 40) (Enclose Form NJ-2450)	51 <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
52. EXCESS New Jersey Disability Insurance Withheld (See instr. page 40)	52 <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
(Enclose Form NJ-2450)	53 <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
53. EXCESS New Jersey Family Leave Insurance Withheld (see instr. page 40) Enclose Form NJ-2450	54 <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
54. Total Payments/Credits (Add Lines 47 through 53)	54 <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>





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55. If Line 54 is LESS THAN Line 46, enter AMOUNT YOU OWE 55 [] [] , [] [] [] [] [] []
 Fill in [] if paying by e-check or credit card.
 If you owe tax, you may make a donation by entering an amount on Lines 58, 59, 60, 61, 62 and/or 63 and adding this to your payment amount.


56. If Line 54 is MORE THAN Line 46, enter OVERPAYMENT 56 [] [] , [] [] [] [] [] []
 Deductions from Overpayment on Line 56 which you elect to credit to:


57. Your 2011 tax 57 [] [] , [] [] [] [] [] []

58.  N.J. Endangered Wildlife Fund \$10 \$20 Other 58 [] [] [] []

59.  N.J. Children's Trust Fund To Prevent Child Abuse \$10 \$20 Other 59 [] [] [] []

60.  N.J. Vietnam Veterans' Memorial Fund \$10 \$20 Other 60 [] [] [] []

61.  N.J. Breast Cancer Research Fund \$10 \$20 Other 61 [] [] [] []

62.  U.S.S. New Jersey Educational Museum Fund ... \$10 \$20 Other 62 [] [] [] []

63. Other Designated Contribution \$10 \$20 Other 63 [] [] [] []
 See instruction page 41

64. Total Deductions from Overpayment (Add Lines 57 through 63) 64 [] [] , [] [] [] [] [] []

65. REFUND (Amount to be sent to you. Subtract Line 64 from Line 56) 65 [] [] , [] [] [] [] [] []

ENTER
AMOUNT
OF
CONTRIBUTION

SIGN YOUR RETURN ON PAGE 1



TaxWise NJ 1040

- Most of the information is carried forward from the TaxWise Federal 1040 to the TaxWise NJ 1040
- Page numbers in TaxWise do not match page numbers of the paper return
- NJ 1040 entries can be tricky



TaxWise NJ 1040 Entries

- The following items are the minimum required manually input entries:
 - County/Municipality Code must be entered in the TaxWise NJ 1040 on page 1
 - Gubernatorial Election Fund Question must be answered in the TaxWise NJ 1040 on page 3
 - Homeowner on Oct 1 question must be answered on the TaxWise NJ 1040 on page 3
 - Use tax due on out of state purchases must be entered in TaxWise NJ 1040 on page 3
 - Worksheet F Property Tax Deduction/Credit in the TaxWise NJ 1040 on page 4
 - NJ DD Worksheet
 - NJ IRA Worksheet (Taxpayers with IRA withdrawals)



NJ 1040 for Familiarization

- New Jersey entries can be tricky
- For Familiarization we are doing basic
- More detail on NJ coming later

