Form **8879**

Department of the Treasury
Internal Revenue Service

IRS e-file Signature Authorization

▶ **Do not send to the IRS. This is not a tax return.**
▶ **Keep this form for your records.**

OMB No. 1545-0074

2012

Declaration Control Number (DCN) ▶ 00200752001502

Taxpayer's name	**Social security number**
BEN A BAYLOR	221-02-0752
Spouse's name	**Spouse's social security number**
PAT N HARPER	222-02-0752

Part I **Tax Return Information-Tax Year Ending December 31, 2012** (Whole Dollars Only)

1	Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4)	**1**	52,303.
2	Total tax (Form 1040, line 61; Form 1040A, line 35; Form 1040EZ, line 10)	**2**	1,826.
3	Federal income tax withheld (Form 1040, line 62; Form 1040A, line 36; Form 1040EZ, line 7)	**3**	2,380.
4	Refund (Form 1040, line 74a; Form 1040A, line 43a; Form 1040EZ, line 11a; Form 1040-SS, Part I, line 12a)	**4**	554.
5	Amount you owe (Form 1040, line 76; Form 1040A, line 45; Form 1040EZ, line 12)	**5**	

Part II **Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)**

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2012, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS **(a)** an acknowledgment of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

[X] I authorize KINNELON LIBRARY TCE to enter or generate my PIN 12345
ERO firm name — **Enter five numbers, but do not enter all zeros**
as my signature on my tax year 2012 electronically filed income tax return.

[ ] I will enter my PIN as my signature on my tax year 2012 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ ______ Date ▶ 11/19/2013

Spouse's PIN: check one box only

[ ] I authorize ______ to enter or generate my PIN ______
ERO firm name — **Enter five numbers, but do not enter all zeros**
as my signature on my tax year 2012 electronically filed income tax return.

[ ] I will enter my PIN as my signature on my tax year 2012 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ ______ Date ▶ ______

Practitioner PIN Method Returns Only-continue below

Part III **Certification and Authentication-Practitioner PIN Method Only**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 20075298765
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2012 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Publication 1345,** Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ S12345678 KINNELON LIBRARY TCE Date ▶ 11/19/2013

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

DECEASED PAT N HARPER 06/21/2012

Form **1040** Department of the Treasury - Internal Revenue Service (99)
U.S. Individual Income Tax Return **2012** OMB No. 1545-0074 IRS Use Only-Do not write or staple in this space.

For the year Jan. 1-Dec. 31, 2012, or other tax year beginning ,2012, ending ,20 See separate instructions.

Your first name and initial BEN A BAYLOR	Last name	**Your social security number** 221-02-0752
If a joint return, spouse's first name and initial PAT N HARPER	Last name	**Spouse's social security no.** 222-02-0752
Home address (number and street). If you have a P.O. box, see instructions. 30911 LOST MEADOW % BEN A BAYLOR	Apt. no.	▲ Make sure the SSN(s) above and on line 6c are correct.
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). ABSECON NJ 08201-		**Presidential Election Campaign** Check here if you, or your spouse if filing jointly, want $3 to go to this fund. Checking a box below will not change your tax or refund. ☐ You ☐ Spouse
Foreign country name	Foreign province/county	Foreign postal code

Filing Status

Check only one box.

1 ☐ Single
2 ☒ Married filing jointly (even if only one had income)
3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶
4 ☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶
5 ☐ Qualifying widow(er) with dependent child

Exemptions

6a ☒ **Yourself.** If someone can claim you as a dependent, **do not** check box 6a
b ☒ **Spouse**

Boxes checked on 6a and 6b: 2

c **Dependents:**

If more than four dependents, see instr. and check here ▶ ☐

(1) First name Last name	(2) Dependent's social security no.	(3) Dependent's relationship to you	(4) ✓ if child under age 17 qualifying for child tax credit (see instr.)
MADISON CHAMBERS	223-02-0752	GRANDCHILD	☐
			☐
			☐
			☐

No. of children on 6c who:
- lived with you: 1
- did not live with you due to divorce or separation (see instr.): 0

Dependents on 6c not entered above: 0

d Total number of exemptions claimed — Add numbers on lines above ▶ 3

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see instructions.

Enclose, but do not attach, any payment. Also, please use **Form 1040-V.**

7	Wages, salaries, tips, etc. Attach Form(s) W-2	7	
8a	**Taxable** interest. Attach Schedule B if required	8a	
8b	**Tax-exempt** interest. **Do not** include on line 8a — 8b		
9a	Ordinary dividends. Attach Schedule B if required	9a	1,565.
9b	Qualified dividends — 9b 875.		
10	Taxable refunds, credits, or offsets of state and local income taxes	10	
11	Alimony received	11	
12	Business income or (loss). Attach Schedule C or C-EZ	12	
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☒	13	737.
14	Other gains or (losses). Attach Form 4797	14	
15a	IRA distributions — 15a — b Taxable amount	15b	
16a	Pensions and annuities — 16a — b Taxable amount	16b	37,142.
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	
18	Farm income or (loss). Attach Schedule F	18	
19	Unemployment compensation	19	
20a	Social security benefits — 20a 20,028. — b Taxable amount	20b	11,659.
21	Other income. List type and amount (see instr.) GAMBLING WINNINGS	21	1,200.
22	Combine the amounts in the far right column for lines 7 through 21. This is your **total income** ▶	22	52,303.

Adjusted Gross Income

23	Educator expenses	23	
24	Certain business expenses of reservists, performing artists, and fee-basis gov. officials. Attach Form 2106 or 2106-EZ	24	
25	Health savings account deduction. Attach Form 8889	25	
26	Moving expenses. Attach Form 3903	26	
27	Deductible part of self-employment tax. Attach Schedule SE	27	
28	Self-employed SEP, SIMPLE, and qualified plans	28	
29	Self-employed health insurance deduction	29	
30	Penalty on early withdrawal of savings	30	
31a	Alimony paid b Recipient's SSN ▶	31a	
32	IRA deduction	32	
33	Student loan interest deduction	33	
34	Tuition and fees. Attach Form 8917	34	
35	Domestic production activities deduction. Attach Form 8903	35	
36	Add lines 23 through 35	36	
37	Subtract line 36 from line 22. This is your **adjusted gross income** ▶	37	52,303.

Tax and Credits

38	Amount from line 37 (adjusted gross income)			38	52,303.
39a	Check if: [X] You were born before Jan. 2, 1948, [ ] Blind. [X] Spouse was born before Jan. 2, 1948, [ ] Blind. Total boxes checked ▶ 39a 2				
b	If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶ 39b [ ]				
40	**Itemized deductions** (from Schedule A) **or** your **standard deduction** (see left margin)			40	21,335.
41	Subtract line 40 from line 38			41	30,968.
42	**Exemptions.** Multiply $3,800 by the number on line 6d			42	11,400.
43	**Taxable income.** Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-			43	19,568.
44	**Tax** (see instructions). Check if any tax is from: a [ ] Form(s) 8814 b [ ] Form 4972 c [ ] 962 election			44	1,826.
45	**Alternative minimum tax** (see instructions). Attach Form 6251			45	
46	Add lines 44 and 45 ▶			46	1,826.
47	Foreign tax credit. Attach Form 1116 if required	47			
48	Credit for child and dependent care expenses. Attach Form 2441	48			
49	Education credits from Form 8863, line 19	49			
50	Retirement savings contributions credit. Attach Form 8880	50			
51	Child tax credit. Attach Schedule 8812, if required	51			
52	Residential energy credits. Attach Form 5695	52			
53	Other credits from Form: a [ ] 3800 b [ ] 8801 c [ ] ____	53			
54	Add lines 47 through 53. These are your **total credits**			54	
55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0- ▶			55	1,826.

Standard Deduction for-
- People who check any box on line 39a or 39b **or** who can be claimed as a dependent, see instructions.
- All others:

Single or Married filing separately, $5,950

Married filing jointly or Qualifying widow(er), $11,900

Head of household, $8,700

Other Taxes

56	Self-employment tax. Attach Schedule SE	56	
57	Unreported social security and Medicare tax from Form: a [ ] 4137 b [ ] 8919	57	
58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58	
59a	Household employment taxes from Schedule H	59a	
b	First-time homebuyer credit repayment. Attach Form 5405 if required	59b	
60	Other taxes. Enter code(s) from instructions	60	
61	Add lines 55 through 60. This is your **total tax** ▶	61	1,826.

Payments

62	Federal income tax withheld from Forms W-2 and 1099	62	2,380.		FORM 1099
63	2012 estimated tax payments and amount applied from 2011 return	63			
64a	**Earned income credit (EIC)** NO	64a			
b	Nontaxable combat pay election 64b				
65	Additional child tax credit. Attach Form 8812	65			
66	American opportunity credit from Form 8863, line 8	66			
67	Reserved	67			
68	Amount paid with request for extension to file	68			
69	Excess social security and tier 1 RRTA tax withheld	69			
70	Credit for federal tax on fuels. Attach Form 4136	70			
71	Credits from Form: a [ ] 2439 b Reserved c [ ] 8801 d [ ] 8885	71			
72	Add lines 62, 63, 64a, and 65 through 71. These are your **total payments** ▶			72	2,380.

If you have a qualifying child, attach Schedule EIC.

Refund

73	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you **overpaid**	73	554.
74a	Amount of line 73 you want **refunded to you.** If Form 8888 is attached, check here ▶ [ ]	74a	554.
▶ b	Routing number ____ ▶ c Type: [ ] Checking [ ] Savings		
▶ d	Account number ____		
75	Amount of line 73 you want **applied to your 2013 estimated tax** ▶ 75		

Direct deposit? See instructions

Amount You Owe

76	**Amount you owe.** Subtract line 72 from line 61. For details on how to pay, see inst. ▶	76	
77	Estimated tax penalty (see instructions) 77		

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? [ ] **Yes.** Complete below. [X] **No**

Designee's name ▶ Phone no. ▶ Personal identification number (PIN) ▶

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See instr. Keep a copy for your records.

Your signature	Date	Your occupation	Daytime phone number
		RETIRED	609-555-9876
Spouse's signature. If a joint return, **both** must sign.	Date	Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
		DECEASED	

Paid Preparer's Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
AARP Foundation Tax-Aide				S24051405

Firm's name ▶ Firm's EIN ▶

Firm's address ▶ Phone no.

US 1040, 1040A, 1040EZ, 1040NR Income Worksheet 2012

Name: BEN A BAYLOR & PAT N HARPER **SSN:** 221-02-0752

Interest. List all interest on Schedule B, regardless of the amount.
Unemployment and/or state tax refund. Fill out 1099G worksheet

Additional Earned Income	Taxpayer	Spouse	Total
Scholarship income - no W2			
Household employee income - no W2			

Social Security/Railroad Tier 1 Benefits	Taxpayer	Spouse	Total
Social Security received this year	12,108.	7,920.	
Railroad tier 1 received this year			
Total	12,108.	7,920.	20,028.
Medicare to Schedule A	1,761.	1,269.	
Federal tax withheld	300.	300.	

Married Filing Separately
If the filing status is married filing separately and the taxpayer and spouse lived together at any time during the year, up to 85% of social security and railroad benefits received are taxable. See Main Information Sheet, filing status 3

All others
Modified adjusted gross income for this computation consists of AGI (without social security or railroad benefits) + Form 8815, line 14, + Form 8839, line 30 + Form 2555 (EZ) exclusions + student loan interest adjustment 40,644.
+ tax-exempt interest: ______ and excluded income from American Samoa (Form 4563) or Puerto Rico: ______ + 50% of the benefits received: 10,014. .... 50,658.

If the modified AGI is less than $25,001 ($32,001 married filing jointly), none of the Social Security and RR Benefits are taxable

If the modified AGI is between $25,000 and $34,000 ($32,000 and $44,000 married filing joIntly), 50% of the benefits received is taxable

If the modified AGI is greater than $34,000 ($44,000 married filing jointly):
85% of the social security and railroad benefits received is taxable ..... **A** 17,024.

Modified AGI	50,658.		
$34,000 ($44,000)	44,000.		
Subtract	6,658.	X 85%=	5,659.

Minimum 50% of the benefits received or $4,500 ($6,000 married filing jointly) ..... 6,000.

Add ..... **B** 11,659.

Taxable social security and railroad retirement tier 1. Minimum of A or B ..... 11,659.

Lump Sum Payment of Social Security and Railroad Tier 1 Benefits

	Taxpayer	Spouse	Total
Gross amount received attributable to 2012			
Using the above modified AGI, this is the taxable amount of the 2011 benefit			
Amounts taxable from previous years			
Taxable benefits using the lump-sum election method			

Form 1040 and 1040NR, Line 21: Other Income Worksheet

Name: BEN A BAYLOR & PAT N HARPER SSN: 221-02-0752

		TSJ	Amount
1	Gambling winnings from Form W-2G		1,200.
2	Form 1099-MISC, lines 3, 7, and 8		
3	Taxable distributions from education savings accounts (ESAs) and QTPs		
4	Recovery of itemized deductions		
5	Foreign income exclusion from Form 2555, line 45		
6	Foreign income exclusion from Form 2555-EZ, line 18		
7	Income addition from Form 6478, line 7		
8	Income addition from Form 8814, line 12		
9	Taxable Archer MSA distributions from Form 8853, line 8		
10	Taxable Medicare Advantage MSA distributions from Form 8853, line 12		
11	Taxable long-term care insurance contract payments from Form 8853, line 26		
12	Taxable HSA distributions from Form 8889, line 16		
13	Income for failure to maintain HDHP coverage from Form 8889, line 20		
14	Jury duty pay		
15	NOL carried forward - enter as a negative amount		
16	Describe -		
17	Describe -		
18	Describe -		
19	Describe -		
20	Describe -		
21	Describe -		
22	Describe -		
23	Describe -		
24	Describe -		
25	Describe -		
26	Describe -		
27	Describe -		
28	Describe -		
29	Describe -		
30	Describe -		
31	Total other income		1,200.

221-02-0752

1099-R DETAIL REPORT - 2012

Payer	EIN	T S	Box 7	IRA/SEP Simple	Fed. With.	State With.	Gross	1099R Taxable	Roll/ Exclude	Net	Cost	Cost Bal.
DEFENSE FINANCE & AC	11-2990752	T	7		1580NJ		23919	23919		23919		
HARRIS TRUST	21-7990752	T	7		NJ		13223	13223		13223		
					----		-----	-----		-----		
					1580		37142	37142		37142		

US Schedule A — Itemized Deduction Detail Worksheet — 2012

Name: BEN A BAYLOR & PAT N HARPER **SSN:** 221-02-0752

Medical Expenses — **Medical miles:** 1116 **Deduction:** 257.

Insurance premiums paid (not pre-tax)			Medicare from 1040 worksheet	3,030.
Taxpayer			Remainder from worksheets	
Spouse			Taxpayer	
Qualified long term care contracts			Spouse	
Taxpayer			Self-employed health insurance	
Spouse			Taxpayer	
Other medical expenses			Spouse	
DOCTORS		4,723.		
HOSPITALS		5,168.		
DRUGS		1,756.		
EYEGLASSES		210.	Amount from additional worksheets	
			Total	15,144.

Cash Contributions

50% Limit Organizations — **Other Charitable miles:** X .14 =

CHURCH	850.		
PBS	201.		
		From Schedules K-1	
		Amount from additional worksheets	
		Total	1,051.

30% Limit Organizations — **Charitable miles:** X .14 =

		Schedules K-1	
		Amount from additional worksheets	
		Total	

Other Than Cash Contributions — **50% Limit Organizations**

SALVATION ARMY	350.	From Forms 8283	
		Amount from additional worksheets	
From Schedules K-1		**Total**	350.

30% Limit Capital gain property donated to 50% limit organizations.

		From Forms 8283	
From Schedules K-1		**Total**	

30% Limit Not capital gain property donated to 30% limit organizations.

		From Forms 8283	
From Schedules K-1		**Total**	

20% Limit Organization Capital gain property donated to 30% limit organizations.

		From Forms 8283	
From Schedules K-1		**Total**	

Contribution Carryovers

	From years 2006 through 2010				To 2012 tax year			
	Cash and other property		Capital gain property		Cash and other property		Capital gain property	
	50%	30%	30%	20%	50%	30%	30%	20%
2007								
2008								
2009								
2010								
2011								
2012								

Contributions allowed this year

50% of adjusted gross income	26,152.	
This year's 50% organization cash contributions allowed		1,401.
30% of adjusted gross income	15,691.	
This year's capital gain contributions to 50% organizations limited to 30%		
50% cash carryover allowed		
50% capital gain carryover limited to 30%		
This year's 30% organization cash and other property contributions allowed		
30% organizations cash and other property carryover		
20% of adjusted gross income	10,461.	
This year's capital gain contributions to 30% organizations limited to 20%		
30% capital gain carryover limited to 20% AGI		
Total contributions allowed this year		1,401.

US Schedule A — Sales Tax Worksheet — 2012

Name: BEN A BAYLOR & PAT N HARPER SSN: 221-02-0752

1	Federal AGI		52,303.	
2	Nontaxable income listed on tax return			
a	Nontaxable interest			
b	Social security	8,369.		
c	Combat pay			
d	Income on Forms 4970 and 4972			
e	Nontaxable part of IRA, pension, or annuity distributions, not including rollovers		8,369.	
3	Other nontaxable income			
a				
b				
c				
d				
e				
4	**Income for sales tax chart**		60,672.	
1	Enter the taxpayer's state of residency for 2012			NJ
	If the taxpayer was a part-year resident, enter the dates resided in this state ______ to ______			
	State sales tax from the applicable table			847.
2	Did you live Alaska, Arizona, Arkansas, California (Los Angeles County only), Colorado, Georgia, Illinois, Louisiana, Missouri, New York State, North Carolina, South Carolina, Tennessee, Utah or Virginia in 2012?			
	[X] **No.** Line 2 should be -0-.			
	[ ] **Yes.** Enter the letter (A - D) for the optional local sales tax table you want to use			
	Local sales tax from the applicable table			
3	Did your locality impose a local general sales tax in 2012? Residents of California and Nevada, see the Schedule A instructions.			
	[X] **No.** Go to line 7.			
	[ ] **Yes.** Enter the local general sales tax rate. If the rate is 2.5%, enter 2.5			
4	Did you enter -0- on line 2 above?			
	[ ] **No.** Skip to line 6.			
	[ ] **Yes.** Enter the state general sales tax rate from the table headed by the state in the Schedule A instructions. Enter 6.5% as 6.5			
5	Divide line 3 by line 4			
6	Did you enter -0- on line 2 above?			
	[ ] **No.** Multiply line 2 by line 3.			
	[ ] **Yes.** Multiply line 1 by line 5			
7	Total of lines 1 and 6 - prorated for part-year residents			847.
8	General sales tax paid on specified items. Motor vehicles - If the tax rate is higher than the general sales tax rate, only include the amount of tax at the general sales tax rate. Aircraft, boats, homes, including mobile and prefabricated, or home building materials - Only deductible if the sales tax charged is at the federal sales tax rate			1,400.
9	**Total sales tax using the sales tax chart**			2,247.
10	**Sales tax using actual receipts**			
11	**Sales tax deduction for Schedule A, line 5**			2,247.

 USWA$$$3

SCHEDULE A (Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Itemized Deductions

▶Information about Schedule A and its separate instructions is at www.irs.gov/form1040.

▶ Attach to Form 1040.

OMB No. 1545-0074

2012

Attachment Sequence No. **07**

Name(s) shown on Form 1040: BEN A BAYLOR & PAT N HARPER

Your social security no. 221-02-0752

Medical and Dental Expenses		**Caution.** Do not include expenses reimbursed or paid by others.				
	1	Medical and dental expenses (see instructions)	1	15,144.		
	2	Enter amount from Form 1040, line 38 ... 2 52,303.				
	3	Multiply line 2 by 7.5% (.075)	3	3,923.		
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-			4	11,221.
Taxes You Paid	5	State and local a ☐ Income taxes b ☒ General sales taxes	5	2,247.		
	6	Real estate taxes (see instructions)	6	3,102.		
	7	Personal property taxes	7			
	8	Other taxes. List type and amount ▶	8			
	9	Add lines 5 through 8			9	5,349.
Interest You Paid	10	Home mortgage interest & points reported to you on Form 1098	10	2,164.		
	11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see inst. and show that person's name, identifying no., and address ▶	11			
Note. Your mortgage interest deduction may be limited (see instructions).	12	Points not reported to you on Form 1098. See instructions for special rules	12			
	13	Mortgage insurance premiums (see instructions)	13			
	14	Investment interest. Attach Form 4952 if required. (See inst.)	14			
	15	Add lines 10 through 14			15	2,164.
Gifts to Charity	16	Gifts by cash or check. If you made any gift of $250 or more, see instructions	16	1,051.		
If you made a gift and got a benefit for it, see instructions.	17	Other than by cash or check. If any gift of $250 or more, see instructions. You **must** attach Form 8283 if over $500	17	350.		
	18	Carryover from prior year	18			
	19	Add lines 16 through 18			19	1,401.
Casualty and Theft Losses	20	Casualty or theft loss(es). Attach Form 4684. (See instructions.)			20	
Job Expenses and Certain Miscellaneous Deductions	21	Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ▶	21			
	22	Tax preparation fees	22			
	23	Other expenses - investment, safe deposit box, etc. List type and amount ▶	23			
	24	Add lines 21 through 23	24			
	25	Enter amount from Form 1040, line 38 ... 25				
	26	Multiply line 25 by 2% (.02)	26			
	27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-			27	
Other Miscellaneous Deductions	28	Other - from list in the inst. List type and amount ▶ GAMBLING LOSSES 1,200.			28	1,200.
Total Itemized Deductions	29	Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40			29	21,335.
	30	If you elect to itemize deductions even though they are less than your standard deduction, check here ▶ ☐				

SCHEDULE B
(Form 1040A or 1040)
Department of the Treasury
Internal Revenue Service (99)

Interest and Ordinary Dividends

▶ **Attach to Form 1040A or 1040.**
▶ **Information about Sch. B (Form 1040A or 1040) & its instr. is at www.irs.gov/form1040.**

OMB No. 1545-0074
2012
Attachment Sequence No. **08**

Name(s) shown on return	Your social security number
BEN A BAYLOR & PAT N HARPER	221-02-0752

Part I Interest

(See instructions and the instructions for Form 1040A, or Form 1040, line 8a.)

Note. If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

			Amount
1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see instructions and list this interest first. Also, show that buyer's social security number and address ▶	1	
2	Add the amounts on line 1	2	
3	Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	3	
4	Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a ▶	4	

Note. If line 4 is over $1,500, you must complete Part III.

Part II Ordinary Dividends

(See instructions and the instructions for Form 1040A, or Form 1040, line 9a.)

Note. If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

			Amount
5	List name of payer ▶	5	
	THE LONE STAR FUND		1,565.
6	Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a ▶	6	1,565.

Note. If line 6 is over $1,500, you must complete Part III.

Part III Foreign Accounts and Trusts

(See instructions)

You must complete this part if you **(a)** had over $1,500 of taxable interest or ordinary dividends; **(b)** had a foreign account; or **(c)** received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

		Yes	No
7a	At any time during 2012, did you have a financial interest in or signature authority over a financial account, such as a bank account, securities account, or brokerage account located in a foreign country? See instrs.		X
	If "Yes," are you required to file Form TD F 90-22.1 to report that financial interest or signature authority? See Form TD F 90-22.1 and its instructions for filing requirements and exceptions to those requirements		
b	If you are required to file Form TD F 90-22.1, enter the name of the foreign country where the financial account is located ▶		
8	During 2012, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions on back		X

US Schedule D — Schedule D Tax Worksheet — 2012

Name: BEN A BAYLOR & PAT N HARPER **SSN:** 221-02-0752

1	Taxable income from Form 1040, line 43, Form 1040NR, line 40, Form 1040A, line 27, or from the Foreign Earned Income Tax Worksheet				19,568.
2	Qualified dividends from Form 1040, line 9b, Form 1040A, line 9b, or Form 1040NR, line 10b	875.			
3	Line 4g of Form 4952				
4	Line 4e of Form 4952				
5	Subtract line 4 from line 3				
6	Subtract line 5 from line 2. If -0- or less, enter -0-		875.		
7	Smaller of line 15 or line 16 of Schedule D	737.			
8	Smaller of line 3 or line 4				
9	Subtract line 8 from line 7. If -0- or less, enter -0-		737.		
10	Add lines 6 and 9			1,612.	
11	Add lines 18 and 19 of Schedule D				
12	Smaller of line 9 or line 11				
13	Subtract line 12 from line 10. If -0- or less, enter -0-				1,612.
14	Subtract line 13 from line 1. If -0- or less, enter -0-				17,956.
15	Smaller of line 1 or $70,700 if married filing jointly or qualifying widow(er); $35,350, if single or married filing separately; $47,350 if head of household		19,568.		
16	Smaller of line 14 or line 15		17,956.		
17	Subtract line 10 from line 1. If -0- or less, enter -0-	17,956.			
18	Larger of line 16 or line 17			17,956.	
19	Subtract line 16 from line 15			1,612.	
20	Smaller of line 1 or line 13				
21	Amount from line 19				
22	Subtract line 21 from line 20				
23	Multiply line 22 by 15%				
24	Smaller of line 9 above or Schedule D, line 19				
25	Add lines 10 and 18				
26	Amount from line 1				
27	Subtract line 26 from line 25. If -0- or less, enter -0-				
28	Subtract line 27 from line 24. If -0- or less, enter -0-				
29	Multiply line 28 by 25%				
30	Add lines 18, 19, 22, and 28				
31	Subtract line 30 from line 1				
32	Multiply line 31 by 28%				
33	Tax on line 18 amount				1,826.
34	Add lines 23, 29, 32, and 33				1,826.
35	Tax on line 1 amount				2,066.
36	**Tax on all taxable income.** Smaller of lines 34 or 35				1,826.

 USSCHD$3

Detail Sheet 2012

Name: BEN A BAYLOR & PAT N HARPER **ID:** 221-02-0752

Description: 1040 WKT 1 - TP SOCIAL SECURITY MEDICARE

Type	Amount
PART B	1,335.
PART D	426.
Total	1,761.

 USWDET$1

Detail Sheet 2012

Name: BEN A BAYLOR & PAT N HARPER **ID:** 221-02-0752

Description: SCH A - NON MAIN HOME PROP TAXES

Type	Amount
EMPTY LOT NEXT DOOR	623.
PTR	(172.)
HOMESTEAD BENEFIT	(847.)
Total	(396.)

Detail Sheet 2012

Name: BEN A BAYLOR & PAT N HARPER **ID:** 221-02-0752

Description: NJ 1040 LINE 36A - FIX FOR PTR BASE AMT

Type	Amount
PROP TAXES PAID	3,498.
PTR BASE AMOUNT	(3,303.)
Total	195.

 USWDET$1

US 1040 Three - Year Tax Summary 2012

Name: BEN A BAYLOR & PAT N HARPER **SSN:** 221-02-0752

Gross Income	2010	2011	2012
Wages and salaries			
Interest and dividends			1,565.
Business income			
Sale of assets - gain or loss			737.
Pension and IRA distributions			37,142.
Rents, royalties, etc			
Unemployment and social security			11,659.
Other income			1,200.
Total gross income			52,303.
Adjustments to Income			
Adjusted gross income			52,303.
Itemized or Standard Deductions			
Medical expense deduction			11,221.
Taxes			5,349.
Interest			2,164.
Contributions			1,401.
Miscellaneous deductions			
Other itemized deductions			1,200.
Total deductions			21,335.
Exemptions			11,400.
Taxable Income	0	0	19,568.
Tax (2012 - 1040, line 44)	0	0	1,826.
Alternative minimum tax			
Other taxes			
Credits and Payments			
Credits			
Withholding			2,380.
EIC and Additional Child Tax Credit			
Estimated tax payments			
Other payments			
Total credits and payments			2,380.
Tax liability after credits			1,826.
Estimated tax penalty			
Refund or (Balance Due)			554.
Federal marginal tax bracket	0.0 %	0.0 %	15.0 %
Tax preparation fee			
State refund or (balance due)			
1st resident state refund (balance due)			NJ 170.
2nd resident state refund (balance due)			
1st part-year state refund (balance due)			
2nd part-year state refund (balance due)			
1st nonresident state refund (balance due)			
2nd nonresident state refund (balance due)			
3rd nonresident state refund (balance due)			
4th nonresident state refund (balance due)			
5th nonresident state refund (balance due)			

NOTES FOR 2012:

W-2G DETAIL REPORT - 2012

Payer	EIN	TP|SP	Federal Withheld	Gross Winnings	State Withheld	Losses
CASINO REALE	21-8990752	X	200	1200	120	2550
			---	----	---	----
			200	1200	120	2550

BAYLOR BEN A & HARPER PAT N

221020752 1045

RESIDENCY STATUS IF YOU WERE A NJ RESIDENT FOR ONLY PART OF THE TAXABLE YEAR GIVE THE PERIOD OF NJ RESIDENCY

FROM TO

FILING STATUS		EXEMPTIONS	
1. SINGLE		6. REGULAR	2
2. MARRIED/CU COUPLE FILING JOINT RETURN	X	7. AGE 65 OR OVER	2
3. MARRIED/CU COUPLE FILING SEPARATE RETURN		8. BLIND OR DISABLED	0
4. HEAD OF HOUSE HOLD		9. NUMBER OF QUALIFIED DEPENDENT CHILDREN	1
5. QUALIFYING WIDOW(ER)/SURVIVING CU PARTNER		10. NUMBER OF OTHER DEPENDENTS	0
		11. DEPENDENTS ATTENDING COLLEGE	0
		12A. TOTAL (LINE 12A - ADD LINES 6, 7, 8, AND 11)	4
		12B. TOTAL (LINE 12B - ADD LINES 9 AND 10)	1

CHECK BOXES FOR EXEMPTIONS

REGULAR	SPOUSE/ CU PARTNER	X	DOMESTIC PARTNER	
AGE 65 OR OLDER	YOURSELF	X	SPOUSE/ CU PARTNER	X
BLIND OR DISABLED	YOURSELF		SPOUSE/ CU PARTNER	

DEPENDENTS INFORMATION FROM LINES 9 AND 10 (ATTACH RIDER IF MORE THAN FOUR)

	LAST NAME, FIRST NAME, MIDDLE INITIAL	SOCIAL SECURITY NUMBER	BIRTH YEAR	HEALTH INS IND
A	CHAMBERS MADISON	223-02-0752	1995	
B				
C				
D				

GUBERNATORIAL ELECTIONS FUND

	YES	NO	
DO YOU WISH TO DESIGNATE $1 OF YOUR TAXES FOR THIS FUND?			X
IF JOINT RETURN, DOES YOUR SPOUSE/CU PARTNER WISH TO DESIGNATE $1?			X

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)	0 .
15A.	TAXABLE INTEREST INCOME(SEE INSTRUCTIONS) ENCLOSE FED SCH B IF OVER $1,500)	0 .
15B.	TAX EXEMPT INTEREST INCOME. (SEE INSTRUCTIONS) (ENCLOSE SCHEDULE) DO NOT INCLUDE ON LINE 15A	0 .
16.	DIVIDENDS	1,565 .
17.	NET PROFITS FROM BUSINESS (SCHEDULE NJ-BUS-1, PART 1, LINE 4) (ENCLOSE COPY OF FEDERAL SCHEDULE C, FORM 1040)	0 .
18.	NET GAINS FROM DISPOSITION OF PROPERTY(SCHEDULE B, LINE 4)	737 .
19.	PENSIONS, ANNUITIES, AND IRA WITHDRAWS (SEE INSTRUCTIONS)	13,223 .
20.	DISTRIBUTIVE SHARE OF PARTNERSHIP INCOME (SCH. NJ-BUS-1, PART II, LINE 4) (SEE INSTRUCTION) (ENCLOSE SCH. NJK-1 OR FEDERAL SCH. K-1)	0 .
21.	NET PRO RATA SHARE OF S CORPORATION INCOME (SCH. NJ-BUS-1, PART III, LINE 4) (SEE INSTRUCTIONS) (ENCLOSE SCH. NJ-K-1 OR FEDERAL SCH. K-1)	0 .
22.	NET GAIN OR INCOME FROM RENTS, ROYALTIES, PATENTS & COPY RIGHTS (SCHEDULE NJ-BUS-1, PART IV, LINE 4)	0 .
23.	NET GAMBLIING WINNINGS (SEE INSTRUCTIONS)	0 .
24.	ALIMONY AND SEPARATE MATINENCE PAYMENTS RECEIVED	0 .
25.	OTHER (ENCLOSE SCHEDULE) (SEE INSTRUCTIONS)	0 .
26.	TOTAL INCOME (ADD LINES 14, 15A, 16 THROUGH 25)	15,525 .
27A.	PENSION EXCLUSION (SEE INSTRUCTIONS)	13,223 .
27B.	OTHER RETIREMENT INCOME EXCLUSION (SEE WORKSHEET AND INSTRUCTIONS)	6,777 .
27C.	TOTAL EXCLUSION AMOUNT (ADD LINE 27A AND LINE 27B)	20,000 .
28.	NEW JERSEY GROSS INCOME (SUBTRACT LINE 27C FROM LINE 26) (SEE INSTRUCTIONS)	0 .
29.	TOTAL EXEMPTION AMOUNT (SEE INSTRUCTIONS TO CALCULATE AMOUNT) (PART YEAR RESIDENTS SEE INSTRUCTIONS)	5,500 .
30.	MEDICAL EXPENSES (SEE WORKSHEET AND INSTRUCTIONS)	15,144 .
31.	ALIMONY AND SEPARATE MATINENCE PAYMENTS	0 .
32.	QUALIFIED CONSERVATION CONTRIBUTION	0 .
33.	HEALTH ENTERPRIZE ZONE DEDUCTION	0 .
34.	ALTERNATIVE BUSINESS CALCULATION ADJUSTMENT (SCHEDULE NJ-BUS-2, LINE 10)	0 .
35.	TOTAL EXEMPTIONS AND DEDUCTIONS (ADD LINES 29 THROUGH 34)	20,644 .
36.	TAXABLE INCOME (SUBTRACT LINE 35 FROM LINE 28) IF ZERO OR LESS, MAKE NO ENTRY	0 .
37A.	TOTAL PROPERTY TAXES PAID (SEE INSTRUCTIONS)	3,498 .

BAYLOR BEN A & HARPER PAT N

221020752 1045

37B.	FILL IN THE OVAL IF YOU WERE A NEW JERSEY HOMEOWNER ON OCTOBER 1, 2012	X
37C.	PROPERTY TAX DEDUCTION (SEE INSTRUCTIONS)	0 .
38.	NEW JERSEY TAXABLE INCOME (SUBTRACT LINE 37C FROM LINE 36) IF ZERO OR LESS, MAKE NO ENTRY	0 .
39.	TAX (FROM TAX TABLES.)	0 .
40.	THIS LINE IS NOT USED ON COMPUTER GENERATED RETURNS	
41.	CREDIT FOR INCOME TAXES PAID TO OTHER JURISDICTIONS	0 .
41A.	JURISDICTION CODE (SEE INSTRUCTIONS)	
42.	BALANCE OF TAX (SUBTRACT LINE 41 FROM LINE 39)	0 .
43.	SHELTERED WORKSHOP TAX CREDIT	0 .
44.	BALANCE OF TAX AFTER CREDIT (SUBTRACT LINE 43 FROM LINE 42)	0 .
45.	USE TAX DUE ON INTERNET, MAIL-ORDER, OR OTHER OUT-OF-STATE PURCHASES (SEE WORKSHEET AND INSTRUCTION) IF NO USE TAX, ENTER ZERO	0 .
46.	PENALTY FOR UNDERPAYMENT OF ESTIMATED TAX	0 .
46A.	FILL IN IF FORM 2210 IS ENCLOSED	
47.	TOTAL TAX AND PENALTY (ADD LINES 44, 45, AND 46)	0 .
48.	TOTAL NEW JERSEY INCOME TAX WITHHELD (ENCLOSE FORMS W-2 AND 1099)	120 .
49.	PROPERTY TAX CREDIT (SEE INSTRUCTIONS)	50 .
50.	NEW JERSEY ESTIMATED TAX PAYMENTS/CREDIT FROM 2011 TAX RETURN	0 .
51.	NEW JERSEY EARNED INCOME TAX CREDIT (SEE INSTRUCTIONS)	0 .
51B.	FILL IN THE BOX IF YOU HAD THE IRS FIGURE YOUR FEDERAL EARNED INCOME CREDIT	
51C.	FILL IN THE BOX IF YOU ARE A CU COUPLE CLAIMING THE NJ EARNED INCOME TAX CREDIT	
52.	EXCESS NEW JERSEY UI/SF/SWF WITHHELD (SEE INSTRUCTIONS)(ENCLOSE FORM NJ-2450)	0 .
53.	EXCESS NEW JERSEY FAMILY LEAVE WITHHELD (SEE INSTRUCTIONS) (ENCLOSE FORM NJ-2450)	0 .
54.	EXCESS NEW JERSEY FAMILY LEAVE WITHHELD (SEE INSTRUCTIONS)(ENCLOSE FORM NJ-2450)	0 .
55.	TOTAL PAYMENTS/CREDITS (ADD LINES 48 THROUGH 54)	170 .
56.	IF LINE 55 IS LESS THAN LINE 47, ENTER AMOUNT YOU OWE IF YOU OWE TAX, YOU MAY MAKE A DONATION BY ENTERING AN AMOUNT ON LINES 58, 59, 60, 61, 62 AND OR 64 AND ADDING THIS TO YOUR PAYMENT	0 .
57.	IF LINE 55 IS MORE THAN LINE 47, ENTER OVERPAYMENT	170 .
	DEDUCTIONS FROM OVERPAYMENT ON LINE 57 WHICH YOU ELECT TO CREDIT TO:	
58.	YOUR 2013 TAX	0 .
59.	NEW JERSEY ENDANGERED WILDLIFE FUND	0 .
60.	NEW JERSEY CHILDRENS TRUST FUND	0 .
61.	NEW JERSEY VIETNAM VETERANS' MEMORIAL FUND	0 .
62.	NEW JERSEY BREAST CANCER REASEACH FUND	0 .
63.	U.S.S. NEW JERSEY EDUCATIONAL MUSEUM FUND	0 .
64.	OTHER DESIGNATED CONTRIBUTION (SEE INSTRUCTION)	0 .
64C.	DESIGNATION CODE	
65.	TOTAL DEDUCTIONS FROM OVERPAYMENT (ADD LINES 58 THROUGH 64)	0 .
66.	REFUND (AMOUNT TO BE SENT TO YOU. SUBTRACT LINE 65 FROM LINE 57)	170 .

DIRECT DEPOSIT INFORMATION

REFUND CHECK BOX ('1' FOR REFUND, '4' FOR NO REFUND)	4
ACCOUNT TYPE ('C' for CHECKING, 'S' FOR SAVINGS)	
FILL IN THE CHECK BOX IF REFUND IS GOING OUTSIDE THE UNITED STATES	
ROUTING NUMBER	
ACCOUNT NUMBER	

DO NOT MAIL INDICATOR

POWER OF ATTORNEY INDICATOR

PRESIDENTIAL DISASTER RELIEF INDICATOR

NJ-1040
2012

PAGE 1

STATE OF NEW JERSEY INCOME TAX - RESIDENT RETURN

For Privacy Act Notification, See Instructions
For Tax Year Jan. - Dec. 2012 or Other Tax Year

Beginning ____________ , 20 ____ Month Ending ____________ 20 ____
On-line Federal Extension Confirmation # ____________

BAYLOR BEN A & HARPER PAT N DECD
% BEN A BAYLOR
30911 LOST MEADOW
ABSECON NJ 08201-0000 0101
1045 12 0
221020752
222020752
S24051405

Under the penalties of perjury, I declare that I have examined this income tax return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. If prepared by a person other than the taxpayer, this declaration is based on all information of which the preparer has any knowledge.

▶ ____________ Your Signature Date

▶ DECD 06-21-2012 Spouse/CU Partner's Signature (If filing jointly, both must sign)

If enclosing copy of death certificate for deceased taxpayer, check box (See instructions)

Paid Preparer's Signature

Federal Identification Number S24051405

Firm's Name

Federal Employer Identification Number

Pay amount on Line 56 in full. Write Social Security number(s) on check or money order and make payable to: STATE OF NEW JERSEY - TGI
Mail your return in the envelope provided and affix the appropriate mailing label. If you have an amount due on Line 56, enclose your check and NJ-1040-V payment voucher with your return and use the label for **PO Box 111.** If not, use the label for **PO Box 555.** You may also pay by e-check or credit card. See instructions.

SCHEDULE
NJ-BUS-1
(Form NJ-1040)

NEW JERSEY GROSS INCOME TAX
BUSINESS INCOME SUMMARY SCHEDULE

2012

Name(s) as shown on Form NJ-1040	Your Social Security Number
BAYLOR BEN A & HARPER PAT N	221-02-0752

PART I NET PROFITS FROM BUSINESS

List the net profit (loss) from business(es). See instructions.

	Business Name	Social Security Number/ Federal EIN	Profit or (Loss)	
1.	BEN A BAYLOR	221-02-0752		
2.				
3.				
4.	Net Profit or (Loss). (Add Lines 1, 2, and 3.) (Enter here and on Line 17. If loss, make no entry on Line 17.) . . . . 4.			

PART II DISTRIBUTIVE SHARE OF PARTNERSHIP INCOME

List the distributive share of income (loss) from partnership(s). See instructions.

	Partnership Name	Federal EIN	Share of Partnership Income or (Loss)	
1.				
2.				
3.				
4.	Distributive Share of Partnership Income or (Loss). (Add Lines 1, 2, and 3.) (Enter here and on Line 20. If loss, make no entry on Line 20.) . . . . 4.			

PART III NET PRO RATA SHARE OF S CORPORATION INCOME

List the pro rata share of income (loss) from S Corporation(s). See instructions.

	S Corporation Name	Federal EIN	Pro Rata Share of S Corporation Income or (Loss)	
1.				
2.				
3.				
4.	Net Pro Rata Share of S Corporation Income or (Loss). (Add Lines 1, 2, and 3.) (Enter here and on Line 21. If loss, make no entry on Line 21.) . . . . 4.			

PART IV NET GAINS OR INCOME FROM RENTS, ROYALTIES, PATENTS, AND COPYRIGHTS

List the net gains or net income, less net loss, derived from or in the form of rents, royalties, patents, and copyrights. See instructions.
Type of Property: 1-Rental real estate 2-Royalties 3-Patents 4-Copyrights

	Source of Income or Loss. If rental real estate, enter physical address of property.	Social Security Number/ Federal EIN	Type - Enter number from list above	Income or (Loss)	
1.					
2.					
3.					
4.	Net Income or (Loss). (Add Lines 1, 2, and 3.) (Enter here and on Line 22. If loss, make no entry on Line 22.) . . . . 4.				

1045

NJ **Dependents Information** **2012**

Name: BEN A BAYLOR & PAT N HARPER **SSN:** 221-02-0752

First name	MI	Last name	SSN	Birth year
MADISON		CHAMBERS	223-02-0752	1995

 NJDEP$$1

NJ Other Retirement Income Exclusion Worksheet 2012

Name: BAYLOR BEN A & HARPER PAT N **SSN:** 221-02-0752

Is your gross income, combined income if filing jointly, for the entire year before subtracting any pension exclusion more than $100,000?
If "Yes", do not complete Part I. Enter "0" on line 9 and continue with Part II. ☐ Yes ☒ No

Part I

1	Amount from NJ-1040, line 14 or NJ-1040NR, line 14, column A	
2	Amount from NJ-1040, line 17 or NJ-1040NR, line 17, column A	
3	Amount from NJ-1040, line 20 or NJ-1040NR, line 22, column A	
4	Amount from NJ-1040, line 21 or NJ-1040NR, line 23, column A	
5	Add lines 1, 2, 3, and 4	
	Is the amount on line 5 more than $3,000? ☐ Yes. Enter "0" on line 9 and continue to Part II. ☒ No. Continue to line 6.	
6	Enter $20,000 if married filing a joint return, $15,000 if single, head of household, or qualifying widow(er), or $10,000 if married filing a separate return.	20,000.
7	Amount from NJ-1040, line 19b or NJ-1040NR, line 21a	13,223.
8	Subtract line 7 from line 6	6,777.

Part II

9	Unclaimed pension exclusion	6,777.
10 a	Are you and/or your spouse, if filing jointly, now receiving, or will you and/or your spouse, if filing jointly, ever be eligible to receive social security or railroad retirement benefits? ☐ No. Continue to line 10b. ☒ Yes. Enter "0" on line 10 and continue to line 11.	
b	Would you and/or your spouse, if filing jointly, be receiving, or ever be eligible to receive social security or railroad retirement benefits if you had participated in either program? ☐ No. Enter "0" on line 10 and continue to line 11. ☐ Yes. Enter on line 10 the amount of exclusion for your filing status shown below and continue to line 11.	
c	$6,000 for if married filing a joint return, head of household, or qualifying widow(er), or $3,000 if single or married filing a separate return.	
11	**Other retirement income exclusion**	6,777.

SCHEDULES
A & B
(Form NJ-1040)

NEW JERSEY GROSS INCOME TAX

2012

Name(s) as shown on Form NJ-1040	Your Social Security Number
BAYLOR BEN A & HARPER PAT N	221-02-0752

Schedule A — **CREDIT FOR INCOME OR WAGE TAXES PAID TO OTHER JURISDICTION**

If you are claiming a credit for income taxes paid to more than one jurisdiction, a separate Schedule A must be enclosed for each. See instructions.

A COPY OF OTHER STATE OR POLITICAL SUBDIVISION TAX RETURN MUST BE RETAINED WITH YOUR RECORDS

1.	Income actually taxed by other jurisdiction during tax year (indicate name ________________) (DO NOT combine the same income taxed by more than one jurisdiction) (The amount on Line 1 cannot exceed the amount shown on Line 2)	1.	
2.	Income subject to tax by New Jersey (From Line 28, Form NJ-1040)	2.	
3.	Maximum Allowable Credit Percentage (Divide Line 2 into Line 1) 1 ____ 2	3.	%

	IF YOU ARE NOT ELIGIBLE FOR A PROP. TAX BENEFIT ONLY COMPLETE COL. B.		**COLUMN A**		**COLUMN B**
4.	Taxable Income (after Exemptions and Deductions) from Line 36, Form NJ-1040	4.		4.	
5.	Property Tax and Deduction — Enter in Box 5a the amount from Worksheet F line 1. See instructions. 5a. ____ Property tax deduction. Enter the amount from Worksheet F, line 2. See instructions.	5.		5.	**- 0 -**
6.	New Jersey Taxable Income (Line 4 minus Line 5)	6.		6.	
7.	Tax on Line 6 amount (From Tax Table or Tax Rate Schedules)	7.		7.	
8.	Allowable Credit (Line 3 times Line 7)	8.		8.	
9.	Credit for Taxes Paid to Other Jurisdiction — Enter in Box 9a the income or wage tax paid to other jurisdiction during tax year on income shown on Line 1. See instructions. 9a. ____ Credit allowed. (Enter lesser of Line 8 or Box 9a). **(The credit may not exceed your New Jersey tax on Line 39).**	9.		9.	

- If you are not eligible for a property tax benefit, enter the amount from Line 9, Column B, on Line 41, Form NJ-1040. Make no entry on Lines 37c or 49, Form NJ-1040.
- If you are eligible for a property tax benefit, you must complete Worksheet I to determine whether you receive a greater benefit by claiming a property tax deduction or taking the property tax credit.

Schedule B — **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.

1.	a. Kind of property and description	b. Date acquired (Mo., day, yr.)	c. Date sold (Mo., day, yr.)	d. Gross sales price	e. Cost or other basis as adj. (see inst.) and expense of sale	f. Gain or (loss) (d less e)

2.	Capital Gains Distributions	2.	737.
3.	Other Net Gains	3.	
4.	Net Gains (Add Lines 1, 2, and 3) (Enter here and on Line 18. If loss enter ZERO here & make no entry on Line 18)	4.	737.

NOTE: For tax year 2012 and after, Schedule C, Net Gains or Income From Rents, Royalties, Patents, and Copyrights, has been eliminated from this page. Use Part IV of Schedule NJ-BUS-1 (Form NJ-1040) to report that income.