

7x

# **STATE OF NEW JERSEY** AMENDED **INCOME TAX RESIDENT RETURN**

For	Tax	Year	Jan	Dec.	31.	1995.	Or	Other	Tax	Year	Beg	, inn	ii
1.01	тал	rear	Jan	Dec.	51,	1995,	OI	Offici	тал	rear	DUg	$, \min$	ш

ng \_\_\_\_\_, 1995, Ending \_\_\_\_\_, 19\_\_\_\_

	Your Social Security Number	Last Name, First Name and Initial (Joint filers enter first name and initial of each - Enter spouse last name ONLY if different)									
IATUS	Spouse's Social Security Number	Home address (Number and Street, including apartment number or rural route)									
ND S.	County/Municipality Code	City, Town, Post Office				State	Zip Code				
IION /	FILING STATUS	EXE	MPTI		As Originally Reported	Amended					
TAXPAYER IDENTIFICATION AND STATUS		10. Number of other dependents  10.    11. Dependents attending colleges  11.    12. Totals (For Line 12a - Add Lines 6, 7, 8 and 11)  12a.    (For Line 12b - Add Line 9 and Line 10)  12b.    7 Jersey resident for ONLY part of the the period of New Jersey residency:  From									
	Check here $\longrightarrow$ $\Box$ If you did not previo Check here $\longrightarrow$ $\Box$ If joint return and if					t now wants it to d	0.50				
		spouse did not previously w		As Originally Reported		Amended (See Instructions)					
14.	Wages, salaries, tips and other employee com	pensation	14.								
15a.	Taxable Interest Income		15a.								
15b.	Tax exempt interest income. DO NOT inclu	de on Line 15a	15b.								
16.	Dividends		16.								
17.	Net profits from business		17.								
18.	Net gains or income from disposition of prop	perty	18.								
19.	Pensions, Annuities a. Taxable Amo	unt Received	19a.								
	and IRA Withdrawals b. Less New Jer	sey Pension Exclusion	19b.								
	c. Subtract Line	19b from Line 19a	19c.								
20.	Distributive Share of Partnership Income		20.								
21.	Net pro rata share of S Corporation Income .		21.								
22.	Net gain or income from rents, royalties, pate	ents & copyrights	22.								
23.	Net Gambling Winnings		23.								
24.	Alimony and separate maintenance payments	s received	24.								
25.	Other		25.								
26.	Total Other Income (Add Lines 22 through 2	5)	26.								
27a.	Total Income (Add Lines 14, 15a, 16, 17, 18,	, 19c, 20, 21 and 26)	27a.								
27Ь.	OTHER Retirement Income Exclusion		27b.								
27c.	New Jersey Gross Income (Subtract Line 27h	o from Line 27a)	27c.								

				As Originally Reported		Amended (See Instructions)			
28	New Jersey Gross Income (From Line 27c, Page 1)		28.			()	/		
20.			29.						
30.		F	30.						
31.		Γ	31.						
32.	Total Exemptions and Deductions (Add Lines 29, 30 and 31)		32.						
33.			33.						
34.			34.						
35.			35.						
36.		F	36.						
37.		Γ	37.						
38.			38.						
39.		F	39.						
40.	New Jersey Estimated Tax Payments/Credit from 1994 tax return	F	40.						
40.			41.						
41.			41.						
		· ·	43.						
43.			44.						
44.		-							
45.									
46.					47				
	If payments (Line 46) are LESS THAN tax (Line 38) enter AMOU								
	If payments (Line 46) are MORE THAN tax (Line 38) enter OVER								
49.	Amount of Line 48 to be (A) REFUNDED			<u></u>	49A.				
	(B) CREDITED to your 1996 tax er below, name, social security number and address as shown on original return								
	(Note: You cannot change from joint to separate returns after the due date has passed unless you have done so for Federal tax purposes.) Enter first names of your dependent children who lived with you, but were not claimed as dependents on original return.								
Exp Ent	<b>blanation of Changes to Income, Deductions, and Credits</b> er the line reference for which you are reporting a change and give the reason f	for each change.							
16	neg ling 1 in 25 annulut an babaic								
	nending Line 35, complete calculations below:	X							
(Inc		X(New Jersey Ta:	x Line	==					
(Inc (Inc	ome from Other Jurisdictions)	panying schedules and statem	nents, a	and to the best of my k		Pay amount on line 47 in Write social security nun			
(Inc (Inc	ome from Other Jurisdictions)	panying schedules and statem	nents, a	and to the best of my k		Write social security nun on check or money order	nber r and		
(Inc (Inc	ome from Other Jurisdictions) ome from New Jersey sources) Under the penalties of perjury, I declare that I have examined this return, including accom and belief, it is true, correct, and complete. If prepared by a person other than taxpayer, t any knowledge.	panying schedules and statem his declaration is based on all	nents, a	and to the best of my k nation of which the pre		Write social security nun on check or money order make payable to: State of	nber r and		
(Inc (Inc	ome from Other Jurisdictions)	npanying schedules and statem his declaration is based on all Spouse's signature (If filing jo	nents, a inform	and to the best of my k hation of which the pre BOTH must sign.)		Write social security num on check or money order make payable to: State of New Jersey-TGI	nber r and of		
(Inc (Inc	ome from Other Jurisdictions)	panying schedules and statem his declaration is based on all	nents, a inform	and to the best of my k hation of which the pre BOTH must sign.)		Write social security nun on check or money order make payable to: State of New Jersey-TGI Mail your return to: Divi of Taxation, CN 111, Tre	nber r and of ision		
(Inc (Inc	ome from Other Jurisdictions)	npanying schedules and statem his declaration is based on all Spouse's signature (If filing jo	nents, a inform	and to the best of my k hation of which the pre BOTH must sign.)		Write social security nun on check or money order make payable to: State o New Jersey-TGI Mail your return to: Divi	nber r and of ision enton,		

# Use of Form NJ-1040X

You must use Form NJ-1040X to change any information reported on your resident income tax return (Form NJ-1040). Failure to do so will result in delayed processing of your return and/or refund.

Amended returns claiming a refund must be filed within three years from the time the return was filed or two years from the time the tax was paid, whichever is later. If the return is not received within this time limit, it will be considered out of statute and the refund claim will be disallowed.

**Note:** The "Amended" Column of this return must be filled out completely, even though certain items are not being amended.

*Use Form NJ-1040X to amend the resident income tax return only*. To amend a nonresident return, use Form NJ-1040NR for the appropriate year and write "Amended" in the upper right-hand corner.

# Attachments to Form NJ-1040X

Where the original income tax return (Form NJ-1040) requires a schedule or form to support or change an item of income, deduction or credit, attach the appropriate schedule or form to Form NJ-1040X.

#### When to File

File Form NJ-1040X **only after** you have filed your original return (Form NJ-1040) and changes must be made to the original return.

# Where to File

All amended returns (Form NJ-1040X) should be mailed to the follow-ing addresses:

Mail Returns Without Payments to:	State of New Jersey Division of Taxation CN 555 Trenton, NJ 08647-0555
Mail Returns With	State of New Jersey
Payments to:	Division of Taxation
	CN 111
	Trenton, NJ 08645-0111

# Name and Social Security Number

Your name and social security number must be entered on Form NJ-1040X and all accompanying schedules. If there is a balance due with the return, place your social security number on your check or money order. If the payment is for a joint return, include both social security numbers.

# Wage and Tax Statements – Form W-2

A copy of your W-2 and/or 1099-R must accompany your New Jersey Amended Income Tax Resident Return (Form NJ-1040X) if you are

# \_\_\_\_\_ Ente by Ent

#### Name and Address

Print or type your name(s), complete address and zip code in the space provided on the return.

# **Social Security Number**

Enter your correct social security number in the space provided on the return. If you are married and filing a joint amended return, list the numbers of both you and your spouse. If the social security number(s) is

amending (by increasing) taxes withheld or if you are claiming Excess New Jersey Workforce Development Partnership Fund/Health Care Subsidy Fund contributions and/or Disability Insurance contributions.

# **Taxpayer Signature**

You must sign and date your New Jersey Amended Income Tax Resident Return (Form NJ-1040X). Both husband and wife must sign a joint amended return. A return which is unsigned cannot be processed.

### **Tax Preparers**

Anyone who prepares a return for a fee must sign the return as a "Paid Preparer" and enter his or her social security number. Include the company or corporation name and Federal Identification Number, if applicable. A tax preparer who fails to sign the return or provide a tax identification number may incur a \$25 penalty for each omission.

#### Items to Check Before Mailing Your Return

- $\sqrt{\text{Check for correct name, address, and social security number(s)}}$ . Your amended return (Form NJ-1040X) cannot be processed without a social security number.
- √ Attach a copy of your W-2 Statement and/or Form 1099-R if amending (by increasing) taxes withheld or if you are claiming Excess New Jersey Workforce Development Partnership Fund/Health Care Subsidy Fund contributions and/or Disability Insurance withheld.
- $\sqrt{}$  If you are amending your credit for taxes paid to other jurisdictions, a completed copy of any return you filed with that jurisdiction must be attached.
- √ If there is a balance due on your amended return (Form NJ-1040X), attach a check or money order to avoid additional penalties and interest. Write your social security number on the check or money order.
- $\sqrt{\text{Sign and date your return. Both spouses must sign a joint return.}}$

# Calendar Year or Fiscal Year Ended

Like Form NJ-1040, Form NJ-1040X is different for each year. The calendar year or fiscal year **must be the same as the year covered by the original return** which is being amended. To illustrate, John Smith discovers an error on his 1994 New Jersey Resident Return (Form NJ-1040) while preparing his tax return for 1995. To correct the error on his 1994 tax return, he must file the New Jersey Amended Income Tax Resident Return (Form NJ-1040X) for tax year 1994. The calendar year on his NJ-1040X will be 1994 even though he is preparing the NJ-1040X in 1996.

#### Line by Line Instructions

different than that reported on your original return, indicate the original number(s) in the space provided on page 2 of Form NJ-1040X.

# **County/Municipality Code**

See "County/Municipality Code" in the instruction booklet for Form NJ-1040.

]

#### Filing Status

See "Filing Status" in the instruction booklet for Form NJ-1040. Be sure to indicate your filing status in both the "On Original Return" and the "On Amended Return" columns, even if you are not amending your filing status.

Note: You cannot change your filing status after the due date for filing the original Form NJ-1040 has passed unless you have done so for Federal income tax purposes.

#### Exemptions

See "Exemptions" in the instruction booklet for Form NJ-1040. Both columns, "As Originally Reported" and "Amended," must be completed even if you are not amending the number of exemptions reported on the original NJ-1040 tax return filed. Enter on Line 12a the total of Lines 6, 7, 8 and 11. Enter on Line 12b the total of Lines 9 and 10 in each column.

Note: If you omitted any qualified dependent(s) on your original return, enter the first name(s) of those omitted in the space provided on Page 2 of Form NJ-1040X.

Compute the amount of your personal exemption allowance on Line 29 by following these three steps:

- 1. Multiply the total number of exemptions on Line 12a by \$1,000.
- 2. Multiply the total number of exemptions on Line 12b by \$1,500.
- 3. Add the total amount from steps 1 and 2 and enter the result on Line 29. Part-year residents must prorate the amount to be entered in each column on Line 29. Divide the total number of months you were a New Jersey resident by 12 and multiply by the total amount calculated in steps 1 and 2 above. For this calculation, 15 days or more is a month.

# **Residency Status**

If this amended return does not cover a twelve-month period, complete Line 13. See "Residency Status" in the instruction booklet for Form NJ-1040.

#### **Gubernatorial Elections Fund**

If you checked "yes" on your original return, omit this section.

If you did not check "yes" on your original return and now wish to do so, check the appropriate box. See "Gubernatorial Elections Fund" in the instruction booklet for Form NJ-1040 for an explanation of the Gubernatorial Elections Fund. Checking the box(es) will not increase your tax or reduce your refund.

#### Income and Deductions

Both columns "As Originally Reported" and "Amended" must be completed even if you are not amending all the line items through Line 46. To illustrate, John Smith does not wish to amend Line 16 on his Form NJ-1040X, New Jersey Amended Income Tax Resident Return.

John Smith should complete Line 16 as follows:

Line	As Origii Report	-	Amended (See Instructions)				
16. Dividends	2345	60		2345	60		

For further instructions see "Income" and "Deductions" in the instruction booklet for Form NJ-1040.

# Tax Computation - Line 34

Compute your State tax by using the Tax Rate Schedules below. Choose the correct table for your filing status. Multiply the New Jersey Taxable Income (Line 33) by the applicable tax rate, subtract the proper amount shown on the chart and enter the result on Line 34. If your taxable income on Line 33 is under \$100,000, you may use the Tax Table in the NJ-1040 instruction booklet to determine your tax instead of the Tax Rate Schedules.

#### **1995 Tax Rate Schedules**

For filing Single Married,	status: Filing Separat		Table	Α	
If Line	33 is:				
Over But Not Over		Multiply	(x) T	hen Subtract	= Tax
		Line 33	by:	()	
\$0	\$ 20,000	x .017	-	\$0	
20,000	35,000	x .0212	5 –	85.00	
35,000	40,000	x .0425	) –	828.75	
40,000	75,000	x .0601	3 –	1,533.95	
75,000	and over	x .0658	) –	1,959.20	
For filing	status:				

Head of	Hou	ng Joint F sehold /idow(er)		-	Table	В		
If Line	e 33	is:						
Over But Not Over Multiply (x)						Then Subtract =		
			(-	-)				
\$ 0	\$	20,000	Х	.017	-	\$	0	
20,000 50,000			х	.02125	-		85.00	

х

х

70,000

80,000

#### 80,000 150,000 .06013 2,812.90 х 150,000 and over .06580 3,663.40 х

.02975

.04250

#### Balance Due or Refund - Lines 47 and 48

If your New Jersey Total Tax (Line 38) is larger than your Net Payments (Line 46), subtract Line 46 from Line 38 and enter the result on Line 47. You have a balance due. Make your check payable to "State of New Jersey - TGI."

If your Net Payments (Line 46) are larger than your New Jersey Total Tax (Line 38), subtract Line 38 from Line 46 and enter the result on Line 48. You have overpaid your tax; complete Line 49.

#### Line 49

50,000

70,000

Enter on:

- Line 49A the amount of overpayment (Line 48) to be refunded to you; and/or
- Line 49B the amount of overpayment to be *credited* against your 1996 tax liability.

#### **Explanation of Changes**

In the space provided, explain the reason for changes to income, deductions and/or credits as originally reported. If additional space is needed, attach a rider which includes your name and social security number.

# Credit for Taxes Paid to Other Jurisdiction(s)

If you are amending your credit for income taxes paid to other jurisdictions, complete the formula with your amended figures. Remember to attach a completed copy of the return filed with the other jurisdiction.

= Tax

510.00

1,402.50