NJ-1040 1996



## STATE OF NEW JERSEY INCOME TAX-RESIDENT RETURN

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ic	or social security number	Las	a Name	e, First Name an	o initial go			nitial of each - I	Enter spe	ouse lost re	ne ONLY E		Plac
S	pouse's Social Security Number	Ome Address (Number and Street Including apartment number or such tools)							6 Year	on t			
						200-12							Mai nec son
Co	ounty/Municipality Code (See Table p. 33)	City	, Town,	, Post Office			Stat	ditt	Zip	Code			on on
			ENTER NUMBERS HE						HERE	-			
	(Check only ONE box)		6	Regular	M V	urself	☐ Spou	co.					
co	1. Single								6				
2		U.		Age 65 or Over		urself	□ Spou	SØ	7				
STATU	Z. I warned, ming joint return	Š	8.	Blind or Disable	oled	urself	If Spouse	se	8				
	and the state of t		9.	Number of your	ur qualified dependent ch		ent childre	m			9		
FILING	Number in the boxes provided abo	e SYEMPTIONS	10.	Number of othe	r depende	nts					10		
Ē	Head of Household	Ĺ.	11.	Dependents atte	attending colleges			. 11					
	Qualifying Widow(er)	39	570	Totals (For Line 1	12a - Add I	ines 6,		0			12b		
G	LECTIONS FUND If joint return,	to desig does yo	nate \$1 our spo	1 of your taxes fouse wish to des	ignate \$1°		Ye Ye	s 🗆			Note: If you bookes) it w tax or redu	ill not incr	883
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		NJ-1040 (1998) Page 2
27.	Total Income (From Line 26, page 1)	27
28.	Other Retirement Income Exclusion (See Worksheet and instr. page 17)	28
29.	New Jersey Gross Income (Subtract Line 28 from Line 27)	29
30a.	Exemptions: From Line 12a x \$1,000 =	
30b.	From Line 12b x \$1,500 =	
30c.	Total Exemption Amount (Add Line 30a and Line 30b)	30c
31.	Medical Expenses (See Worksheet and instruction page 18)	31
32.	Alimony and Separate Maintenance Payments	32
33.	Total Exemptions and Deductions (Add Lines 30c, 31 and 32)	33
34.	Taxable Income (Subtract Line 33 from Line 29)	34
35.	Property Tax Deduction (See instruction page 18)	35
36.	NEW JERSEY TAXABLE INCOME (Subtract Line 35 from Line 34)	36
37.	TAX (From Tax Tables, page 35)	37
38.	Credit For Income Taxes Paid to Other Jurisdictions (See instructions)	
39.	Balance of Tax (Subtract Line 38 from Line 37)	
40.	Use Tax Due on Out-of-State Purchases (See instruction page 21)	40
41.	Total Tax (Add Line 39 and Line 40)	41
42.	Total New Jersey Income Tax Withheld (Enclose Forms W-2 and 1099R)	42 2 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
43.	Property Tax Credit (See instruction page 21)	43 [43 [43 [43 [43 [43 [43 [43 [43 [43 [
44.	New Jersey Estimated Tax Payments/Credit from 1995 tax return	
45.	EXCESS New Jersey WD/UI/HC Withheld (See instr. page 21) (Enclose Form I	NJ-2450). 45
46.	EXCESS New Jersey Disability Insurance Withheld (See instr. page 22) (Enclose Form NJ-2450)	
47.	Total Payments/Credits (Add Lines 42 through 46)	
48.	If payments (Line 47) are LESS THAN tax (Line 41) enter AMOUNT OF TAX Y	
	If you owe tax, you may make a donation by entering an amount on Lines	s 52, 53, 54, 55 and/or 56 and adding this to your check amount.
49.	If payments (Line 47) are MORE THAN tax (Line 41) enter OVERPAYMENT and on line 50, page 3	40



lame	(s) as shown on For	m NJ-1040		Y	our Social Security	Number	
	1	NOTE: AN ENTRY ON LINES 51, 52, 53, 54,	55 and/or 56 W	ILL REC	UCE YOUR TAX	REFUND	
50.	Deductions from O	wment (From Line 49, page 2)verpayment on Line 50 which you elect to credi	t to:				
51.	Your 1997 tax			. 51			
52.	7	The N.J. Endangered Wildlife Fund	S10  Other			52	
53.	N.J. Children's Trust Fund To Prevent Child Abuse				ENTER	53	图图   图目
54.	<b>6</b>	The N.J. Vietnam  Veterans' Memorial Fund   \$5	S10 🗆 Other		AMOUNT	54	
55.	X	N.J. Breast Cancer Research Fund	\$10 🔲 Other	cc	NTRIBUTION	55	
56.		The Battleship New Jersey Memorial Fund	\$10 🗆 Other			56	
57.	Total Deductions fro	om Overpayment (Add Lines 51 through 56)		. 57			
58.	REFUND (Amount	to be sent to you, Line 50 LESS Line 57)		58			
		Schedule 1 - Prope	rty Tay Dedi	iction/	Credit		
		er the property tax you paid in 1996. Renters ente uction. Enter 50% of Line 1 (Line 1 x .50) or \$2, see Instructions.			o enter this amount		Column P
	on one 4 below. 2	ree instructions.		0	Column A	2	Column B
		opy from Line 34 of your NJ-1040)		3.		3.	- 0 -
		ction (Copy from Line 2 of this schedule)		5.		5.	- 0 -
5		ter Property Tax Deduction (Subtract Line 4 from on Line 5 amount (Go to Tax Tables or Tax Rate		-		-	
1		of the 5 around (30 to lax lables of lax has		6.		6.	
7	Is this amount \$2  Yes. You re on Lir  No. You re	6, Column A from Line 6, Column B and enter the for more? seeive a greater tax benefit by taking the Property is 35 of Form NJ-1040. Make no entry on Line 4 seeive a greater tax benefit by taking the Property no entry on Line 35 of Form NJ-1040 and complete.	Tax Deduction. E 3 of Form NJ-1040 Tax Credit. Enter	inter the and co \$25 on	nplete the balance Line 43 of Form NJ	of the retur	
	Under the penalties of pincluding accompanying	perjury, I declare that I have examined this income tax in g schedules and statements, and to the best of my kin n other than taxpayer, this declaration is based on all i	nowledge and belief	, it is true	, correct, and comple	ge. Write s check payabl STATE	OF NEW JERSEY - TO
SIGN HERE	Your Signature	ir Signature Date				with yo	our check or money order our payment voucher 40-V) in the small window pe.
z	Spouse's Signature	(If filing jointly, BOTH must sign)	Da	de			our return in the larger pe and affix the
5 1	you do not need	forms mailed to you next year, check box (S	ee instruction pag	ge 8)		approp	riate mailing label.
	Paid Preparer's Signature Federal Identification				er	on line	have an amount due o 48 use the label for 1. If not, use the label
	imn's Name	The second secon	Federal Employer	Identifica	tion Number	-	