NJ-1065 **2020**



New Jersey Partnership Return Gross Income Tax

For Calendar Year 2020, or Tax Year B	eginning	, 2020 ar	nd Ending	, 20		
Legal Name of Taxpayer						
Trade Name of Business if different from legal nar	me above					
Address (number and street or rural route)						
City or Post Office		State	ZIP C	^ohe		
Oity of 1 out office		Otato	211 0	Joue		
You Must Enter Your Federal EIN						
Federal EIN	# of	Resident	Partners			
Principal Business Activity	# of	Nonresid	ent Partners with Physica	l Nexus to N.I		
Timopal Business Activity		1401110010	oner araioro wiarr riyoloa	THORGO TO THE		
Date Business Started	# of	Nonresid	ent Partners without Phys	ical Nexus to NJ		
l <u>—</u>	Check applicable boxes		nyaatmant Club			
☐ Initial Return☐ Final Return			nvestment Club Composite Return is Filed	for Nonresident Partners		
Amended Return		_	Controlling Interest Transfe			
Application for Federal Extension is Attach	ed	☐ Tiered Partnership				
Substitute Method of Allocation Granted			General Partnership			
☐ Complete Liquidation		□ L	☐ Limited Partnership			
Qualified Investment Partnership		□ L	imited Liability Company			
Listed on U.S. National Stock Exchange		□ L	Limited Liability Partnership			
☐ Hedge Fund						
Partnership Income		A	Column A Amount From All Sources	Column B Amount From NJ Sources		
Ordinary Income (loss) from trade or business and	ctivities (See instructions)	1.				
Net income (loss) from rental real estate activitie	s	2.				
Net income (loss) from other rental activities		3.				
Guaranteed payments to partners		4.				
5. Interest income		5.				
6. Dividend income		6.				
7. Royalty income		7.				
Net gain (loss) from disposition of property		8.				
9. Net IRC section 1231 gain (loss)						
10. Other Income (loss)						
11. Tax-exempt interest income						
12. Subtotal (Add lines 1 through 11)		12.				
13a. Taxes based on income						
13b. Other additions – specify:	13b.					
13c. Total additions (Add lines 13a and 13b)		13c.				
14. Subtotal (Add lines 12 and 13c)						



Federal	EIN
1	

Par	tnership Income		Column A Amount From All Source	es	Column B Amount From NJ Sources
15a.	Net Income (loss) from rental real estate activities	15a.			
15b.	Net gain (loss) from disposition of real property				
15c.	Guaranteed payments to partners	15c.			
15d.	Interest income from federal obligations	15d.			
15e.	Interest income from NJ obligations	15e.			
15f.	IRC section 179 expense	15f.			
15g.	Other subtractions – specify:	15g.			
15h.	Total subtractions (Add lines 15a through 15g)		15h.		
16a.	Subtotal (Subtract line 15h from line 14)		16a.		
16b.	NJ Allocation (Line 16a times business allocation % of -	%)	16b.		
17.	Net income (loss) from rental real estate activities (See	instructions)	17.		
18.	Net gain (loss) from disposition of real property		18.		
19.	Net partnership income (loss) (Total lines 16a, 17, and 7 (Total lines 16b, 17, and 1	18 of column A) 18 of column B)	19.		
20.	Income (loss) from tiered partnership	20.			
21.	Partnership income (loss) (Total lines 19 and 20)		21.		
22a.	Guaranteed payments to partners		22a.		
22b.	Guaranteed payments to partners – pension		22b.		
22c.	Net guaranteed payment to partners (Subtract line 22b	from line 22a)	22c.		
23.	Net gain (loss) from disposition of assets as a result of	a complete liquidation	23.		
24.	Total Nonresident Noncorporate Partners Share of Tax (Line 2c, column J of Partners Directory)		24.		
25.	Total Nonresident Corporate Partners Share of Tax				
Dar	(Line 2c, column K of Partners Directory)		25.		
	tnership Filing Fee			1 .	
1a.	Number of Resident Partners	x \$150.00 =	=	1a.	
1b.	Number of Nonresident Partners with Physical Nexus to New Jersey	x \$150.00 =	=	1b.	
1c.	Number of Nonresident Partners without Physical Nexus to New Jersey	x \$150.00 x	Corporation =	1c.	
		*****	Allocation Factor		
1d.	Filing Fee (Add lines 1a–1c, but do not enter more than			1d.	
2.	Installment Payment			2.	
3.	Less: Installment Payment from 2019			3.	
4.	Less: PART-200-T Payment			4.	
5.	Balance Due			5.	
6.	Refund			6.	1

Partnership name as shown on Form NJ-1065

	043WD01200	
	043WD01200	

∭ 043⊽	VD0120	00	

Federal EIN		

						''	· ···					
Pa	rtners D	irectory	List	all partners, includ	ding principal addre	ess. Add additiona	l sheets as necess	ary. 1. Corpo	ration Allocation Fa	actor •		
Α		В		С	D	E	F	G	Н	l I	J	к
Code	SS Number or FEIN Name and Principal Address		Distributive Share of Partnership Income (Loss)		Net Gain (Loss) From Disposition of Assets as a Result of a Complete Liquidation Pension		Nonresident Partner's		Nonresident			
Code			ress	Total Distribution	NJ Source	Total Gain (Loss)	NJ Source	i ension	Share of Total Income	Share of NJ Income	Noncorporate Partner's Share of Tax	Corporate Partner's Share of Tax
	% owned by Partner	Fina	ıl 🗌									
i												
	% owned by Partner Final Final		al 🗌									
	% owned by Partner	Fina	al 🗌									
				<u> </u> 								
				2a. Total this pag	I ne. Enter zero if no	tax is reported in	column(s) J and/or	K.	<u> </u>			
							ned. Enter zero if no		n column(s) J and/o	or K.		
				2c. Total tax (Add	d lines 2a and 2b).	Enter the totals he	ere.					
Signature of General Partner or Limited Liability Company Member. Under penalties of perjury, I declare belief, it is true, correct, and comple			are that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge plete. Declaration of preparer (other than general partner) is based on all information of which preparer has any knowledge					nowledge and knowledge.				
Paid Preparer's Signature						Date Check if Self-Employed						
Date				Firm's Name (or	yours if self-emplo	yed)				Preparer's SS #		
				Preparer's Addre	ess				Preparer's Fede	Preparer's Federal EIN		
A cor	mplete federal	Form 1065 inclu	iding all s	chedules and sup	porting attachme	ents may be requ	ired during the co	ourse of an audit				

Partnership name as shown on Form NJ-1065

043WD02200	
043WD02200	

Page

of

Partners Directory List all partners, including principal address. Add additional sheets as necessary. В С Ε F G Н J Κ Net Gain (Loss) From Disposition Distributive Share of Partnership of Assets as a Result of a Nonresident Partner's Nonresident Income (Loss) Complete Liquidation SS Number or FEIN Code Pension Name and Principal Address Noncorporate Corporate Total **Total Gain** Share of Total Share of NJ NJ Source NJ Source Partner's Share Partner's Share Distribution (Loss) Income Income of Tax of Tax % owned Final by Partner **Total This Page** Enter zero if no tax is reported in column(s) J and/or K.

Partnership name as shown on Form NJ-1065

043WD03200	
043WD03200	

ederal	EIN		

Page

of

Partners Directory List all partners, including principal address. Add additional sheets as necessary. С F G Н J Κ Net Gain (Loss) From Disposition Distributive Share of Partnership of Assets as a Result of a Nonresident Partner's Nonresident Income (Loss) Complete Liquidation SS Number or FEIN Code Pension Name and Principal Address Corporate Noncorporate Total **Total Gain** Share of Total Share of NJ NJ Source NJ Source Partner's Share Partner's Share Distribution (Loss) Income Income of Tax of Tax % owned Final by Partner % owned Final by Partner % owned Final 🗌 by Partner % owned Final by Partner **Total This Page** Enter zero if no tax is reported in column(s) J and/or K.

Schedule NJK-1 (Form NJ-1065)

State of New Jersey Partner's Share of Income

2020

Part I **General Information** Partner's SS # or Federal EIN (Do not use EIN of a disregarded entity. See instr.) Partnership's Federal EIN Partner's Name Partnership's Name Street Address Partnership's Street Address City State ZIP Code ZIP Code Enter partner's percentage of: What type of entity is partner? (see instructions) ___ (i) Before Decrease (ii) End of Year or Termination Date partner's interest in partnership began: -**Profit Sharing** Month Day Year ☐ Hedge Fund ☐ Final NJK-1 Loss Sharing Amended NJK-1 Member of Composite Return Capital Ownership __ If the partner is a disregarded entity, check the box and enter the partner's: Federal EIN Name Part II **Income Information** NJ-1040 Filers **B. New Jersey Source** A. Total Distribution Income Classification **Enter Amounts on Line** NJ-1040NR Filers Amounts **Shown Below** 1. Partnership Income (Loss) 2. Net Guaranteed Payments 3. Partner's 401(k) Contribution 4. Distributive Share of Partnership Line 21 Line 23 Income (loss) (Line 1 plus line 2 minus line 3) 5. Pension Line 20a 6. Net Gain (Loss) From Disposition of Assets as a Line 19 Line19 Result of a Complete Liquidation Part III **Partner's Information** Line 10b, Page 1, CBT-100 Line 8b, Page 1, CBT-100S Line 10, Page 1, CBT-100U Line 8, NJ-CBT-1065 Line 51, NJ-1040NR Line 23, NJ-1080C Nonresident Partner's Share of NJ Tax..... Line 34a, NJ-1041 2. Partner's HEZ Deduction 3. Partner's Sheltered Workshop Tax Credit..... Part IV **Supplemental Information (Attach Schedule)**

NJ-1065 – 2020 Schedule A

Part	nership name as shown on Form NJ-1065	Federal EIN						
Sc	Schedule A Tiered Partnerships							
	(Complete this schedule before comp	leting	Form NJ-1065 or Scheo	dule L, if applicable)				
Ра	rt I Partnership Income	Column A Amounts Reported by This Partnership on Federal Schedule K		Column B Portion of Amount in Column A Earned by Other Partnerships	Column C Amount Earned by This Partnership (A minus B)			
1.	Ordinary income (loss) from trade or business activities	1.						
2.	Net income (loss) from rental real estate activities	2.						
3.	Net income (loss) from other rental activities	3.						
4.	Guaranteed payments to partners	4.						
5.	Interest Income	5.						
6.	Dividend Income	6.						
7.	Royalty Income	7.						
8.	Net gain (loss) from disposition of property	8.						
9.	Net IRC section 1231 gain (loss)	9.						
10.	Other income (loss)	10.						
11.	Tax-exempt interest income	11.						
Use	Use the amounts reported in column C to complete lines 1 through 11 of Form NJ-1065 or column A of Schedule L, if applicable.							

Lines 1-11

- Column A: Follow the instructions for lines 1-11 of the NJ-1065.
- Column B: Enter the portion of each amount reported in column A that was derived from other partnerships. For each line, this will be the sum of the amounts reported for the corresponding category on the federal Schedule K-1(s) furnished to your partnership by each subsidiary partnership in which it is a member.
- Column C: For each line 1 through 11, subtract the amount reported in column B from the amount reported in column A. Enter the difference in column C of that line and on the corresponding line on the front of Form NJ-1065 or in column A of Schedule L, if applicable. Follow the instructions for lines 1 through 11 of the NJ-1065.

Part II		Summary of Schedule NJK-1(s) or Federal K-1(s) Received From Other Partnerships (Attach copies of all Schedule NJK-1(s) Received)					
				NJ Distributive Share	NJ Distributive Share of Partnership Income		
12.	NJK-1	Partnership Name	Federal EIN	Column A Amount from All Sources	Column B Amount from NJ Sources	Column C Share of NJ Tax	
Α							
В							
С							
D							
E							
	13 Tota	al Income (Loss) and Tay from Tigred Partnershi	ne 1	2			

- Line 12: Check the box to indicate if you received a Schedule NJK-1. List the Name, Federal EIN, and Distributive Share of Partnership Income or Loss reported on line 4, columns A and B of Part II and/or Net Gain (Loss) From Disposition of Assets as a Result of a Complete Liquidation reported on line 6, columns A and B of Part II, and Share of NJ Tax reported on line 1 of Part III of each Schedule NJK-1 this partnership received from another partnership. If you did not receive a Schedule NJK-1, you will have to use the information from your federal Schedule K-1 to complete Reconciliation Worksheet A to determine the proper amount to report as your distributive share of partnership income for New Jersey purposes. See Tax Topic Bulletin GIT-9P, Income From Partnerships.
- Line 13: Add the amount(s) on line 12, columns A, B, and C and enter the result on line 13, columns A, B, and C. Carry totals in columns A and B to line 20 of Form NJ-1065.

NJ-	NJ-1065 – 2020 Schedule B							
Partn	ership name as shown or	n Form NJ-1065		Federal EIN				
Sc	hedule B	it For Tax Years						
		Beginning Af	ter January 12, 20	006				
Par	t I Qualific	ations						
1. Is	each employee for which	a credit is claimed a "Qualif	ied Person" in accordance with P.L	2005, c. 318?	YES NO			
	2. Did each employee for which a credit is claimed work for at least 26 weeks during the privilege period and work at least 25 hours per week at or under the supervision of a sheltered workshop?							
NOTI	NOTE: If the answer to either of the above questions is "NO," do not complete the rest of this form. The taxpayer does not qualify for the Sheltered Workshop Tax Credit. Otherwise, go to Part II.							
Par	t II Calculat	tion of the Availab	le Sheltered Worksho	p Tax Credit for Part	nerships			
		umn (A) Iame	Column (B) Social Security #	Column (C) Total Wages	Column (D) 20% of Column C – Max \$1,000			
3.	3.							
4.								
5.								
6.								

Column A

Enter the name of each qualified person employed by your partnership.

Column F

Enter the Social Security number of each qualified person employed by your partnership.

Available Sheltered Workshop Tax Credit (Add lines 3 through 7).....

Column C

Enter the salary and wages paid during the tax year.

Column D

Enter the lesser of 20% of column C or \$1,000 per qualified person.

^{*} If there are more names, attach a schedule corresponding to Part II.

NJ-1065 - 2020 Schedule J Partnership name as shown on Form NJ-1065 Federal EIN Schedule J **Corporation Allocation Schedule** A partnership that is not a qualified investment partnership, investment club, and that is not listed on a United States National Stock Exchange but has a nonresident noncorporate or nonresident corporate partner should complete Schedule J. This schedule should be omitted if the taxpayer does not have receipts outside New Jersey; the allocation factor will be 100% (1.000000). Schedule J is not required for a partnership that meets hedge fund status if its only nonresident partners are individuals, estates, or trusts. Schedule J is required if the partnership includes nonresident partners who do not have physical nexus to New Jersey and the partnership wishes to allocate the filing fee. Part I All Allocating Companies Must Answer the Following: (a) Explain in detail internal controls used in distribution of receipts in and out of New Jersey, as shown in Part II _ (b) State the location of the actual seat of management or control of the partnership Part II Computation of Allocation Factor Amounts (omit cents) 1. Receipts: (a) From sales of tangible personal property shipped to points within New Jersey. (b) From services if the benefit of the service is received in New Jersey. (c) From rentals of property situated in New Jersey. Complete by carrying the fraction to six (6) decimal places. Do not (d) From royalties for the use in New Jersey of patents, copyrights, and trademarks. express as a percent. Example: (e) All other business receipts earned in New Jersey. = 123456 1.000,000 (f) Total New Jersey receipts (Total of lines 1(a) to 1(e), inclusive). (g) Total receipts from all sales, services, rentals, royalties, and other business transactions everywhere. (h) Allocation Factor (Percentage in New Jersey (line 1(f) divided by line 1(g)). Enter result in line 1(h) and carry to line 1 of the Partners Directory on page 3

of Form NJ-1065.

Instructions for Schedule J Corporation Allocation Schedule

General Instructions

Schedule J can be omitted if the taxpayer does not have activity outside New Jersey.

In calculating the allocation factor, division must be carried to six decimal places, e.g., .123456. Only receipts attributable to the partnership entity are to be used in calculating the allocation factor denominators.

Effective for returns beginning on or after July 1, 2010, all partnerships are entitled to allocate.

Effective for returns beginning on or after January 1, 2016, all returns will have a 100% weighted receipts fraction only.

Part II – Computation of Allocation Factor Line 1a–1d

Receipts Fraction. Receipts from sales of tangible personal property are allocated to New Jersey if the goods are shipped to points within New Jersey.

Receipts from the sale of goods are allocable to New Jersey if shipped to a New Jersey or a non-New Jersey customer where possession is transferred in New Jersey. Receipts from the sale of goods shipped to a taxpayer from outside New Jersey to a New Jersey customer by a common carrier are allocable to New Jersey. Receipts from the sale of goods shipped from outside New Jersey to a New Jersey location where the goods are picked up by a common carrier and transported to a customer outside of New Jersey are not allocable to New Jersey.

Receipts from the following are allocable to New Jersey; services performed if the benefit of the services is received in New Jersey; rentals from property situated in New Jersey; royalties from the use in New Jersey of patents or copyrights, and trademarks; all other business receipts earned in New Jersey.

Lines 1(e) and 1(g)

Receipts From Sales of Capital Assets. Receipts from sales of capital assets (property not held by the taxpayer for sale to customers in the regular course of business), either within or outside New Jersey, should be included in the numerator and the denominator based on the net gain recognized and not on gross selling prices. Where the taxpayer's business is the buying and selling of real estate or the buying and selling of securities for trading purposes, gross receipts from the sales of such assets should be included in the numerator and the denominator of the receipts fraction.

New Jersey Gross Income Tax Business Allocation Schedule

Use this schedule if business activities are carried on both inside and outside New Jersey or if business activities are carried on 100% outside New Jersey.

		This form must be enclosed	and filed with your	New Je	rsey Income Tax return.			
Ente	er name, address, and Social Security/fe	ederal employer identification nun	nber as shown on F	orm NJ	-1040NR, Form NJ-1041	, or Fo	rm NJ-1065.	
Legal name of taxpayer					Social Security Number/Federal EIN			
Trade name of business if different from legal name above				For the Tax Year End (Month, Day, Year)	ding			
Addı	ress (number and street or rural route)							
City	or Post Office	State	ZIP Code					
	ction 1 – Business Local places BOTH INSIDE AND OUTSID		carried on.					
	(a) Street Address	(b) City and State	(c) Des	cription	of Business Location		. ,	eck One
							Rent	Own
1.								
2.								
3.								
4.							Ш	
Se	ction 2 – Average Value	S						
				Average Values				
Ass	ets (See Instructions)			Column A Column B Everywhere New Jersey				
1.	. Real Property Owned			1.		1.		
2.	2. Real and Tangible Property Rented			2.		2.		
3.	Tangible Personal Property Owned					3.		
4. TOTALS (Add lines 1–3 in each column)				4.		4.		
60	otion 2 Puoinggo Alla	action Darcontogo						
_	ction 3 – Business Allocage Values of Property:	cation Percentage						
	In New Jersey (From Section 2, colum	nn B. line 4)		1a.				
1b.	Everywhere (From Section 2, column	•		1b.				
1c.	Percentage in New Jersey (Divide line					1c.		%
_	I Receipts From All Sales, Services, and							
2a.	2a. In New Jersey							
2b.	b. Everywhere			2b.				
2c. Percentage in New Jersey (Divide line 2a by line 2b)						2c.		%
Wages, Salaries, and Other Personal Compensation Paid During the Year:								
3а.	a. In New Jersey			3a.				
3b.	b. Everywhere			3b.				
3c. Percentage in New Jersey (Divide line 3a by 3b)						3c.		%
4.	4. Sum of New Jersey Percentages (Add lines 1c, 2c, and 3c)					4.		%
5.	5. Business Allocation Percentage. (Divide the total on line 4 by 3; if less than 3 fractions, see instructions)					5		%

NJ-NR-A Instructions

If business activities are carried on *both inside and outside New Jersey*, business income may be allocated to determine the amount of income from New Jersey sources.

Be sure that Form NJ-NR-A is enclosed with Form NJ-1040NR, NJ-1041, or NJ-1065, and that the name and address on the Business Allocation Schedule agree exactly with the name and address on the return with which it is enclosed.

Section 1 – Business Locations

Use Section 1 to list the locations where the business activities are conducted. In columns (a) and (b), list the exact locations at which the business carries on activities both inside and outside the State. List all business locations. In column (c), describe the places listed in columns (a) and (b) (i.e., branch office, agency, factory, warehouse, etc.). In column (d), indicate whether the business rents or owns each location listed. Enclose additional sheets if necessary.

Section 2 – Average Values

Use Section 2 to determine the average values of your business assets. The average value of property owned is determined by adding (1) the book value of the property at the beginning of the tax year and (2) the book value of the property at the end of the tax year and dividing the sum by two.

The average value of property rented or leased is valued at eight times the annual rent. Rent includes any amounts paid in addition to, or accrued in lieu of, rent for the period covered by the return (such as interest, taxes, insurance, and repairs).

Line 1 – Real Property Owned Column A

Enter on line 1, column A, the average value of the real property listed in Section 1 that was owned for the period covered by the return. Include property located both inside and outside New Jersey.

Column B

Enter on line 1, column B, the average value of the real property listed in Section 1 that was owned in the State. Include only property located in New Jersey.

Line 2 – Real and Tangible Property Rented Column A

Enter on line 2, column A, the average value of property, both real and tangible, that was rented for the period covered by the return. Include property located both inside and outside New Jersey.

Column B

Enter on line 2, column B, the average value of property, both real and tangible, that was rented in the State. Include only property located in New Jersey.

Line 3 – Tangible Personal Property Owned Column A

Enter on line 3, column A, the average value of the tangible personal property that was owned and used in the business for the period covered by the return. Include property located both inside and outside New Jersey.

Column B

Enter on line 3, column B, the average value of the tangible personal property that was owned and used in the business in the State. Include only property located in New Jersey.

Line 4 - Totals

Column A

Add lines 1–3 of column A and enter the total on line 4, column A.

Column B

Add lines 1–3 of column B and enter the total on line 4, column B.

Section 3 – Business Allocation Percentage

Use Section 3 to determine the business allocation percentage that must be applied to business income. The business allocation percentage must be applied to business income from all sources in order to determine the amount from New Jersey sources.

Line 1 – Average Values of Property Line 1a – In New Jersey

Enter on line 1a the average values of the business property in New Jersey from line 4, column B, Section 2.

Line 1b - Everywhere

Enter on line 1b the average values of the business property from everywhere (both inside and outside New Jersey) from line 4, column A, Section 2.

Line 1c - Percentage in New Jersey

Divide the amount on line 1a by the amount on line 1b. The result will be 100% or less. Enter the result on line 1c.

Line 2 – Total Receipts From All Sales, Services, and Other Business Transactions

Line 2a - In New Jersey

Enter on line 2a the total of receipts from all sales made, services performed, and business transactions conducted in New Jersey during the period covered by the return. This includes sales made and services performed by partners, employees, agents, agencies, or independent contractors of the business situated at or sent out from, the offices of the business (or its agencies) located in New Jersey. For example, if a salesperson working out of the New Jersey office of the business covers the states of New Jersey, New York, and Pennsylvania, all sales made are to be allocated to New Jersey and reported on line 2a.

Line 2b - Everywhere

Enter on line 2b the total of receipts from all sales made, services performed, and business transactions conducted both inside and outside New Jersey during the period covered by the return.

Line 2c - Percentage in New Jersey

Divide the amount on line 2a by the amount on line 2b. The result will be 100% or less. Enter the result on line 2c.

Line 3 – Wages, Salaries, and Other Personal Compensation Paid During the Year Line 3a – In New Jersey

Enter on line 3a the total of wages, salaries, and other personal compensation paid to employees in connection with operations carried on in New Jersey during the period covered by the return. Compensation is paid in connection with operations carried on in New Jersey if work is based in an office or other place of business located in New Jersey. Include only amounts paid to employees on line 3a. **Do not include payments to independent contractors, independent sales agents, etc.**

Line 3b - Everywhere

Enter on line 3b the total compensation paid to employees both inside and outside New Jersey during the period covered by the return. **Do not include payments to independent contractors, independent sales agents, etc.**

Line 3c - Percentage in New Jersey

Divide the amount on line 3a by the amount on line 3b. The result will be 100% or less. Enter the result on line 3c.

Line 4 – Sum of New Jersey Percentages

Add lines 1c, 2c, and 3c and enter the total on line 4.

Line 5 - Business Allocation Percentage

Divide the total on line 4 by three and enter the result on line 5. Also enter this percentage on the appropriate line of the following returns:

- Part III, Form NJ-1040NR;
- Line 16b, Form NJ-1065;
- Schedule D, Form NJ-1041.

If one of the fractions (property, receipts, or payroll) is missing, the other two percentages are added and the sum is divided by two. If two of the fractions are missing, the remaining percentage can be used as the allocation factor. A fraction is not missing merely because its numerator is zero, but is missing if its denominator is zero.

NJ-1065E **2020**

New Jersey – Corporate Partner's Statement of Being an Exempt Corporation or Maintaining a Regular Place of Business In New Jersey

		<u> </u>		/	111011 00100			
		EIN	Name of Filing Entity					
⊢	ty ation	Mailing Address						
PART 1 Entity Information		City		State	ZIP Code			
		Person to Contact		Tele	phone Number			
		Federal EIN	Name of Filing Entity					
PART 2	Partner Information	Principal Address						
d	Pg	City		State	ZIP Code			
			Maintains a Regular Pla	ace of Business				
			at it maintains a regular plac	e of business in New Jers	ey other than a statutory office and is subject to			
	A "regular p	lace of business" is any bona fide office supied, and used by the partner in carryi	(other than a statutory office) ng on its business and in wh), factory, warehouse, or c nich one or more regular e	ther space of the partner that is regularly main -mployees are in attendance. To maintain a place			
		, the partner must either own or rent the s of at least one such regular place of bu	•	borne directly by the part	ner and not by some related entity or person.			
	Failure to li	st at least one regular place of business	will result in the partnership	entity remitting a payment	of tax on your share of New Jersey income.			
	By signing	signing this statement, the corporation is declaring that it is exempt from the Corporation Business Tax Act pursuant to N.J.S.A. 54:10A-3.						
	By signing	this statement, the corporate partner is d	eclaring that it is an exempt	IRC 501(c)(3) entity.				
Ш	By signing	this statement, the corporate partner is d	eclaring that it is a retiremen	it plan approved by the Inf	ernal Revenue Service.			
I furti	her understa	and that this statement:						
1.	. Must be n	nade annually; and						
2	2. Must not be made after the 15th day of the fourth month succeeding the close of the privilege period or after the return has been filed, whichever occurs first; and							
3.	3. Does not relieve the partnership of the requirement to remit tax to the Division on the corporate partner's behalf if, for any reason, the corporate partner does not meet the criteria of being an exempt corporation or maintaining a regular place of business in New Jersey; and							
4.	4. Requires the corporate partner to notify the partnership and the Division of Taxation immediately in writing if the corporate partner submitted this form to the partnership in error.							
	Under penalties of perjury, I declare that I have examined this statement, and to the best of my knowledge and belief, it is true and correct and that I am properly authorized to sign and make this consent on behalf of:							
			Name of Ent	ity				
		Signature of Corporate O General Partner or Limited Liabi			Date			

THIS FORM MAY BE REPRODUCED
AND MUST BE RETAINED BY THE FILING ENTITY

N.J.S.A. 54:10A-3. Exempt corporations

The following corporations shall be exempt from the tax imposed by this act:

- (a) Corporations subject to a tax assessed upon the basis of gross receipts, other than the alternative minimum assessment determined pursuant to section 7 of P.L. 2002, c.40 (C.54:10A-5a), and corporations subject to a tax assessed upon the basis of insurance premiums collected;
- (b) Corporations which operate regular route autobus service within this State under operating authority conferred pursuant to R.S. 48:4-3, provided, however, that the corporations shall not be exempt from the tax on net income imposed by section 5(c) of P.L. 1945, c.162 (C.54:10A-5);
- (c) Railroad, canal corporations, production credit associations organized under the Farm Credit Act of 1933, or agricultural cooperative associations incorporated or domesticated under or subject to chapter 13 of Title 4 of the Revised Statutes and exempt under Subtitle A, Chapter 1F, Part IV, Section 521 of the federal Internal Revenue Code (26 U.S.C. s.521);
- (d) Cemetery corporations not conducted for pecuniary profit or any private shareholder or individual;
- (e) Nonprofit corporations, associations or organizations established, organized or chartered, without capital stock, under the provisions of Title 15, 16 or 17 of the Revised Statutes, Title 15A of the New Jersey Statutes or under a special charter or under any similar general or special law of this or any other state, and not conducted for pecuniary profit of any private shareholders or individual;
- (f) Sewerage and water corporations subject to a tax under the provisions of P.L. 1940, c.5 (C.54:30A-49 et seq.) or any statute or law imposing a similar tax or taxes;
- (g) Nonstock corporations organized under the laws of this State or of any other state of the United States to provide mutual ownership housing under federal law by tenants, provided, however, that the exemption hereunder shall continue only so long as the corporations remain subject to rules and regulations of the Federal Housing Authority and the Commissioner of the Federal Housing Authority holds membership certificates in the corporations and the corporate property is encumbered by a mortgage deed or deed of trust insured under the National Housing Act (48 Stat.1246) as amended by subsequent Acts of Congress. In order to be exempted under this subsection, corporations shall annually file a report on or before August 15 with the commissioner, in the form required by the commissioner, to claim such exemption, and shall pay a filing fee of \$25;
- (h) Corporations not for profit organized under any law of this State where the primary purpose thereof is to provide for its share-holders or members housing in a retirement community as the same is defined under the provisions of the "Retirement Community Full Disclosure Act," P.L. 1969, c.215 (C.45:22A-1 et seq.);
- (i) Corporations which are licensed as insurance companies under the laws of another state, including corporations which are surplus lines insurers declared eligible by the Commissioner of Banking and Insurance pursuant to section 11 of P.L. 1960, c.32 (C.17:22-6.45) to insure risks within this State; and
- (j) (1) Municipal electric corporations that were in existence as of January 1, 1995, provided that all of their income is from sales, exchanges or deliveries of electricity derived from customers using electricity within their municipal boundaries; and (2) Municipal electric utilities that were in existence as of January 1, 1995, provided that all of their income is from sales, exchanges or deliveries of electricity derived from customers using electricity within their franchise area existing as of January 1, 1995. If a municipal electric corporation derives income from sales, exchanges or deliveries of electricity from customers using the electricity outside its municipal boundaries, the municipal electric corporation shall be subject to the tax imposed by this act on all income. If a municipal electric utility derives income from sales, exchanges or deliveries of electricity from customers using electricity outside its franchise area existing as of January 1, 1995, the municipal electric utility shall be subject to the tax imposed by the act on all income.
- (k) A rural electric cooperative which is exclusively owned and controlled by the members it serves and is subject to the provisions of P.L. 2017, c.297 (C.48:24-1 et al.), provided that all of the cooperative's income from the sale and distribution of electricity is derived from sales, exchanges, or deliveries of electricity to members using electricity within its franchise area. If a rural electric cooperative derives income from sales, exchanges, or deliveries of electricity from customers using electricity outside its franchise area, that rural electric cooperative shall be subject to the tax imposed by this act on income derived from those sales, exchanges, or deliveries.

L.1945, c.162, s3; amended 1949, c.236, s.1; 1951, c.130; 1960, c.174, s.1; 1963, c.59; 1967, c.48; 1972, c.211, s.4; 1973, c.275; 1975, c.170, s.1; 1991, c.184, s.22; 1993, c.338; 1997, c.162, s.1; 1998, c.114, s.1; 2002, c.40, s.2; 2017, c.297, s.20

		Ne	New Jersey Gross Income Tax Partnership Payment Voucher				
NJ-1065-V 2020		For	period beginning	, 2020 and ending	, 20		
Federal Employer ID Nu	umber (required)			Return this voucher with payment to: Filing Fee on Partnerships			
Partnership Name				PO Box 642 Trenton, NJ 08646-0642			
Mailing Address							
City, Town, Post Office		State	ZIP Code		-		
Make checks payable to "State of New Jersey – PART." Write federal ID number and tax year on the check.				Enter amount of payment here:	00		

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