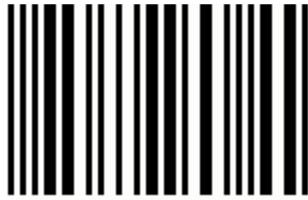


NJ-1040NR
2011



STATE OF NEW JERSEY
INCOME TAX - NONRESIDENT RETURN

For Taxable Year January 1, 2011 - December 31, 2011

Or Other Taxable Year Beginning _____, 2011

Ending _____, 20__

5-N

Check box if application for Federal extension is attached or enter confirmation number _____

FOR PRIVACY ACT NOTIFICATION SEE INSTRUCTIONS	Your Social Security Number _____	Last Name, First Name and Initial (Joint filers enter first name and initial of each - Enter spouse/CU partner last name ONLY if different)			Place label on form if all preprinted information is correct. Otherwise, print or type your name and address.
	Spouse's/CU Partner's Social Security Number _____	Home Address (Number and Street, including apartment number or rural route)			
	↑ You must enter your SSN(s) above ↑ State of Residency (outside NJ) _____	City, Town, Post Office	State	Zip Code	
	NJ RESIDENCY STATUS If you were a New Jersey resident for ANY part of the taxable year, give the period of New Jersey residency. From _____ To _____ MONTH DAY YEAR MONTH DAY YEAR				
Filing Status (Check only ONE box)		EXEMPTIONS		6. Regular <input checked="" type="checkbox"/> Yourself <input type="checkbox"/> Spouse/CU Partner <input type="checkbox"/> Domestic Partner 7. Age 65 or Over <input type="checkbox"/> Yourself <input type="checkbox"/> Spouse/CU Partner 8. Blind or Disabled <input type="checkbox"/> Yourself <input type="checkbox"/> Spouse/CU Partner 9. Number of your qualified dependent children 10. Number of other dependents 11. Dependents attending colleges (See Instr. page 15) 12. Totals (For Line 12a - Add Lines 6, 7, 8, and 11) (For Line 12b - Add Line 9 and Line 10)	6 7 8 9 10 11 12a 12b
1. <input type="checkbox"/> Single 2. <input type="checkbox"/> Married/CU Couple, filing joint return 3. <input type="checkbox"/> Married/CU Partner, filing separate return Name and SSN of Spouse/CU Partner _____ 4. <input type="checkbox"/> Head of household 5. <input type="checkbox"/> Qualifying widow(er)/Surviving CU Partner		13. Dependent's Last Name, First Name, Middle Initial Dependent's Social Security Number Birth Year a _____ / / _____ b _____ / / _____ c _____ / / _____ d _____ / / _____			
GUBERNATORIAL ELECTIONS FUND → Do you wish to designate \$1 of your taxes for this fund? If joint return, does your spouse/CU partner wish to designate \$1?		Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	Note: If you check the "Yes" box(es), it will not increase your tax or reduce your refund.		
		(Column A) AMOUNT OF GROSS INCOME (EVERYWHERE)		(Column B) AMOUNT FROM NEW JERSEY SOURCES	
14. Wages, salaries, tips, and other employee compensation		14		14	
15. Interest		15		15	
16. Dividends		16		16	
17. Net profits from business (Enclose copy of Federal Schedule C, Form 1040)		17		17	
18. Net gains or income from disposition of property (From Line 59)		18		18	
19. Net gains or income from rents, royalties, patents, and copyrights (From Line 62)		19		19	
20. Net gambling winnings (See Instruction page 21)		20		20	
21. Pensions, Annuities, and IRA Withdrawals		21			
22. Distributive Share of Partnership Income		22		22	
23. Net pro rata share of S Corporation Income		23		23	
24. Alimony and separate maintenance payments received		24		24	
25. Other - State Nature and Source _____		25		25	
26. TOTAL INCOME (Add Lines 14 through 25)		26		26	
27a. Pension Exclusion (See Instruction page 26)		27a			
27b. Other Retirement Income Exclusion (See Worksheet and Instructions page 26)		27b		27b	
27c. Total Exclusion Amount (Add Line 27a and Line 27b)		27c		27c	
28. Gross Income (Subtract Line 27c from Line 26)		28		28	

State Income Tax Return Forms

You can prepare and efile this tax form on efile.com as part of your current Federal and/or State Tax Return on from:

Early January until mid October

[You can start, prepare, and efile your tax return now](#)

You will just need to answer a few tax questions and the efile.com tax preparation software will select the correct tax forms for you.



Attention

If you missed the mid October efile deadline for the current tax year you have the following options to prepare and file your tax return:

1. You can download the State Tax form here:

<http://www.efile.com/support-state-tax-agency-list/>

2. Work online on your tax return with an efile Tax Professional

[Start working with a LIVE TaxPRO](#)

3. Download Federal tax forms by tax year, complete and mail to the IRS

[Download Federal Tax Forms](#)

Free Tax Tools, Calculators and Educators

Head of Household Educator:

<http://www.efile.com/claim-head-of-household-single-qualifying-person-requirement-tax-tool/>

Qualifying Child Dependent Educator:

<http://www.efile.com/qualifying-child-test-qualified-dependent-tax-tool/>

Qualifying Relative Educator:

<http://www.efile.com/qualifying-relative-test-dependent-requirement-tax-tool/>

Earned Income Tax Credit Educator:

<http://www.efile.com/what-is-the-earned-income-tax-credit-eitc-eic-eligibility-schedule-calculator/>

Child Tax Credit Educator:

<http://www.efile.com/how-to-qualify-for-child-tax-credit-deduction-requirements-tool/>

Got Tax Questions? [Contact efile.com!](#)

Name(s) as shown on Form NJ-1040NR Your Social Security Number

PART I 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.

(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 adjusted (see instructions) and expense of sale	(f) Gain or (loss) (d less e)
56.					
57. Capital Gains Distribution					57
58. Other Net Gains					58
59. Net Gains (Add Lines 56, 57, and 58) (Enter here and on Line 18) (If Loss, enter ZERO)					59

PART II 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 as reported on your Federal Income Tax Return.

(a) Kind of property	(b) Net Rental Income (Loss)	(c) Net Income From Royalties	(d) Net Income From Patents	(e) Net Income From Copyrights
60.				
61. Totals	(b)	(c)	(d)	(e)
62. Net Income (Combine Columns b, c, d, and e) (Enter here and on Line 19) (If Loss, enter ZERO)				62

PART III ALLOCATION OF WAGE AND SALARY INCOME EARNED PARTLY INSIDE AND OUTSIDE NEW JERSEY (See instructions if compensation depends entirely on volume of business transacted or if other basis of allocation is used.)

63. Amount reported on Line 14 in Column A required to be allocated	63
64. Total days in taxable year	64
65. Deduct nonworking days (Sundays, Saturdays, holidays, sick leave, vacation, etc.)	65
66. Total days worked in taxable year (subtract Line 65 from Line 64)	66
67. Deduct days worked outside New Jersey	67
68. Days worked in New Jersey (subtract Line 67 from Line 66)	68
69. ALLOCATION FORMULA $\frac{\text{(Line 68)}}{\text{(Line 66)}} \times \frac{\text{(Line 63)}}{\text{(Enter amount from Line 63)}} = \frac{\text{(Salary earned inside N.J.)}}{\text{(Salary earned inside N.J.)}}$ (Include this amount on Line 14, Col. B)	

PART IV ALLOCATION OF BUSINESS INCOME TO NEW JERSEY (See instructions if other than Formula Basis of allocation is used.)

BUSINESS ALLOCATION PERCENTAGE (From Schedule NJ-NR-A)
 Enter below, the line number and amount of each item of business income reported in Column A which is required to be allocated and multiply by allocation percentage to determine amount of income from New Jersey sources.

From Line No. _____ \$ _____ X _____ % = \$ _____

From Line No. _____ \$ _____ X _____ % = \$ _____

From Line No. _____ \$ _____ X _____ % = \$ _____