



<b>SCHEDULE A</b>	<b>NET PROFITS FROM BUSINESS</b>	List below the type of business, address and net profit (loss) from each business carried on individually by the taxpayer. Attach Federal Schedule C or F.
	<b>TYPE OF BUSINESS</b>	<b>ADDRESS</b>
32.		<b>NET PROFIT (LOSS)</b>
33.	TOTAL (Enter here and on Page 1, Line 8) (If loss enter ZERO) .....	33

<b>SCHEDULE B</b>	<b>NET GAINS OR INCOME FROM DISPOSITION OF PROPERTY</b>	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. Attach Federal Schedule D.
	(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)
34.		
35.	Capital Gains Distributions .....	35
36.	Other Net Gains .....	36
37.	Net Gains (Add Lines 34, 35 and 36) (Enter here and on Page 1, Line 9) (If loss enter ZERO) .....	37

<b>SCHEDULE C</b>	<b>NET GAINS OR INCOME FROM RENTS, ROYALTIES, PATENTS AND COPYRIGHTS</b>	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. If you have passive losses for Federal purposes, see instructions. Attach Federal Schedule E.
	(a) Kind of Property	(b) Net Rental Income (loss)
		(c) Net Income From Royalties
		(d) Net Income From Patents
		(e) Net Income From Copyrights
38.		
39.	TOTALS .....	(b) (c) (d) (e)
40.	Net Income (Combine Columns, b, c, d and e) (Enter here and on Page 1, Line 10) (If loss enter ZERO) .....	40

<b>SCHEDULE D</b>	<b>BENEFICIARIES' SHARES OF INCOME</b>	Attach Federal Schedule K-1
	Name and Address of Each Beneficiary	Indicate Residency Status
		Social Security Number
		Column A Total Distributions
		Column B NJ Source Income Distributed
41.		
42.	TOTAL (Enter amount from Line 42A on page 1, Line 15) (Enter amount from Line 42B on Schedule G, Line 10) .....	42A 42B

<b>SCHEDULE E</b>	<b>CREDIT FOR INCOME OR WAGE TAXES PAID TO OTHER JURISDICTION</b>	A copy of other state or political subdivision tax return must be retained with your records.
43.	Income actually taxed by other jurisdiction during tax year (indicate name _____) .....	43
	<i>(Do not combine the same income taxed by more than one jurisdiction.) Amount on Line 43 cannot exceed amount on Line 44</i>	
44.	Income Subject to Tax by New Jersey. (From Page 1, Line 16) .....	44
45.	Maximum Allowable Credit (43) _____ x _____ = .....	45
	(Divide Line 44 into Line 43) (44) _____ (New Jersey Tax, Line 23, Page 1)	
46.	Income tax paid to other jurisdiction .....	46
47.	Credit Allowed. (Enter lesser of Line 45 or Line 46 here and on Page 1, Line 25) .....	47

<b>SCHEDULE F</b>	<b>ALLOCATION OF BUSINESS INCOME TO NEW JERSEY</b>	See instructions if other than Formula Basis of allocation is used. Attach Form NJ-NR-A to Form NJ-1041.
<b>BUSINESS ALLOCATION PERCENTAGE (From Form NJ-NR-A)</b>		
Enter below, the line number and amount of each item of business income reported on Form NJ-1041 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 _____	% = \$ _____

**SCHEDULE G**  
**(FORM NJ-1041)**

**2003**

**NEW JERSEY GROSS INCOME TAX**  
**NEW JERSEY INCOME OF NONRESIDENT ESTATES AND TRUSTS**

All nonresident estates and trusts must complete this schedule and file it with the New Jersey Gross Income Tax Fiduciary Return (Form NJ-1041)

Enter name, address and Federal Employer Identification Number as shown on Form NJ-1041

Name of Estate or Trust	Federal Employer Identification Number
Name and Title of Fiduciary	
Address of Fiduciary (Number and Street or Rural Route)	For the Taxable Year Ended (Month, Day, Year)
City, Town, Post Office	State Zip Code

<b>INCOME FROM NEW JERSEY SOURCES:</b>	Net losses in one category cannot be applied against income in another. In case of a net loss in any category, enter "zero" for that category.		<b>New Jersey Income</b>
1. Interest .....	1.		
2. Dividends .....	2.		
3. Net profits from business .....	3.		
4. Net gains or income from disposition of property .....	4.		
5. Net gains or income from rents, royalties, patents and copyrights .....	5.		
6. Distributive share of partnership income .....	6.		
7. Net pro rata share of S corporation income .....	7.		
8. Other Income - State Nature _____	8.		
9. TOTAL INCOME FROM NEW JERSEY SOURCES (Add Lines 1 through 8) .....	9.		
10. New Jersey source income distributed to beneficiaries (From Schedule D Line 42B) .....	10.		
11. New Jersey income (Line 9 less Line 10). (Enter here and on Line 16a) .....	11.		