





14. Wages, salaries, tips, and other employee compensation (Enclose W-2) .....	14								
15a. Taxable interest income (See instructions).....	15a								
15b. Tax-exempt interest income (See instructions)..... DO NOT include on Line 15a	15b								
16. Dividends .....	16								
17. Net profits from business (Enclose copy of Federal Schedule C, Form 1040) .....	17								
18. Net gains or income from disposition of property (Schedule B, Line 4) .....	18								
19. Pensions, Annuities and IRA Withdrawals	19a								
a. Taxable Amount Received .....									
b. Less N.J. Pension Exclusion .....	19b								
c. Subtract Line 19b from Line 19a .....	19c								
20. Distributive Share of Partnership Income (See instruction page 34) .....	20								
21. Net pro rata share of S Corporation Income (See instruction page 35) .....	21								
22. Net gain or income from rents, royalties, patents & copyrights (Schedule C, Line 3) .....	22								
23. Net Gambling Winnings .....	23								
24. Alimony and separate maintenance payments received .....	24								
25. Other (See instruction page 35) .....	25								
26. Total Income (Add Lines 14, 15a, 16, 17, 18, 19c, 20, 21, 22, 23, 24, and 25) .....	26								
27. Other Retirement Income Exclusion (See Worksheet and instr. page 37) .....	27								
28. <b>New Jersey Gross Income</b> (Subtract Line 27 from Line 26) .....	28								
See instruction page 37.									
29a. Exemptions: From Line 12a _____ x \$1,000 = _____									
29b. From Line 12b _____ x \$1,500 = _____									
29c. Total Exemption Amount (Add Line 29a and Line 29b) .....	29c								
Part-Year Residents see instruction page 17.									
30. Medical Expenses .....	30								
(See Worksheet and instruction page 38)									
31. Alimony and Separate Maintenance Payments .....	31								
32. Qualified Conservation Contribution .....	32								
33. Health Enterprise Zone Deduction.....	33								
34. Total Exemptions and Deductions (Add Lines 29c, 30, 31, 32, and 33) .....	34								
35. Taxable Income (Subtract Line 34 from Line 28) .....	35								
If zero or less, MAKE NO ENTRY.									
36. Property Tax Deduction (See instruction page 39) .....	36								
37. <b>NEW JERSEY TAXABLE INCOME</b> (Subtract Line 36 from Line 35) .....	37								
If zero or less, MAKE NO ENTRY.									
38. TAX (From Tax Table, page 61) .....	38								
39. Credit For Income Taxes Paid to Other Jurisdictions (See instructions) .....	39								
40. <b>Balance of Tax</b> (Subtract Line 39 from Line 38) .....	40								



Name(s) as shown on Form NJ-1040

Your Social Security Number

41. Balance of Tax (From Line 40, Page 2) .....	41								
42. Use Tax Due on Out-of-State Purchases (See instruction page 44) If no Use Tax, enter ZERO (0.00). .....	42								
43. Penalty for Underpayment of Estimated Tax. .... Fill in <input type="checkbox"/> if Form NJ-2210 is enclosed.	43								
44. <b>Total Tax and Penalty</b> (Add Lines 41, 42, and 43) .....	44								
45. <b>Total New Jersey Income Tax Withheld</b> (Enclose Forms W-2 and 1099-R) .....	45								
46. Property Tax Credit (See instruction page 39) .....					46				
47. New Jersey Estimated Tax Payments/Credit from 2004 tax return .....	47								
48. New Jersey Earned Income Tax Credit (See schedule below) .....					48				
49. EXCESS New Jersey UI/HC/WD Withheld (See instr. page 47) (Enclose Form NJ-2450) .....					49				
50. EXCESS New Jersey Disability Insurance Withheld (See instr. page 47) .....					50				
51. <b>Total Payments/Credits</b> (Add Lines 45 through 50) .....	51								
52. If Line 51 is LESS THAN Line 44, enter AMOUNT YOU OWE .....	52								
Fill in <input type="checkbox"/> if paying by e-check or credit card. If you owe tax, you may make a donation by entering an amount on Lines 55, 56, 57, 58, 59, and/or 60 and adding this to your payment amount.									
53. If Line 51 is MORE THAN Line 44, enter OVERPAYMENT .....	53								
Deductions from Overpayment on Line 53 which you elect to credit to:									
54. Your 2006 tax .....	54								
55.  N.J. Endangered Wildlife Fund .....		<input type="checkbox"/>	\$10	<input type="checkbox"/>	\$20	<input type="checkbox"/>	Other	55	
56.  N.J. Children's Trust Fund To Prevent Child Abuse .....		<input type="checkbox"/>	\$10	<input type="checkbox"/>	\$20	<input type="checkbox"/>	Other	56	
57.  N.J. Vietnam Veterans' Memorial Fund .....		<input type="checkbox"/>	\$10	<input type="checkbox"/>	\$20	<input type="checkbox"/>	Other	57	
58.  N.J. Breast Cancer Research Fund .....		<input type="checkbox"/>	\$10	<input type="checkbox"/>	\$20	<input type="checkbox"/>	Other	58	
59.  U.S.S. New Jersey Educational Museum Fund ...		<input type="checkbox"/>	\$10	<input type="checkbox"/>	\$20	<input type="checkbox"/>	Other	59	
60. Other Designated Contribution .....		<input type="checkbox"/>	\$10	<input type="checkbox"/>	\$20	<input type="checkbox"/>	Other	60	
See instruction page 48									
61. Total Deductions from Overpayment (Add Lines 54 through 60) .....	61								
62. <b>REFUND</b> (Amount to be sent to you. Subtract Line 61 from Line 53) .....	62								

ENTER AMOUNT OF CONTRIBUTION

SIGN YOUR RETURN ON PAGE 1

If you were a tenant on October 1, 2005, also complete Page 4

EARNED INCOME TAX CREDIT SCHEDULE

You may be eligible for the New Jersey Earned Income Tax Credit if you claimed the Federal Earned Income Credit for 2005, your gross income on Line 28, Form NJ-1040 is \$20,000 or less, and your filing status for New Jersey is the same as your filing status on your Federal income tax return. Complete this schedule to see if you are eligible. You are not eligible for the New Jersey Earned Income Tax Credit if your filing status is single or married, filing separate return or if you answer "No" to question 1 below. See instructions.

- Did you file a 2005 Federal Schedule EIC on which you listed at least one "qualifying child"? .....  Yes  No
- Fill in oval if you had the IRS figure your Federal Earned Income Credit
- Enter the amount of Federal Earned Income Credit from your 2005 Federal Form 1040 or 1040A .....
- Enter 20% of amount on Line 3 here and on Line 48 above .....



**STATE OF NEW JERSEY  
FAIR TENANT REBATE APPLICATION  
(NOT FOR HOMEOWNERS)**

**WEB**

↓ **IMPORTANT! YOU MUST ENTER YOUR SSN (s).** ↓

<b>For Privacy Act Notification, See Instructions</b>	Your Social Security Number <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Last Name, First Name and Initial (Joint filers enter first name and initial of each - Enter spouse last name ONLY if different)		
	Spouse's Social Security Number <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Home Address (Number and Street, including apartment number or rural route)		
	County/Municipality Code (See Table p. 59) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	City, Town, Post Office	State	Zip Code
	<b>FILING STATUS</b> 1. <input type="radio"/> Single 2. <input type="radio"/> Married, filing joint return 3. <input type="radio"/> Married, filing separate return 4. <input type="radio"/> Head of household 5. <input type="radio"/> Qualifying widow(er)	<b>NJ RESIDENCY STATUS</b> 6. If you were a New Jersey resident for ONLY part of the taxable year, give the period of New Jersey residency: From <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> To <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/>		

Place label on form if all preprinted information is correct. Otherwise, print or type your name and address.

**DO NOT FILE FORM TR-1040 IF YOU WERE A HOMEOWNER ON OCTOBER 1, 2005 (See Instructions)**

7. On October 1, 2005, I rented and occupied an apartment or other rental dwelling in New Jersey as my principal residence.  
 ← Yes     ← No    If "No," STOP. You are not eligible for a rebate as a tenant and you should not file this application. See instruction page 56.

8. On December 31, 2005, I (and/or my spouse) was    a.  ← Age 65 or older    b.  ← Blind or disabled    c.  ← Not 65 or blind or disabled  
 Fill in only **one** oval. See instruction page 57.

9. Enter the GROSS INCOME you reported on Line 28, Form NJ-1040 or see instructions ..... **9**,,.

10. If your filing status is MARRIED, FILING SEPARATE RETURN and you and your spouse MAINTAIN THE SAME PRINCIPAL RESIDENCE, enter the gross income reported on your spouse's return (Line 28, Form NJ-1040) and fill in oval →  **10**,,.

11. TOTAL GROSS INCOME (Add Line 9 and Line 10) ..... **11**,,.

**STOP - IF LINE 11 IS MORE THAN \$100,000, YOU ARE NOT ELIGIBLE FOR A FAIR TENANT REBATE.**

12. Enter the address of the rental property in **New Jersey** that was your principal residence on **October 1, 2005**.  
 Street Address (including apartment number) \_\_\_\_\_ Municipality \_\_\_\_\_

13. Enter the total rent you (and your spouse) paid during 2005 for the rental property indicated at Line 12 ..... **13**,,.

14. Enter the number of days during 2005 that you (and your spouse) occupied the rental property indicated at Line 12. (If you lived there for all of 2005, enter 365)..... **14**

15. Did anyone, other than your spouse, occupy and share rent with you for the rental property indicated at Line 12?  
 Yes  ← (If yes, you must complete Lines 15 a, b, and c)     ← No

15a. Enter the total number of tenants (including yourself) who shared the rent during the period indicated at Line 14. (For this purpose, husband and wife are considered one tenant)..... **15a**

15b. Enter the name(s) and social security number(s) of all other tenants (other than your spouse) who shared the rent.  
 Name \_\_\_\_\_ SS# \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Name \_\_\_\_\_ SS# \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Name \_\_\_\_\_ SS# \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

15c. Enter the total rent paid by all tenants during the period indicated at Line 14 ... **15c**,,.

Under the penalties of perjury, I declare that I have examined this FAIR tenant rebate application, including accompanying documents, and to the best of my knowledge and belief, it is true, correct, and complete and that I occupied the rental property for which I am applying for the FAIR tenant rebate as my principal residence on October 1, 2005. If prepared by a person other than taxpayer, this declaration is based on all information of which the preparer has any knowledge.

**SIGN HERE**

Your Signature \_\_\_\_\_ Date \_\_\_\_\_

Spouse's Signature (if filing jointly, BOTH must sign) \_\_\_\_\_ Date \_\_\_\_\_

If you do not need forms mailed to you next year, fill in (See instruction page 23) .....

I authorize the Division of Taxation to discuss my rebate application and enclosures with my preparer (below)

Paid Preparer's Signature	Federal Identification Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Firm's Name	Federal Employer Identification Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

If you are **ONLY** filing a FAIR Tenant Rebate Application, mail your application to:  
 NJ Division of Taxation  
 Revenue Processing Center  
 PO Box 197  
 Trenton, NJ 08646-0197