

NJ-1040X  
2021  
Page 1

1032



040AM01210

Your Social Security Number  
145194420

Last Name, First Name, Initial (Joint filers enter first name and initial of each. Enter spouse's/CU partner's last name only if different.)  
SOMA NAVEENKUMAR

Spouse's/CU Partner's Social Security Number

County/Municipality Code  
1113

Home Address (Number and Street, incl. apt. # or rural route)  
18 PERRINE PATH

City, Town, Post Office  
PRINCETON JUNCTION

State ZIP Code  
NJ 08550

Driver's License Number (Voluntary. See instructions NJ-1040.)

Your address has changed.  
The address above is a foreign address.  
Death certificate is enclosed.

I authorize the Division of Taxation to discuss my return and enclosures with my preparer.

**Gubernatorial Elections Fund** Note: If you check the "Yes" box(es), it will not increase your tax or reduce your refund.  
Do you want to designate \$1 of your taxes for this fund? You Yes  No  
If joint return, does your spouse/CU Partner want to designate \$1? Spouse/CU Partner Yes  No

**Direct Deposit Information**

dd1. Direct deposit indicator (1 for direct deposit, 4 for no direct deposit)

dd1. 4

dd2. Account type (C for checking, S for savings)

dd2.

dd3. Fill in the checkbox if the direct deposit is going to an account outside the United States

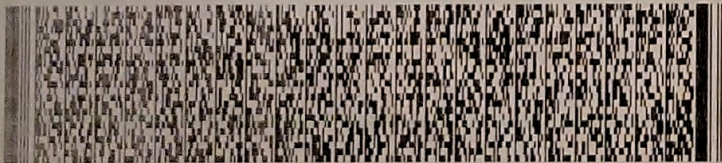
dd3.

dd4. Routing number

dd4.

dd5. Account number

dd5.





Name(s) as shown on Form NJ-1040X  
**SOMA NAVEENKUMAR**

Your Social Security Number  
**145194420**

**1032**

Part-year residents, provide months/days you were a New Jersey resident during 2021:  
From: \_\_\_\_\_ To: \_\_\_\_\_

Fiscal year filers only:  
Enter month of your year end **2022**

**Filing Status**

- |    | On Original<br>Return               | On Amended<br>Return                |  |
|----|-------------------------------------|-------------------------------------|--|
| 1. |                                     |                                     | Single                                     |
| 2. |                                     |                                     | Married/CU Couple, filing joint return     |
| 3. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Married/CU Partner, filing separate return |
| 4. |                                     |                                     | Head of Household                          |
| 5. |                                     |                                     | Qualifying Widow(er)/Surviving CU Partner  |

**Exemptions**

				As Originally Reported	Amended				
6.	Regular	<input checked="" type="checkbox"/>	Yourself	Spouse/CU Partner	Domestic Partner	6.	1	1	
7.	Age 65 or over		Yourself	Spouse/CU Partner		7.			
8.	Blind or Disabled		Yourself	Spouse/CU Partner		8.			
9.	Veteran Exemption		Yourself	Spouse/CU Partner		9.			
10.	Number of your qualified dependent children						10.		
11.	Number of other dependents						11.		
12.	Dependents attending colleges (See instructions NJ-1040)						12.		
13a.	Add lines 6, 7, 8, and 12.						13a.	1	1
13b.	Add lines 10 and 11.						13b.		
13c.	Enter amount from line 9.						13c.		

**Dependent Information**

14.	Dependent's Last Name, First Name, Middle Initial	Dependent's Social Security Number	Birth Year	No Health Insurance
a.	_____	_____	_____	_____
b.	_____	_____	_____	_____
c.	_____	_____	_____	_____
d.	_____	_____	_____	_____



040AM03210

Name(s) as shown on Form NJ-1040X  
NAVEENKUMAR SOMA

Your Social Security Number  
145194420

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As Originally Reported      Amended (See Instructions)

15. Wages, salaries, tips, and other employee compensation	15.	34728	34728
16a. Taxable interest income	16a.		
16b. Tax-exempt interest income. Do not include on line 16a	16b.		
17. Dividends	17.		
18. Net profits from business	18.		
19. Net gains or income from disposition of property	19.		352656
20a. Taxable pensions, annuities, and IRA distributions withdrawals	20a.		
20b. Excludable pensions, annuities, and IRA distributions/withdrawals	20b.		
21. Distributive Share of Partnership Income	21.		
22. Net pro rata share of S Corporation Income	22.		
23. Net gains or income from rents, royalties, patents, and copyrights	23.		
24. Net Gambling Winnings	24.		
25. Alimony and Separate Maintenance Payments received	25.		
26. Other	26.		
27. Total Income (Add lines 15, 16a, 17, 18, 19, 20a, and 21 through 26)	27.	34728	387384
28a. Pension/ Retirement Exclusion	28a.		
28b. Other Retirement Income Exclusion	28b.		
28c. Total Exclusion Amount (Add lines 28a and 28b)	28c.		
29. <b>New Jersey Gross Income</b> (Subtract line 28c from line 27)	29.	34728	387384
30. Total Exemption Amount (See instructions)	30.	1000	1000
31. Medical Expenses (See instructions NJ-1040)	31.		
32. Alimony and Separate Maintenance Payments	32.		
33. Qualified Conservation Contribution	33.		
34. Health Enterprise Zone Deduction	34.		
35. Alternative Business Calculation Adjustment (See instructions NJ-1040)	35.		
36. Organ/Bone Marrow Donation Deduction (See instr. NJ-1040)	36.		
37. Total Exemptions and Deductions (Add lines 30 through 36)	37.	1000	1000
38. Taxable Income (Subtract line 37 from line 29)	38.	33728	386384
39a. Total Property Taxes (18% of Rent) Paid (See instructions NJ-1040)	39a.		
39b. Block			
39b. Lot			
39b. Qualifier			
39c. County/Municipality Code		1113	
39d. Indicate your residency status during 2021 (fill in only one)	Homeowner		
40. Property Tax Deduction (See instructions NJ-1040)	Tenant		
41. <b>New Jersey Taxable Income</b> (Subtract line 40 from line 38)	Both		
42. Tax on Amount on line 41 (See instructions)		33728	386384
43. Credit For Income Taxes Paid to Other Jurisdictions (See instructions NJ-1040)		520	22486
Enter other jurisdiction code			
44. Balance of Tax (Subtract line 43 from line 42)		520	22486
45. Sheltered Workshop Tax Credit (See instructions NJ-1040)			
46. Gold Star Family Counseling Credit (See instructions NJ-1040)			
47. Credit for Employer of Organ/Bone Marrow Donor (See instructions NJ-1040)			
48. Total Credits (Add lines 45 through 47)			
49. Balance of tax after credits (subtract line 48 from line 44) If zero or less, make no entry		520	22486
50. Use Tax Due on Internet, Mail-Order, or Other Out-of-State Purchases (See instructions NJ-1040)			
51. Interest on Underpayment of Estimated Tax (See instructions NJ-1040)			
Fill in if Form NJ2210 is enclosed			
52. Shared Responsibility Payment	Fill in if Schedule HCC is enclosed	X	



Name(s) as shown on Form NJ-1040X  
**NAVEENKUMAR SOMA**

Your Social Security Number  
**145194420**

**1032**

As Originally Reported      Amended (See Instructions)

53. Total Tax Due (Add lines 49 through 52)	53.	520	22486
54. <b>Total New Jersey Income Tax Withheld</b> (See instructions for required enclosures)	54.	555	555
55. Property Tax Credit (See instructions NJ-1040)	55.		
56. New Jersey Estimated Tax Payments/Credit from 2020 tax return	56.		
57. New Jersey Earned Income Tax Credit (See instructions NJ-1040)	57.		
58. Excess New Jersey UI/WF/SWF Withheld (See instructions NJ-1040)	58.		
59. Excess New Jersey Disability Insurance Withheld (See instructions NJ-1040)	59.		
60. Excess New Jersey Family Leave Insurance Withheld (See instructions NJ-1040)	60.		
61. Wounded Warrior Caregivers Credit (See instructions NJ-1040)	61.		
62. Pass-Through Business Alternative Income Tax Credit (See instructions NJ-1040)	62.		
63. Child and Dependent Care Credit (See instructions NJ-1040)	63.		
64. Amount Paid with original return, assessments, and/or with request for extension to file	64.		
65. Total payments/credits (Add lines 54 through 64)	65.	555	555
66. Refund previously issued from Original Return	66.	35	35
67. Net Payments (Subtract line 66 from line 65)	67.	520	520
68. If line 67 is less than line 53, you have tax due. Subtract line 67 from line 53 and enter the amount you owe.	68.		21966
69. If line 67 is more than line 53, you have an overpayment. Subtract line 53 from line 67 and enter the overpayment.	69.		
70. Amount of line 69 to be	70a.		
(A) REFUNDED	70b.		
(B) CREDITED to your 2022 tax			

Enter name, Social Security number, and address as shown on original return (if same as indicated on Page 1, write "Same"). If changing from separate to joint return, enter names, Social Security numbers, and addresses used on original returns. (Note: You cannot change from joint to separate returns after the due date has passed unless you have done so for federal tax purposes.)

Explanation of Changes to Income, Deductions, and Credits. Enter the line reference for which you are reporting a change and give the reason for each change. You must enclose copies of your W-2s, 1099s and supporting schedules.

SEE STATEMENT 1

If amending line 43, complete calculations below and include a copy of the tax return filed with the other state (if one was filed or required to be filed).

[(Income from Other Jurisdictions) \_\_\_\_\_ / (Income from New Jersey sources) \_\_\_\_\_] x (New Jersey Tax line 42) \_\_\_\_\_ = \_\_\_\_\_

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. If prepared by a person other than taxpayer, this declaration is based on all information of which the preparer has any knowledge.

X Nick Coco      12/01/23      Apadh      11/19/2023  
Your Signature      Date      Spouses/CU Partners Signature (if filing jointly, BOTH must sign)      Date

Paid Preparer's Signature      Federal Identification Number  
Nick Coco      P01211930  
Firm's Name      Firm's Federal Employer Identification Number  
NICHOLAS J. COCO, CPA      223620376  
752 KEARNY AVENUE      07032  
KEARNY, NJ

Pay amount on line 68 in full. Write Social Security number(s) on check or money order and make payable to:

State of New Jersey - TGI  
Division of Taxation  
Revenue Processing Center  
PO Box 664  
Trenton, NJ, 08646-0664

You can also payment on our website: nj.gov/taxation

2021

NEW JERSEY STATEMENTS

PAGE 1

CLIENT SOMAAMEN

NAVEENKUMAR SOMA

145-19-4420

11/26/23

09:29AM

STATEMENT 1  
FORM NJ-1040X, PAGE 4, EXPLANATION OF CHANGES  
EXPLANATION OF CHANGES TO INCOME, DEDUCTIONS, AND CREDITS

TAXPAYER DID NOT INCLUDE PROCEEDS FORM THE SALE OF SECURITIES ON THE ORIGINAL  
FILED RETURN.

From,

Naveenkumar Soma

18 Perrine Path

Princeton Junction, NJ-08550

To,

State of New Jersey

Division of Taxation

Revenue Processing Center

P.O. Box: 664

TRENTON, NJ - 08646-0664