

0130201010

2017 NJ-1040-V PAYMENT VOUCHER

Payment by Credit Card

You may pay your 2017 New Jersey income taxes or make payment of estimated tax for 2018 by credit card by visiting the Division's website at www.nj.gov/treasury/taxation/ and selecting electronic services.

Payment by E-Check

You may pay your 2017 New Jersey income taxes or make a payment of estimated tax for 2018 by e-check. This option is available on the Division's Website at: www.nj.gov/treasury/taxation/ Taxpayers who do not have access to the Internet can make a payment by calling the Division's Customer Service Call Center at 609-292-6400. **Do not use the payment voucher if you pay your taxes by e-check.**

Payment by Check

If you are paying your 2017 New Jersey income taxes, with your return, by check, be sure to enclose the payment voucher printed below with your check or money order. Mail to: State of New Jersey, Division of Taxation, Revenue Processing Center, PO Box 111, Trenton, NJ 08645-0111.

If you are paying your 2017 New Jersey income taxes, separate from your return, by check, be sure to enclose the payment voucher printed below with your check or money order. Mail to: State of New Jersey, Division of Taxation, Revenue Processing Center, PO Box 643, Trenton, NJ 08646-0643.

If you are making your first installment payment of estimated tax for 2018, use separate checks or money orders for each payment. Send your 2018 estimated tax payment with a NJ-1040-ES voucher to: State of New Jersey, Division of Taxation, Revenue Processing Center, PO Box 222, Trenton, NJ 08646-0222.

DO NOT CUT THIS PAGE

New Jersey Gross Income Tax
Resident Payment Voucher
NJ-1040-V

712-41-1917 GARL
Garlapati, Sujith
703 plaza drive
Woodbridge, NJ 07095

1555 2017

Make your check payable to 'State of New Jersey - TGI'.
Write your social security # and tax year on your check.

State of New Jersey
Division of Taxation
Revenue Processing Center
PO Box 643
Trenton, NJ 08646-0643

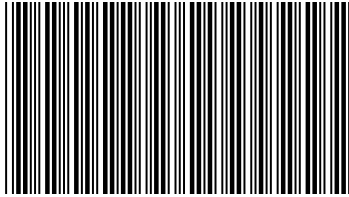
Enter amount of payment here:

1.00



STATE OF NEW JERSEY INCOME TAX – RESIDENT RETURN

NJ-1040
2017
Page 1



040MP01170

For Privacy Act Notification, See Instructions
For Tax Year Jan. – Dec. 2017 or Other Tax Year
Beginning _____, 20__ Month Ending _____, 20__
On-line Federal Extension Confirmation # _____

GARLAPATI SUJITH

703 PLAZA DRIVE

WOODBIDGE

NJ 07095

1014

1555

712411917

P02090332 301017196



Under the penalties of perjury, I declare that I have examined this income tax 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 the taxpayer, this declaration is based on all information of which the preparer has any knowledge.

> _____
Your Signature Date

> _____
Spouse/CU Partner's Signature (If filed jointly both must sign)

Pay amount on Line 56 in full. Write Social Security number(s) on check or money order and make payable to: STATE OF NEW JERSEY – TGI

Mail your return in the envelope provided and affix the appropriate mailing label.

If you have an amount due on Line 56, enclose your check and NJ-1040-V payment voucher with your return and use the label for **PO Box 111**.

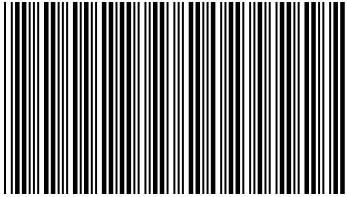
If not, use the label for **PO Box 555**. You may also pay by e-check or credit card. See instruction page 11.

Fill in if NJ-1040-O is enclosed

If enclosing copy of death certificate for deceased taxpayer, check box (See instruction page 12)

Paid Preparer's Signature APPANA RUPA VENKATA SATYA SAI MANI K Federal Identification Number P02090332

Firm's Name GLOBAL TAXES LLC Federal Employer Identification Number 30-1017196



040MP02170

GARLAPATI SUJITH

712411917

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Residency Status IF YOU WERE A NEW JERSEY RESIDENT FOR ONLY PART OF THE TAXABLE YEAR GIVE THE PERIOD OF NEW JERSEY RESIDENCY FROM TO

FILING STATUS

- 1. SINGLE
2. MARRIED/CU COUPLE FILING JOINT RETURN
3. MARRIED/CU COUPLE FILING SEPARATE RETURN
4. HEAD OF HOUSEHOLD
5. QUALIFYING WIDOW(ER)/SURVIVING CU PARTNER

X

EXEMPTIONS

- 6. REGULAR
7. AGE 65 OR OVER
8. BLIND OR DISABLED
9. NUMBER OF QUALIFIED DEPENDENT CHILDREN
10. NUMBER OF OTHER DEPENDENTS
11. DEPENDENTS ATTENDING COLLEGE
12A. TOTAL (LINE 12A - ADD LINES 6, 7, 8, AND 11)
12B. TOTAL (LINE 12B - ADD LINES 9 AND 10)
12C. VETERAN EXEMPTION

1

1

CHECKBOXES FOR EXEMPTIONS

Table with 3 columns: REGULAR, SPOUSE/CU PARTNER, DOMESTIC PARTNER, AGE 65 OR OLDER, YOURSELF, SPOUSE/CU PARTNER, BLIND OR DISABLED, YOURSELF, SPOUSE/CU PARTNER, VETERAN EXEMPTION, YOURSELF, SPOUSE/CU PARTNER

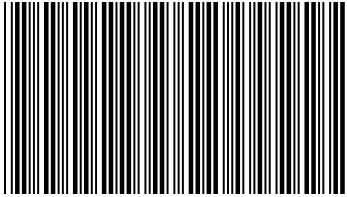
DEPENDENT'S INFORMATION FROM LINES 9 AND 10 (ATTACH RIDER IF MORE THAN FOUR)

Table with 4 columns: LAST NAME, FIRST NAME, MIDDLE INITIAL, SOCIAL SECURITY NUMBER, BIRTH YEAR, HEALTH INS IND

GUBERNATORIAL ELECTIONS FUND

DO YOU WISH TO DESIGNATE \$1 OF YOUR TAXES FOR THIS FUND? YES NO
IF JOINT RETURN. DOES YOUR SPOUSE/CU PARTNER WISH TO DESIGNATE \$1? YES NO

Main tax schedule table with 36 rows and 3 columns: Line number, Description, Amount



040MP03170

GARLAPATI SUJITH

712411917

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37A.	TOTAL PROPERTY TAXES PAID (SEE INSTRUCTION PAGE 30)	37A.	.
37B.	BLOCK, LOT, AND QUALIFIER (TO BE ENTERED ON PAGE 1)	37B.	.
37C.	COUNTY/MUNICIPALITY CODE (TO BE ENTERED ON PAGE 1)	37C.	.
38.	PROPERTY TAX DEDUCTION (SEE INSTRUCTION PAGE 33)	38.	.
39.	NEW JERSEY TAXABLE INCOME (SUBTRACT LINE 38 FROM LINE 36) IF ZERO OR LESS, MAKE NO ENTRY	39.	40600 .
40.	TAX (FROM TAX TABLES, PAGE 52)	40.	752 .
41.	CREDIT FOR INCOME TAXES PAID TO OTHER JURISDICTIONS	41.	.
41A.	JURISDICTION CODE (SEE INSTRUCTIONS)	41A.	.
42.	BALANCE OF TAX (SUBTRACT LINE 41 FROM LINE 40)	42.	752 .
43.	SHELTERED WORKSHOP TAX CREDIT	43.	.
44.	BALANCE OF TAX AFTER CREDIT (SUBTRACT LINE 43 FROM LINE 42)	44.	752 .
45.	USE TAX DUE ON INTERNET, MAIL-ORDER, OR OTHER OUT-OF-STATE PURCHASES (SEE WKST AND INSTR. PAGE 36) IF NO USE TAX, ENTER ZERO	45.	0 .
46.	PENALTY FOR UNDERPAYMENT OF ESTIMATED TAX	46.	.
46A.	FILL IN IF FORM 2210 IS ENCLOSED	46A.	.
47.	TOTAL TAX AND PENALTY (ADD LINES 44, 45, AND 46)	47.	752 .
48.	TOTAL NEW JERSEY INCOME TAX WITHHELD (ENCLOSE FORMS W-2 AND 1099)	48.	751 .
49.	PROPERTY TAX CREDIT (SEE INSTRUCTION PAGE 30)	49.	.
50.	NEW JERSEY ESTIMATED TAX PAYMENTS/CREDIT FROM 2016 TAX RETURN	50.	.
51.	NEW JERSEY EARNED INCOME TAX CREDIT (SEE INSTRUCTION PAGE 38)	51.	.
51B.	FILL IN THE BOX IF YOU HAD THE IRS FIGURE YOUR FEDERAL EARNED INCOME CREDIT	51B.	.
51C.	FILL IN THE BOX IF YOU ARE A CU COUPLE CLAIMING THE NJ EARNED INCOME TAX CREDIT	51C.	.
52.	EXCESS NEW JERSEY UI/SF/SWF WITHHELD (SEE INSTRUCTION PAGE 38) (ENCLOSE FORM NJ-2450)	52.	.
53.	EXCESS DISABILITY INSURANCE WITHHELD (SEE INSTRUCTION PAGE 38) (ENCLOSE FORM NJ-2450)	53.	.
54.	EXCESS NEW JERSEY FAMILY LEAVE WITHHELD (SEE INSTRUCTION PAGE 38) (ENCLOSE FORM NJ-2450)	54.	.
55.	TOTAL PAYMENTS/CREDITS (ADD LINES 48 THROUGH 54)	55.	751 .
56.	IF LINE 55 IS LESS THAN LINE 47, ENTER AMOUNT YOU OWE IF YOU OWE TAX, YOU MAY MAKE A DONATION BY ENTERING AN AMOUNT ON LINES 59, 60, 61, 62, 63, AND/OR 64 AND ADDING THIS TO YOUR PAYMENT AMOUNT	56.	1 .
57.	IF LINE 55 IS MORE THAN LINE 47, ENTER OVERPAYMENT DEDUCTIONS FROM OVERPAYMENT ON LINE 57 WHICH YOU ELECT TO CREDIT TO:	57.	.
58.	YOUR 2018 TAX	58.	.
59.	NEW JERSEY ENDANGERED WILDLIFE FUND	59.	.
60.	NEW JERSEY CHILDREN'S TRUST FUND	60.	.
61.	NEW JERSEY VIETNAM VETERANS' MEMORIAL FUND	61.	.
62.	NEW JERSEY BREAST CANCER RESEARCH FUND	62.	.
63.	U.S.S. NEW JERSEY EDUCATIONAL MUSEUM FUND	63.	.
64.	OTHER DESIGNATED CONTRIBUTION (SEE INSTRUCTION PAGE 39)	64.	.
64C.	DESIGNATION CODE	64C.	.
65.	TOTAL DEDUCTIONS FROM OVERPAYMENT (ADD LINES 58 THROUGH 64)	65.	.
66.	REFUND (AMOUNT TO BE SENT TO YOU. SUBTRACT LINE 65 FROM LINE 57)	66.	.

DIRECT DEPOSIT INFORMATION

dd1.	REFUND CHECK BOX ('1' FOR REFUND, '4' FOR NO REFUND)	dd1.	4
dd2.	ACCOUNT TYPE ('C' FOR CHECKING, 'S' FOR SAVINGS)	dd2.	
dd3.	FILL IN THE CHECKBOX IF REFUND IS GOING TO AN ACCOUNT OUTSIDE THE UNITED STATES	dd3.	
dd4.	ROUTING NUMBER	dd4.	
dd5.	ACCOUNT NUMBER	dd5.	
dnm.	DO NOT MAIL INDICATOR	dnm.	
pa.	POWER OF ATTORNEY INDICATOR	pa.	
pdr.	PRESIDENTIAL DISASTER RELIEF INDICATOR	pdr.	

New Jersey Information Worksheet

2017

► Keep for your records

Part I – Personal Information

Taxpayer:

Last Name Garlapati
 First Name Sujith
 Middle Initial _____ Suffix _____
 Social Security No. 712-41-1917
 Date of Birth 11/04/90
 Age as of 12/31/2017 27
 Date of Death _____
 Daytime Phone _____ *
 Home Phone _____ *

Spouse:

Last Name _____
 First Name _____
 Middle Initial _____ Suffix _____
 Social Security No. _____
 Date of Birth _____
 Age as of 12/31/2017 _____
 Date of Death _____
 Daytime Phone _____ *

* Check one of these boxes to designate daytime phone number.

c/o (care of) _____
 Street Address 703 plaza drive Apt. No _____
 City Woodbridge State NJ ZIP Code 07095
 County/Municipality Code (residents only) 1014

- Check this box if taxpayer's name is different on last year's NJ tax return
 Check this box if taxpayer's address is different on last year's NJ tax return

Part II – Main Form

- Form NJ-1040: Resident Tax Return ► _____
 Form NJ-1040NR: Nonresident Tax Return ► _____
 Enter state of residency _____
 Form NJ-1040: Part-Year Resident Tax Return ► _____
 Enter dates of New Jersey residency. From _____ To _____
Yes No
 Did you receive any income from New Jersey sources during your period of nonresidence?
 If **Yes**, both NJ-1040 and NJ-1040NR will be prepared.
QuickZoom to Allocation Worksheet for Part-Year and Nonresidents ► _____

Part III – Filing Status

- Single
 Married/Civil Union Couple, filing joint return
 Married/Civil Union Partner, filing separate return
Yes No
 Did the taxpayer maintain the same residence as the spouse?
 If Yes, enter the gross income reported on spouse's/CU partner's NJ-1040, line 28 _____
 Head of household
 Qualifying widow(er)/Surviving Civil Union Partner

Part IV – Exemptions

	You	Spouse/CU Partner	Domestic Partner
Regular	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Age 65 or over	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Blind	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disabled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Veteran exemption	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Number of qualifying dependent children _____
 Number of other dependents. _____
 Number of dependents attending colleges (must be under age 22) _____

Part V – Other Information

- 1 At least two-thirds of gross income is derived from farming or fishing
 - 2 You do not need forms mailed to you next year
 - 3 Presidential Disaster Relief
 - 4 Death certificate attached for deceased taxpayer
- Yes No**
- 5 a Do you wish to designate \$1 of your taxes for the Gubernatorial Elections Fund?
 - b If joint return, does your spouse wish to designate \$1?
 - 6 Is the Division of Taxation authorized to discuss this return and enclosures with the paid preparer?

Part VI – Preparer Code

1 Paid preparer code . . . 1 _____

Part VII – Electronic Filing Information

New! State e-file disclosure consent:

By using a computer system and software to prepare and transmit my client's return electronically, I consent to the disclosure of all information pertaining to my use of the system and software to create my client's return and to the electronic transmission of my client's tax return to the State of New Jersey, Division of Revenue and Enterprise Services.

- 1 The state return will be filed electronically
- Yes No**
- 2 Will federal PIN(s) be used? (See Help)
 - 3 Date return was EFiled _____
 - 4 Date return was accepted by the state. _____
 - 5 Date Form NJ-1040-V or Form NJ-1040-NR-V was given to client . . . _____

Electronic PDF Attachments

PDF's that you have selected to attach to your state e-file return are listed below.

Description	Filename

Part VIII – Direct Deposit Information or Electronic Funds Withdrawal Information

Direct Deposit:

- Yes No**
- Do you want direct deposit of state tax refund? (EF - All filers; Print filers - residents filers only)

Electronic Funds Withdrawal:

- Yes No**
- Do you want electronic funds withdrawal of state tax payment? (Electronic Filing Only)

Bank Information:

If you selected direct deposit or electronic funds withdrawal, fill out the information below:

Name of Financial Institution (optional) . . . BANK OF AMERICA

Checking account

Savings account

Routing number 021200339

Account number. 381036428401

Payment date to withdraw from the account above . . . _____

State balance-due amount from this return _____

International ACH Transactions

Yes **No**

Will the funds for this refund (or payment) go to (or come from) an account outside the U.S.?

_____ Bank name for International ACH Transaction

Part IX - Extension Status

Yes **No**

Has the tax return due date been extended for a six month extension?

Is the extension due to a natural disaster declared by the state?

Extended due date . . . _____

QuickZoom to Form NJ-630: Application for Extension of Time to File ▶ _____

QuickZoom to Form NJ-1040 ▶

QuickZoom to Form NJ-1040NR ▶

Tax Payments Worksheet

2017

▶ Keep for your records

Name Garlapati, Sujith	Social Security Number 712-41-1917
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Tax Payments for the Current Year

		State	
		Date	Payment
1	First Payment		
2	Second Payment		
3	Third Payment		
4	Fourth Payment		
Additional Payments			
5	Payment		
	Payment		
	Payment		
	Payment		
	Payment		
6	Overpayment from previous year applied to current year	6	
7	Amount paid with current year extension	7	
8	Total tax payments	8	

Income Taxes Withheld for the Current Year

9	State withholding on Forms W-2	9	751.
10	State withholding on Forms W-2G	10	
11	State withholding on Forms 1099-R	11	
12 a	State withholding on Forms 1099-MISC	12 a	
b	State withholding on Forms 1099-G	b	
c	State withholding on Forms 1099-K	c	
13	Other state tax withholding	13	
14	Total income tax withheld	14	751.
15	Date return will be filed and balance paid	15	04/17/2018

Smart Worksheets from your 2017 New Jersey Tax Return

SMART WORKSHEET FOR: Form NJ-1040: Income Tax Resident Return

Property Tax Information Smart Worksheet F

1 Did you live in more than one qualifying New Jersey residence during 2017? Yes No

2 Did you share ownership of a principal residence during 2017 with anyone other than your spouse? Yes No

3 Did a principal residence you owned during 2017 consist of multiple units? Yes No

4 Did anyone, other than your spouse, occupy and share rent with you for an apartment or other rental dwelling unit? Yes No

5 Were you both a homeowner and a tenant during 2017? Yes No

If the answer to any of the above questions is Yes, complete Schedule G-1.
QuickZoom to Schedule G-1 _____

A Total property tax paid in 2017 _____
Part-year residents: Enter the amount while a resident of New Jersey _____

B Total rent paid in 2017 _____
Part-year residents: Enter the amount while a resident of New Jersey _____

C If your filing status is **married filing separate return**, did you maintain the same residence as your spouse?
 Answer this question on NJ Information Wks (if Yes, reduce by 50%). Yes No

D You were a New Jersey homeowner on October 1, 2017 and you are eligible and file for a 2017 Homestead Benefit Yes No