STATE OF NEW JERSEY INCOME TAX – RESIDENT RETURN



NJ-1040 2017 Page 1



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 #_____

appropriate mailing label.

1014

GOGINENI SAI NISHANTH

703 PLAZA DRIVE WOODBRIDGE

WOODBRIDGE

1555

082819803

P02090332 301017196

Y624088001969



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.

ΝJ

07095

>			>				If you have an amount due on Line 56, enclose your
Your Signature		Date	Spo	ouse/CU Partne	er's Sign	nature (If filed jointly both must sign)	check and NJ-1040-V payment voucher with your return and use the label for PO Box 111 .
Fill in if NJ-1040-O is enc	osed						If not, use the label for PO Box 555.
If enclosing copy of death	ertificate for deceased	axpayer, check	box (See i	nstruction pe	ige 12)		You may also pay by e-check or credit card. See instruction page 11.
Paid Preparer's Signature					Fe	ederal Identification Number	instruction page 11.
APPANA RUP	A VENKATA	SATYA	SAI	MANI	Κ	P02090332	
Firm's Name					Fe	ederal Employer Identification Number	
GLOBAL TAX	ES LLC					30-1017196	





NJ-1040 (2017)

PAGE 2

GOGINENI SAI NISHANTH

082819803

1555

Resider	ncy Status	IF YOU WERE A I	NEW JERSEY RESIDENT I	FOR ONLY PART OF	THE TAXABLE YEAR GIVE THE	E PERIOD OF N	EW JERS	EY RESIDENCY
FROM		TO						
FILIN	G STATUS	8		EXF	EMPTIONS			
1. SING	LE			X 6.	REGULAR			1
2. MAR	RIED/CU C	OUPLE FILING JOINT	RETURN	7.	AGE 65 OR OVER			
3. MAR	RIED/CU C	OUPLE FILING SEPAR	RATE RETURN	8.	BLIND OR DISABLED			
4. HEAD	D OF HOUS	EHOLD		9.	NUMBER OF QUALIFIED DEPE	ENDENT CHILE	DREN	
5. QUA	LIFYING W	IDOW(ER)/SURVIVIN	G CU PARTNER	10.	NUMBER OF OTHER DEPENDE	ENTS		
CHECI	KBOXES	FOR EXEMPTION	8	11.	DEPENDENTS ATTENDING CO	DLLEGE		
REGULAR		SPOUSE/CU PARTNER	DOMESTIC PARTNER	12A.	TOTAL (LINE 12A - ADD LINE	8 6, 7, 8, AND 1	1)	1
AGE 65 OR	OLDER	YOURSELF	SPOUSE/CU PARTNER	12B.	TOTAL (LINE 12B - ADD LINES	5 9 AND 10)		
BLIND OR	DISABLED	YOURSELF	SPOUSE/CU PARTNER	12C.	VETERAN EXEMPTION			
VETERAN	EXEMPTION	YOURSELF	SPOUSE/CU PARTNER					
		INFORMATION FE			F MORE THAN FOUR) CURITY NUMBER	BIRTH Y	EAR	HEALTH INS IND
A.								
B.								
C.								
D.								
		AL ELECTIONS F				VEC		
			OF YOUR TAXES FOR			YES		10
IF JOIN	IT RETUR	N. DOES YOUR SP	OUSE/CU PARTNER W	VISH TO DESIGNA	IE \$1?	YES	Γ	10
14. W	AGES, SALA	RIES, TIPS, AND OTHER 1	EMPLOYEE COMPENSATION	(ENCL W-2) BE SURE TO USE	E STATE WAGES FROM BOX 16 OF YOUR W	-2(S) (SEE INSTR.)	14.	58410 .
15A. TA	AXABLE INT	EREST INCOME (SEE INS	TRUCTIONS) (ENCLOSE FED	ERAL SCHEDULE B IF O	VER \$1,500)		15A.	
			INSTRUCTIONS) (ENCLOSE S				15B.	
	IVIDENDS						16.	
		FROM BUSINESS (SCHED	ULE NJ-BUS-1. PART 1. LINE	4) (ENCLOSE COPY OF F	EDERAL SCHEDULE C, FORM 1040)		17.	
			DPERTY (SCHEDULE B, LINE				18.	
			DRAWALS (SEE INSTRUCTIO				19A.	
			AND IRA WITHDRAWALS	N(1110E 22)			19B.	•
							20.	·
					E 25) (ENCLOSE SCH. NJK-1 OR FEDERAL SC		20.	•
					PAGE 25) (ENCLOSE SCH. NJ-K-1 OR FEDER.	AL SCH. K-1)	22.	•
			OYALTIES, PATENTS & COP	I RIGHTS (SCHEDULE NJ	-BUS-1, PART IV, LINE 4)		22.	•
		G WINNINGS (SEE INSTR					23. 24.	•
			NCE PAYMENTS RECEIVED				2 4 . 25.	•
		OSE SCHEDULE) (SEE INS						годіо
			, 17, 18, 19A, AND 20 THROUG	GH 25)			26.	58410 .
		LUSION (SEE INSTRUCTION					27A.	
27 B. 01	THER RETIRE	EMENT INCOME EXCLUS	IONS (SEE WORKSHEET ANI	D INSTRUCTION PAGE 26	5)		27B.	•
27C. TO	OTAL EXCLU	SION AMOUNT (ADD LIN	NE 27A AND LINE 27B)				27C.	
28. NI	EW JERSEY C	GROSS INCOME (SUBTRA	CT LINE 27C FROM LINE 26)	(SEE INSTRUCTION PAG	ie 28)		28.	58410 .
29. TO	OTAL EXEMP	TION AMOUNT (SEE INS	TRUCTION PAGE 28 TO CALC	CULATE AMOUNT) (PAR	T YEAR RESIDENTS SEE INSTRUCTI	ON PAGE 7)	29.	1000 .
30. M	EDICAL EXP	ENSES (SEE WORKSHEE	T AND INSTRUCTION PAGE 2	8)			30.	
31. AI	LIMONY ANI	O SEPARATE MAINTENA	NCE PAYMENTS				31.	
32. QU	UALIFIED CC	ONSERVATION CONTRIB	UTION				32.	
33. HI	EALTH ENTE	RPRISE ZONE DEDUCTIO	DN				33.	
34. AI	LTERNATIVE	BUSINESS CALCULATIO	ON ADJUSTMENT (SCHEDUL	E NJ-BUS-2, LINE 11)			34.	
35. TO	OTAL EXEMP	TIONS AND DEDUCTION	S (ADD LINES 29 THROUGH	34)			35.	1000 .
36. TA	AXABLE INC	OME (SUBTRACT LINE 35	FROM LINE 28) IF ZERO OR	LESS, MAKE NO ENTRY			36.	57410 .



NJ-1040 (2017)



082819803

37A.	TOTAL PROPERTY TAXES PAID (SEE INSTRUCTION PAGE 30)	37A.	1080	
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.	1080	
39.	NEW JERSEY TAXABLE INCOME (SUBTRACT LINE 38 FROM LINE 36) IF ZERO OR LESS, MAKE NO ENTRY	39.	56330	
40.	TAX (FROM TAX TABLES, PAGE 52)	40.	1619	
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.	1619	
43.	SHELTERED WORKSHOP TAX CREDIT	43.		•
44.	BALANCE OF TAX AFTER CREDIT (SUBTRACT LINE 43 FROM LINE 42)	44.	1619	•
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.	1619	•
48.	TOTAL NEW JERSEY INCOME TAX WITHHELD (ENCLOSE FORMS W-2 AND 1099)	48.	1903	•
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.	1903	•
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 A	56. MOUNT		•
57.	IF LINE 55 IS MORE THAN LINE 47, ENTER OVERPAYMENT DEDUCTIONS FROM OVERPAYMENT ON LINE 57 WHICH YOU ELECT TO CREDIT TO:	57.	284	
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.	284	•
]	DIRECT DEPOSIT INFORMATION			
dd1.	REFUND CHECK BOX ('1' FOR REFUND, '4' FOR NO REFUND) dd1.		1	
dd2.	ACCOUNT TYPE ('C' FOR CHECKING, 'S' FOR SAVINGS) dd2.		C	
dd3.	FILL IN THE CHECKBOX IF REFUND IS GOING TO AN ACCOUNT OUTSIDE THE UNITED STATES dd3.			
dd4.	ROUTING NUMBER dd4.		021000322	
dd5.	ACCOUNT NUMBER dd5.		483053204551	
dnm.	DO NOT MAIL INDICATOR dnm.			

pa.

pdr.

NJ-8879

Department of the Treasury Division of Revenue

NJ *e-file* Signature Authorization

Do not send to New Jersey. Keep for your records.

See instructions.

2017

Do not mail the NJ-8879 to New Jersey

Тахр	ayer's name	Social security num	ber		
	INENI, SAI NISHANTH	082-81-9803 Spouse's social security number or Civil Union Prinr's			
	Il Union Prtnr's				
Ра	rt I Tax Return Information—Tax Year Ending December 31, 2017 (Wh	ole Dollars Only)		
1	New Jersey Taxable income		1	56,330.	
2	Total tax		2	1,619.	
3	New Jersey income tax withheld		3	1,903.	
4	Refund		4	284.	
5	Amount you owe		5		

Part II Declaration and Signature Authorization of Taxpayer

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2017 and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of my electronic income tax return. I acknowledge that I have read the Consent to Disclosure and, if applicable, Electronic Funds Withdrawal Consent included on the copy of my electronic income tax return and I agree to the provisions contained therein. I have selected a personal identification number (PIN) as my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

	l authorize ERO firm name	to enter my PIN			as my signature
	ERO firm name on my tax year 2017 electronically filed income tax return.	-	do not enter	all zeros	
	I will enter my PIN as my signature on my tax year ²⁰¹⁷ elect are entering your own PIN and your return is filed using the below.				
Yours	signature ►	Date	▶		
(or Civi	use's PIN: check one box only I Union Prtnr's PIN) I authorize on my tax year 2017 electronically filed income tax return.	to enter my PIN	do not enter	all zeros	as my signature
	I will enter my PIN as my signature on my tax year ²⁰¹⁷ elect are entering your own PIN and your return is filed using the below.				
	se's sianature	Date	▶		
	Practitioner PIN Method Ret	turns Only—cont	inue bel	ow	
Par	t III Certification and Authentication—Practitioner	PIN Method			
ERO	's EFIN/PIN. Enter your six-digit EFIN followed by your five-d	ligit self-selected PIN.		do not ei	5 8 7 2 7 8 hter all zeros
retur	tify that the above numeric entry is my PIN, which is my signand n for the taxpayer(s) indicated above. I confirm that I am subre Practitioner PIN method.				
ERO's	s signature ►	Date	► <u>06/08/</u>	2018	

ERO Must Retain This Form — See Instructions Do Not Submit This Form to New Jersey Unless Requested To Do So

New Jersey Information Worksheet Keep for your records

2017

Part I – Personal Information

Taxpayer: Last Name GOGINENI First Name SAI NISHANTH Middle Initial Suffix Social Security No 082-81-9803 Date of Birth 07/05/92 Age as of 12/31/2017. 25 Date of Death * Home Phone * * * * *	Spouse: Last Name
c/o (care of) Street Address 703 plaza drive woodbr City	State NJ ZIP Code 07095
Part II — Main Form	
Enter state of residency Form NJ-1040: Part-Year Resident Tax Return Enter dates of New Jersey residency From Yes No	····· ► To To Jersey sources during your period of nonresidence? will be prepared.
Part III – Filing Status	
X Single Married/Civil Union Couple, filing joint return Married/Civil Union Partner, filing separate return Yes No Did the taxpayer maintain the same realif Yes, enter the gross income reported on spouse Head of household Qualifying widow(er)/Surviving Civil Union Partner	's/CU partner's NJ-1040, line 28
Part IV – Exemptions	
You Spouse/CU Partner Dot Regular X Image: Constraint of the state of the s	·····

Part V - Other Information

2 You 3 Pre 4 Dea Yes No	 least two-thirds of gross income is derived from farming or fishing u do not need forms mailed to you next year esidential Disaster Relief ath certificate attached for deceased taxpayer 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 – P	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.

X 1 The state return will be filed electronically
Yes No
X 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

Yes
Х

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
X Checking account
Savings account
Routing number
Account number
Payment date to withdraw from the account above
State balance-due amount from this return

International ACH Transactions

	X	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 X 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	

NJIW0101.SCR 03/12/18

Total Wages Worksheet ► Keep for your records

Name as Shown on Return	Social Security No.			
GOGINENI, SAI NISHANTH	082-81-9803			

Important Information					
Note:	Use this worksheet ONLY if you have multiple state wage entries on Box 16 of a Form W-2 and the sum of those entries exceeds actual wages paid. Since New Jersey requires wages to pull from the Box 16 field, there is the possibility wage income could be overstated if duplicate Box 16 amounts are not excluded by use of this worksheet.				
Note:	Typically, the New Jersey wages should not be excluded, and are usually higher than wages reported to New York (for example). see http://www.state.nj.us/treasury/taxation/pdf/current/njwt.pdf				
Note:	Multiple Forms W-2 reporting multiple states' wages should be entered on a single Federal Form W-2 in the program.				
Note:	If NJ Family Leave Insurance (FLI) was reported on Form W-2, boxes 15-17, and was entered in the program in boxes 15-17, return to the Form W-2 and remove it from boxes 15-17. Enter the FLI in box 14				
	See Tax Help for more details				

A Employer's name	B State name	C Federal wages tips, etc from Form W-2 Box 1	D State wages tips, etc from Form W-2 Box 16	E Check box to exclude duplicate state wages
I28 TECHNOLOGIES - State Wages	NJ			
Total federal wages from column C Total state wages from column D Less wages excluded from New Jersey ret (by checking box in column E) Wages from all sources		58,410.	58,410.	

njiw2501.SCR 10/14/17

2017

Name(s)	Social Security No.
GOGINENI, SAI NISHANTH	082-81-9803

Worksheet G - Property Tax Deduction/Credit

Complete both columns of this schedule to find out whether the property tax deduction or the property tax credit is better for you. If you claim a credit for taxes paid to other jurisdictions, complete only Lines 1 and 2 of this schedule. Complete Schedule A and Worksheet J.

1	Property tax . Enter the property tax you paid in 2017 from line 37a of Form NJ-1040			1,080.	
2	Property tax deduction. Is the amount on line 1 of this worksheet \$10, more (\$5,000 or more if you and your spouse file separate returns but maintained the same principal residence)?	000 or			
	Yes. Enter \$10,000 (\$5,000 if you and your spouse file separate returns but maintained the same principal residence).	e			
	XNo.Enter the amount from line 1.Also enter this amount on line 4, Column A below. See instructions		2	1,080.	
	STOP if you are claiming a credit for taxes paid to other jurisdiction	ns.			
	Complete only lines 1 and 2. Then complete Schedule A and Worksheet J. See instructions.	Column	A	Column B	
3 4 5	Taxable income (copy from line 36 of your NJ-1040) Property tax deduction (copy from line 2 of this worksheet)	57,4 1,0	10. 80.	<u> 57,410.</u> 	
•	line 4 from line 3)	56,3	330.	57,410.	
6	Tax you would pay on line 5 amount (From Tax Tables or Tax Rate Schedules)	1,6	519.	1,680.	
7	Now, subtract line 6, column A, from line 6, column B and enter the result here		7	61.	
8	8 Is the line 7 amount \$50 or more (\$25 if you and your spouse/civil union partner file separate returns but maintain the same principal residence)?				

orm NJ-1040	Enter amount from
Line 38	Line 4, Column A
Line 39	Line 5, Column A
Line 40	Line 6, Column A
Line 49	Make no entry

No.

You receive a greater tax benefit from the Property Tax Credit. (**Part-year residents**, see instructions before answering "No.") Make the following entries on Form NJ-1040.

Form NJ-1040	Enter amount from:
Line 38	Make no entry
Line 39	Line 5, Column B
Line 40	Line 6, Column B
Line 49	\$50 (\$25 if you and your spouse/civil union partner file
	separate returns but maintain the same principal
	residence). Part-year residents, see instructions.

Tax Payments Worksheet ► Keep for your records

Social Security Number Name GOGINENI, SAI NISHANTH 082-81-9803

Tax Payments for the Current Year

		State		
		Dat	e	Payment
1 2 3 4	First PaymentSecond PaymentThird PaymentFourth Payment			
5	Additional Payments Payment			
6 7 8	Overpayment from previous year applied to current year		6 7 8	

Income Taxes Withheld for the Current Year

9	State withholding on Forms W-2	9	1,903.
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	
С	State withholding on Forms 1099-K	С	
13	State withholding on Forms 1099-K Other state tax withholding	13	
14	Total income tax withheld.	14	1,903.
15	Date return will be filed and balance paid	15	04/17/2018

OTHV0301.SCR 11/28/16

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?
2	Did you share ownership of a principal residence during 2017 with anyone other than your spouse? Yes X No
3	Did a principal residence you owned during 2017 consist of multiple units? Yes X No
4	Did anyone, other than your spouse, occupy and share rent with you for an apartment or other rental dwelling unit? Yes X
5	Were you both a homeowner and a tenant during 2017? Yes X No
	If the answer to any of the above questions is Yes, complete Schedule G-1. QuickZoom to Schedule G-1
Α	Total property tax paid in 2017
в	Part-year residents: Enter the amount while a resident of New Jersey 6,000 Total rent paid in 2017 6,000
_	Part-year residents: Enter the amount while a resident of New Jersey
С	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