

**NJ-1041
1993**

**State of New Jersey
GROSS INCOME TAX
FIDUCIARY RETURN**

For Taxable Year January 1, 1993 - December 31, 1993

Or Other Taxable Year Beginning _____ 1993, Ending _____, 19 _____

5-F

Check this block if application for Federal extension is attached.

Federal Employer Identification Number	NAME OF ESTATE OR TRUST		
	NAME AND TITLE OF FIDUCIARY		
For Privacy Act Notification, see instructions.	ADDRESS OF FIDUCIARY (NUMBER AND STREET OR RURAL ROUTE)		
	CITY, VILLAGE OR POST OFFICE	STATE	ZIP CODE

RESIDENCY STATUS: (Check only ONE box)

- 1. Resident Estate - Date of decedent's death _____
 - 2. Resident Trust - Date trust created _____
 - 3. Nonresident Estate - Date of decedent's death _____
 - 4. Nonresident Trust - Date trust created _____
- } _____ NAME OF STATE
5. If estate was closed or trust terminated, check box Also state the date _____

GUBERNATORIAL ELECTIONS FUND

Do you wish to designate \$1 of your taxes for this fund? YES NO

Note: IF YOU CHECK THE "YES" BOX IT WILL NOT INCREASE THE TAX OR REDUCE THE REFUND

NOTE: If taxpayer is a nonresident estate or trust and income apportionment is necessary, complete Form NJ-1041-A

6.	Interest	6		
7.	Dividends	7		
8.	Net profits from business (From Schedule A, Line 25)	8		
9.	Net gains or income from disposition of property (From Schedule B, Line 29)	9		
10.	Net gains or income from rents, royalties, patents, and copyrights (From Schedule C, Line 32)	10		
11.	Distributive Share of Partnership Income	11		
12.	Other Income-State Nature _____ ATTACH RIDER IF NECESSARY	12		
13a	Total Income (Add lines 6 through 12)	13a		
13b	Income Commissions	13b		
13c	Gross Income (Line 13a minus Line 13b)	13c		
14.	Deductions for distribution to beneficiaries (From Sch. D Line 34) ...	14		
15.	Exemption - Enter \$1,000 (part year taxpayers - see Instructions) ...	15		
16.	Total deductions and exemption (Add Lines 14 and 15)	16		
17.	Taxable Income (Line 13c less Line 16)	17		
18.	TAX: (From Tax Rate Schedule on Page 4)	18		
19.	New Jersey Income Tax previously paid during taxable period	19		
20.	Credit for income or wage taxes paid by New Jersey estates or trusts to other jurisdictions (From Schedule E, Line 39)	20		
21.	Total payments and credits (Add Lines 19 and 20)	21		
22.	Balance of Tax Due (Line 18 less Line 21)	22		
23.	Overpayment (Line 21 less Line 18)	23		

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.

➔ SIGNATURE OF FIDUCIARY OR OFFICER REPRESENTING FIDUCIARY DATE _____

➔ SIGNATURE OF PREPARER OTHER THAN FIDUCIARY ADDRESS DATE FED. ID. NO. _____

Pay amount on line 22 in full. Write Federal ID Number on check or money order and make payable to:

**State of New Jersey - T.G.I.
Division of Taxation
CN 888
Trenton, N.J. 08646-0888**

SCHEDULE A		NET PROFITS FROM BUSINESS	List below the type of business, address and net profit (loss) from each business carried on individually by the taxpayer	
	TYPE OF BUSINESS	ADDRESS	NET PROFIT (LOSS)	
24.				
25.	TOTAL (Enter here and on Page 1, Line 8) (if Loss enter ZERO)			25

SCHEDULE B		NET GAINS OR INCOME FROM DISPOSITION OF PROPERTY	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.			
	(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)
26.						
27.	Capital Gains Distributions					27
28.	Other Net Gains					28
29.	Net Gains (Add Lines 26, 27 and 28) (Enter here and on Page 1, Line 9) (if loss Enter ZERO)					29

SCHEDULE C		NET GAINS OR INCOME FROM RENTS, ROYALTIES, PATENTS AND COPYRIGHTS	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.			
	(a) Kind of Property	(b) Net Rental Income (loss)	(c) Net Income From Royalties	(d) Net Income From Patents	(e) Net Income From Copyrights	
30.						
31.	TOTALS	(b)	(c)	(d)	(e)	
32.	Net Income (Combine Columns, b, c, d and e) (Enter here and on Page 1, Line 10) (if Loss enter ZERO)					32

SCHEDULE D		BENEFICIARIES SHARE OF INCOME					
	Name of Each Beneficiary	Indicate Residency Status	Address of each beneficiary. If mailing address differs from home address, give both.	Social Security Number			Amount Distributed During Taxable Period
33.							
34.	TOTAL (Enter here and on Page 1, Line 14)						34

SCHEDULE E		CREDIT FOR INCOME OR WAGE TAXES PAID TO OTHER JURISDICTIONS	A copy of other state(s) or political subdivision tax return(s) must be attached to Form NJ-1041.	
35.	Income Subject to Tax by Other Jurisdiction(s). Name(s)			35
36.	Income Subject to Tax by New Jersey. (From Page 1, Line 13c)			36
37.	Maximum Allowable Credit (35) _____ X _____ =	(36)	(New Jersey Tax, Line 18, Page 1)	37
38.	Income tax paid to other jurisdictions			38
39.	Credit Allowed. (Enter lesser of Line 37 or Line 38 here and on Page 1, Line 20)			39