	PA	RTNERSHI	P RETURN VOUCHER			
PART-100 AMENDED	2006		Filing Fee (Line 4 of Filing Fee Schedule)		0	0
For period beginning	, 2006 and ending	, 20	2. Installment Payment (Multiply Line 1 by .50)		0	0
Federal Employer I.D. Number			Nonresident Noncorporate Partner Tax		0	0
Partnership Name			4. Nonresident Corporate Partner Tax		0	0
Mailing Address			5. Total Fee and Tax (Add Lines 1-4)		0	0
City	State	Zip Code	6. Less: Line 1 of Tiered Partnership Payment Schedule		0	0
Dotum this yousho	Return this voucher with your payment.				0	0
Make checks payab	ole to: State of New Jerse D number and tax year o		8. Total Balance Due		0	0
Mail To: Filing F PO Box	ee and Tax on Partner	9. Overpayment: Check one ☐ Refund ☐ Credit to 2007		0	0	

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1	Number of Resident Partners	x \$150.00		=
2	Number of Nonresident Partners with Physical Nexus to New Jersey	x \$150.00		=
3	Number of Nonresident Partners without Physical Nexus to New Jersey	x \$150.00 x	Corporation Allocation Factor] =
4	Total Filing Fee (Add Lines 1–3)			
	rry the total from Line 4 to Line 1 on the front of Form F 50,000 on Line 1 of Form PART-100. TIERED PART	PART-100. If the amount on Li		50,000, enter
	t the Partnership's Name(s), Federal Identification Num each Schedule NJK-1 received.	ber(s) and share of New Jers	ey Tax reported on Line	e 1, Column B of Part III
	Name	FEIN	Amour	nt
A.				
B.				
C.				
D.				
E.				
	1. Total Tax Paid on Behalf of Partnership:			

Carry the total from Line 1 to Line 6 on the front of Form PART-100.