Ne	braska Department of	Nebra for the taxable				gh De	ecember						:			201	_
	Your First Name and Initial		Last Name	e				Ρ	LEAS	EDON	NOT W		N THIS	SPA	CE		
or Print	If a Joint Return, Spouse's Fir	Last Name															
Please Type	Current Mailing Address (Number and Street or PO Box)																
ž -	City State						Zip Co	de									
	IMPORTANT: SSN(S) MUST BE ENTERED BELOW. Your Social Security Number Spouse's Social Security Number							Hig	n Sch	ool Dis	trict C	ode			st be er ool cod	ntered usi <u>es</u> .)	ng <u>high</u>
(1) Farmer/Rancher	(2) Active Militar	у (eceased Taxp irst name & d		·									/ /	/
	1 Federal Filing Status					douity.	canj.					/ /					
	 (1) Single (2) Married, filing 	(3) 🗌 Marrie		separat	tely-Spouse	e's SSI	N:									ndent cl	nildren
2	a Check if YOU were:	Check if YOU were: (1) 65 or (2b			re if someone (such as your pare								
	SPOUSE was:	(3) 🗌 65 or	older	(4)	Blind		your s	pous	e as a	depe	ndent:	(1)] You		(2)	Spous	е
	3 Type of Return: (1) Resident	(2) 🗌 Partia (3) 🗌 Nonre			rom Schedule I		1	, 2	011 to)	/	/	(a	ittacl	h Sche	dule III)
	 Federal exemptions Federal adjusted gro Federal Form 1040, I 	ss income (AGI) (Federal F	Form 1	040EZ, line	94; F	ederal	Form	1040	A, line	21;			5	<u></u>		4 00
	6 Nebraska standard c see instructions; other qualified widow[er]; \$5	rwise, enter \$5,800) if single;	\$11,60	0 if married	d, filin	ig jointly	or) 6				00				
	7 Total itemized deduc8 State and local incon see instructions.)	ne taxes (Federal	Form 104	40, line	5, Schedu	le A	-						00				
	9 Nebraska itemized d								00								
	0 Enter the amount fro			,										10			00
1	1 Nebraska income be	fore adjustments	(line 5 mi	nus lin	e 10)									11			00
1	2 Adjustments increasi	ing federal AGI (li	ne 51, fro	m atta	ched Nebr	aska	Sched	ule I)	12				00				
1	3 Adjustments decreas If the amount on line (NOTE: If line 12 is -(13 is ONLY for a	state inco	ome ta	x refund de	educt	ion, che	eck th	is bo	c: 🗌 (see in	structi	00 ons)				
1	(NOTE: If line 12 is -0-, and you check this box, do not complete Nebraska Sched Nebraska Taxable Income (enter line 11 plus line 12 minus line 13). If less than									ter -0-				14			00
	5 Nebr. income tax (Re use Tax Calculation S	sident paper filers	may use	the Ne	br. Tax Tab	le; all	l others	must		-			00				
16	6 Nebraska minimum o			_													
	Federal Alternative Minimum tax (Recalculated Form 6251) \$																
	Federal Tax on Lump Sum Distributions (Form 4972)\$ Federal Tax on Early Distributions (Lesser of Form 5329 or																
	line 58 Form 1040).																

Total \$_

Multiply total (on the line immediately above) by 29.6% (.296) and enter the

result on line 16...... 16

17 Total Nebraska tax before personal exemption credit (add lines 15 and 16). Do not pay the amount on this

line. Pay the amount from line 39 COMPLETE REVERSE SIDE 8-417-2011

17

00

00

18	Amount from line 17 (Total Nebraska tax)	18	00
19	Nebraska personal exemption credit for residents only (\$120 per exemption) 19 00		
20	Credit for tax paid to another state Nebraska Schedule II, line 64 \$		
	(attach Nebr. Sch. II and the other state's return) plus prior year AMT credit		
	(attach Form 8801) \$ Enter the total on line 20		
21	Credit for the elderly or disabled (attach copy of Federal Schedule R) 21 00		
22	CDAA credit (see instructions)		
23	Form 3800N nonrefundable credit (attach Form 3800N) 23 00		
24	Nebraska child/dependent care nonrefundable credit, only if line 5 is more		
	than \$29,000 (attach a copy of Federal Form 2441 and see instructions) 24 00		
25	Credit for financial institution tax (see instructions) (attach Form NFC) 25		
26	Total nonrefundable credits (add lines 19 through 25)	26	00
27	Subtract line 26 from line 18 (if line 26 is more than line 18, enter -0-). If result is more than your		
	federal tax liability (and line 12 is less than \$5,000), see instructions. If entering federal tax, check box:		
	and attach a copy of the federal return	27	00
	Nebr. income tax withheld (attach 2011 Forms W-2, W-2G, 1099-R,1099-MISC, or K-1N). 28 00	-	
29	2011 estimated tax payments (include any 2010 overpayment credited to 2011 and		
	any payments submitted with an extension request)	_	
	Form 3800N refundable credit (attach Form 3800N) 30 00	-	
31	Nebraska child/dependent care refundable credit, if line 5 is \$29,000 or less		
~ ~	(attach a copy of Federal Form 2441 or Nebraska Form 2441N)	-	
	Beginning Farmer credit (attach Form 1099 BFC) 32 00	-	
33	Nebraska earned income credit. Enter number of qualifying children 97		
	Federal credit 98 \$00 x .10 (10%) (attach federal return,		
24	pages 1 and 2 – see instructions)	-	
	Angel Investment Tax Credit (see instructions) 00 Total refundable credits (add lines 28 through 34) 00	35	00
	Penalty for underpayment of estimated tax (see instructions). If you calculated a Form 2210N penalty of (-0-)	35	
50	or greater, or used the annualized income method, attach Form 2210N, and check this box 96	36	00
37	TOTAL TAX AND PENALTY. Add lines 27 and 36	37	00
	Use tax due on Internet and out-of-state purchases. See instructions.		
	Enter purchases subject to tax 92 \$;		
	State tax 93 \$00 (purchases x 5.5%); Local code 94 (see <u>local rate schedule</u>);		
	Local tax 95 \$00 (purchases x local rate of%, from local rate schedule)		
	Total tax \$00 Add state and local taxes and enter on line 38. If no use tax, enter (-0-) on line 38	. 38	00
39	TOTAL AMOUNT DUE. If line 35 is less than total of lines 37 and 38, subtract line 35 from the total of lines 37		
	and 38. Pay this amount in full. For electronic or credit card payment, check here 🗌 and see instructions	39	00
40	OVERPAYMENT. If line 35 is more than total of lines 37 and 38, subtract total of lines 37 and 38 from line 35.	40	00
41	Amount of line 40 you want APPLIED TO YOUR 2012 ESTIMATED TAX 41 00		
42	Wildlife Conservation Fund DONATION of \$1 or more 42 00		
	Nebraska Campaign Finance CONTRIBUTION of \$1 or more		
44	Amount of line 40 you want REFUNDED to you (line 40 minus lines 41, 42, and 43).		
	File early! It may take three months to receive your refund if you file a paper return	44	00
	Expecting a Refund? Have it sent directly to your bank account! (see instru-	uctions)	
45	a Routing Number 45b Type of Account 1 = Checking	2 = Savin	gs
	(Enter 9 digits, first two digits must be 01 through 12, or 21 through 32;		
	use an actual check or savings account number, not a deposit slip)	3	Direct
45	c Account Number		Deposit
	(Can be up to 17 characters. Omit hyphens, spaces, and special symbols. Enter from left to right and leave any unused boxes blan	k.)	
45	d \Box Check this box if this refund will go to a bank account outside the United States.		
	Under penalties of perjury, I declare that, as taxpayer or preparer, I have examined this return and to the best of my knowledge and I	belief. it is co	prrect and complete.
S	ign		
	Opened Sector Date Email Address		
this retu	copy of Urn for Spouse's Signature (if filing jointly, both must sign)		
your ree	paid		
pren	arer's		
	Preparer's Signature Date Preparer's PTIN	()
	Print Firm's Name (or yours if self-employed), Address and Zip Code EIN		Daytime Phone
			y

Mail returns **REQUESTING A REFUND** to: **NEBRASKA DEPARTMENT OF REVENUE, PO BOX 98912, LINCOLN, NE 68509-8912.** Mail returns **NOT REQUESTING A REFUND** to: **NEBRASKA DEPARTMENT OF REVENUE, PO BOX 98934, LINCOLN, NE 68509-8934.**