

## Nebraska S Corporation Income Tax Return

**FORM 1120-SN** 

for the calendar year January 1, 2011 through December 31, 2011 or other taxable year 2011 beginning Name Doing Business As (dba) PLEASE DO NOT WRITE IN THIS SPACE Legal Name Street or Other Mailing Address Beage City State Zip Code **Business Classification Code** Date Business Began in Nebraska Principal Business Activity in Nebraska Federal ID Number Nebraska ID Number Does the S corporation have nonresident individual shareholders? 24-YES (Complete Schedule II.) Check applicable box(es): (1) Initial Nebraska Return (3) Change in Address (5) Form 7004 Attached (2) Final Return (4) Amended Return (6) Form 3800N Attached Do not file if all shareholders are Nebraska residents and all income is derived from Nebraska sources. 1 Ordinary business income (line 21, Federal Form 1120S)..... 00 2 Nebraska adjustments increasing ordinary business income (line 7, Schedule A) . . . . . . . . . . 00 3 Nebraska adjustments decreasing ordinary business income (line 17, Schedule A)....... 3 00 4 00 5 5 Income reported to Nebraska (enter line 4 above or line 3, Schedule I, if applicable)...... 00 If line 5 shows a loss, skip lines 6 through 10 and go to line 11. 6 Percent of ownership by nonresident individual shareholders . . . . . . . . . % 7 Percent of ownership by nonresident individual shareholders for whom Nebraska Nonresident Income Tax Agreements, Forms 12N, are attached 8 Percent of income subject to withholding (line 6 minus line 7) . . . . . . . . 9 Income reported to Nebraska subject to withholding (line 5 multiplied by line 8)..... 00 10 Nebraska income tax withheld for nonresident individual shareholders (multiply line 9 by .0684). 10 00 11 Form 3800N credit and recapture ..... 00 00 13 TAX DUE if line 10 plus line 11 minus line 12 is greater than zero ...... 13 00 14 Overpayment if line 10 plus line 11 minus line 12 is less than zero...... 14 00 15 00 16 Overpayment to be REFUNDED (line 14 minus line 15). Lines 17a, 17b, and 17c must be 00 17a Routing Number 17b Type of Account 1 = Checking 2 = Savings (Enter 9 digits - the first two digits must be 01 through 12, or 21 through 32. Use the checking or savings account number from an actual check, not a deposit slip.) 17c Account Number (Can be up to 17 characters. Omit hyphens, spaces, and special symbols. Enter from left to right and leave any unused boxes blank.) 17d Check this box if this refund will go to a bank account outside the United States (see instructions). Under penalties of perjury, I declare that as taxpayer or preparer I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is correct and complete. Signature of Officer Date E-Mail Address Phone Number paid preparer's Preparer's Signature Preparer's PTIN Date use only

Daytime Phone Firm's Name (or yours if self-employed), Address, and Zip Code A COPY OF THE FEDERAL RETURN AND SUPPORTING SCHEDULES MUST BE ATTACHED TO THIS RETURN. IF MORE THAN TEN FEDERAL SCHEDULES K-1, SUBMIT COPIES AND SUPPORTING SCHEDULES ON CD-R MEDIA ONLY. Mail this return and payment to: NEBRASKA DEPARTMENT OF REVENUE, PO BOX 94818, LINCOLN, NE 68509-4818.

FIN



## S CORPORATION WITH OTHER INCOME AND DEDUCTIONS NEBRASKA SCHEDULE A—Adjustments to Ordinary Business Income • Read instructions. • Enter amounts for lines 1 through 4 from Schedule K, Federal Form 1120S.

**FORM 1120-SN** Schedule A 2011

Name on Form 1120-SN

Nebraska ID Number 24—

|          | ADJUSTMENTS INCREASING ORDINARY BUSINESS INCOME   |          | TOTALS |
|----------|---|----------|--------|
| 1        | Net income from rental real estate activities   | 1        | 00     |
|          | Net income from other rental activities  Portfolio income:  |          | 00     |
|          | <ul><li>a Interest income</li><li>b Dividend income</li></ul>   | 3 a 3 b  | 00     |
|          | c Royalty income  | 3 c      | 00     |
|          | d Net short-term capital gain   | 3 d      | 00     |
|          | e Net long-term capital gain  | 3 e      | 00     |
|          | f Other portfolio income  | 3f       | 00     |
| 4        | Net gain under Section 1231 (other than casualty or theft)  | 4        | 00     |
| 5        | Non-Nebraska state and local bond interest and dividend income (see instructions)   | 5        | 00     |
| 6<br>7   | Other income (attach schedule)  | . 6      | 00     |
|          | ADJUSTMENTS DECREASING ORDINARY BUSINESS INCOME • Enter amounts for lines 9 through 15 from Schedule K, Federal Form 1120S. |          | TOTALS |
| 8        | Income from U.S. government obligations (see instructions)  | 8        | 00     |
| 9        | Net loss from rental real estate activities   | 9        | 00     |
|          | Net loss from other rental activities   | 10       | 00     |
| ••       | a Net short-term capital loss   | 11 a     | 00     |
|          | <b>b</b> Net long-term capital loss   | 11 b     | 00     |
|          | c Other portfolio loss.   | 11 c     | 00     |
| 12       | Net loss under Section 1231   | 12       | 00     |
| 13       | Other loss not included in lines 9 through 12   | 13       | 00     |
| 14       | Charitable contributions  | 14       | 00     |
| 15       | Section 179 expense deduction   | 15       | 00     |
| 16<br>17 | Other deductions (attach schedule)  | 16<br>17 | 00     |