NEBRASKA Good Life. Great Service. DEPARTMENT OF REVENUE

Nebraska Individual Income Tax Return for the taxable year January 1, 2022 through December 31, 2022 or other taxable year: , 2022 through ,

FORM 1040N 2022

-	PARTITION OF REVERSE		,			,				
Your	First Name and Initial	Last N	Last Name			e Do Not Write	In This Spa	ace		
If a Joint Return, Spouse's First Name and Initial			Last Name							
Curre	ent Mailing Address (Number and Stre	eet or PO Box)								
City		State		Zip Co	de					
`	Your Social Security Number	Spouse's Soc	ial Security Number			High Sch	ool District	Code		±Ö
Durin	g 2022, did you receive, sell, e	exchange, gift, o	r otherwise dispos	se of a digital as	set or a fir	nancial interest	t in a digital	asset?	Yes	No
(1)	Farmer/Rancher (2) Ac	tive Military		Taxpayer(s) e & date of death):	-			_	/	
1 F	ederal Filing Status:								,	,
		Married, filir	ig separately—Sp	ouse's SSN:		. , ,	Head of			
	2) Married, filing jointly	and Full Name	, <u> </u>	Lav			Widow(
	theck if YOU were: (1) [(2) Blind			omeone (such				
	POUSE was: (3) [65 or older	(4) Blind	your s	pouse as	a dependent	: (1) <u> </u>	u	(2) Sp	ouse
	ype of Return: ☐ Resident (2) [Partial-year	resident from	/	, 2022	to /		2022 (attach Sc	hedule III)
(1	,		t (attach Schedul	e III)	, 2022	10 /	,	2022 (allacii oc	illedule III)
4 N	ebraska personal exemptions		<u> </u>		:					
	Yourself. If someone can cl							.4 a		
	Spouse. Married filing jointly									
С	Dependents, if more th	han three, see i	nstructions	Depende	nt's	7				
	First Name		Last Name	Social Security	Number					
						Total numb				
т.	atal Nabraaka naraanal ayam	untiona add li	noo 10 1b and	10		dependents			-	4
	otal Nebraska personal exem ederal adjusted gross income	•						5	4	00
	ebraska standard deduction					leave blatik .		3		00
	ee instructions; otherwise, ent		•							
	ualified widow[er]; \$7,350 if mar		~		-		00			
7 To	otal itemized deductions (line	17, Federal So	chedule A – see	instructions)	7		00			
8 S	tate and local income taxes (I	line 5a, Schedı	ule A, Federal Fo	rm 1040 or 104	0-SR) 8	i e	00			
	ebraska itemized deductions						00			
	ebraska standard deduction							1.0		
•	ne larger of line 6 or line 9) ebraska income before adjus							10 11		00
	djustments increasing federa	•	•				00	111		00
	djustments decreasing federa	•					00			
	ebraska Taxable Income (en	•								
	omplete lines 15 and 16. Part							14		00
15 N	ebraska income tax (Partial-y	year residents	and nonresidents	s enter the resu	t					
	om line 9, Nebraska Schedul									
	Il others must use Tax Calcul		e.)		15		00	_		
	ebraska other tax calculation		1 15 4070)	10 . 0						
	Federal Tax on Lump-Sum D			16 a \$						
D	Federal tax on early distribute Form 5329 or line 8, Sch. 2, F	•		16 h \$						
С	Total (add lines 16a and 16l		· ·							
	Residents multiply line 16c k				6.					
	Partial-year residents and no									
	Nebraska Schedule III				16		00			
	otal Nebraska tax before Neb	-	•	•						
D	o not pay the amount on this	line. Pay the a	mount from line	43				17		00

18	Nebr. personal exemption credit for residents only (\$146 times the number on line 4)	18	00		
19	Credit for tax paid to another state, line 6, Nebraska Schedule II				
	(attach Nebraska Schedule II and a copy of the other state's return)	19	00		
20	Credit for the elderly or disabled (attach copy of Federal Schedule R)	20	00		
21	Community Development Assistance Act credit (attach Form CDN)	21	00		
22	Form 3800N nonrefundable credit (attach Form 3800N)	22	00		
	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)	23	00		
24	Credit for financial institution tax (attach Form NFC)		00		
	Employer's credit for expenses incurred for TANF (ADC) recipients (see instr.)		00		
	Designated extremely blighted area tax credit (attach Form 1040N-EB)		00		
	Doognated extensity digited area tax creat (attach 1 of 101 ED)		1 00		
27	Total nonrefundable credits (add lines 18 through 26)			27	00
	Nebraska tax after nonrefundable credits. Subtract line 27 from line 17 (if line 27 is more				
20	result is greater than your federal tax liability, see page 9 in the instructions. If entering fe				
	attach a copy of the federal return			28	00
20				20	
29	Total Nebraska income tax withheld (attach 2022 Forms, see instructions) a W-2 \$ b K-1N \$				
	T	00	00		
20	c W-2G, 1099-R,1099-MISC, 1099-NEC or others \$		00		
30	2022 estimated income tax payments (include any 2021 overpayment credited to 2022 a		00		
	any payments submitted with an extension request)		00		
	Form 3800N refundable credit (attach Form 3800N)	31	00		
32	Nebraska child/dependent care refundable credit, if line 5 is \$29,000 or less				
	(attach a copy of Form 2441N)		00		
	Beginning Farmer credit from Form 1099 BFC (NDA NextGen)	33	00		
34	Nebraska earned income credit. Enter number of qualifying children 97				
	Federal credit 98 \$.00 x .10 (10%) (attach pages 1-2 of federal return)		00		
	Credit for school district property taxes (attach Form PTC)		00		
36	Credit for community college property taxes (attach Form PTC)		00		
	Credit for qualified Volunteer Emergency Responders (see instructions)		00		
38	Stillborn child tax credit (attach Birth Resulting in Stillbirth Certificate and see instructions	38	00		
39	Total refundable credits (add lines 29 through 38)			39	00
40	Penalty for underpayment of estimated tax (see instructions). If you calculated a Form 22	210N penalty of	-0- or greater,		
	or used the annualized income method, attach Form 2210N, and check this box $\ 96 \ $			40	00
41	Total tax and penalty. Add lines 28 and 40			41	00
42	Use tax due on taxable purchases where applicable sales tax was not collected. (see inst	ructions)			
	Enter purchases subject to state tax 91 \$ State tax 92 \$ (purchases x	(5.5%);			
	Enter purchases subject to local tax 93 \$ Local tax 94 \$ (purchases x	α local rate of $_$	<u> </u>		
	95 Local code (see local rate schedule);				
	Add state and local taxes and enter on line 42. If no use tax is due, enter -0- on line 42			42	00
43	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 from tot		nd 42		
	Pay this amount in full. For electronic or credit card payment check here and see instru	ctions		43	00
44	Overpayment. If line 39 is more than the total of lines 41 and 42, subtract the total of lines	es 41 and 42 fro	om line 39	44	00
45	Amount of line 44 you want applied to your 2023 estimated tax	45	00		
46	Wildlife Conservation Fund donation of \$1 or more	46	00		
47	Amount of line 44 you want refunded to you (line 44 minus lines 45 and 46) Your refund	d will generally	y be issued by		
	July 15, if your paper return is filed by April 15 (see instructions)			47	00
488	Routing Number 48b Type of Acco	ount	1 = Checking	2 = Savings	5
				7	Direct_
480	Account Number				Deposit
480	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 a	nd to the best of r	ny knowledge and belie	f, it is true, c	orrect, and complete.
S	ign				
-		ail Address			
ера	copy of \	,			
s retu ur red	rn for Spouse's Signature (if filing jointly, both must sign) Daytime Phone				
	paid				
еp	arer's				
_	Preparer's Signature Date Prep	arer's PTIN		()
	Print Firm's Name (or yours if self-employed), Address and Zip Code EIN				Daytime Phone