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NEBRASKA
Good Life. Great Service.
DEPARTMENT OF REVENUE

Employer's Credit for Expenses Incurred for TANF (ADC) Recipients

FORM
TANF

Name on Return | Nebraska ID Number

- **Credit will not be allowed if employees are not identified by name, Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN), and hire date. The Department may request additional information to document expenses during or after processing.**
- **Enter all dollar amounts as whole dollars.**
- **A separate schedule must be filed for each employer.**

Employer Name | Nebraska ID Number

Employee Information			Employer Expense Information			Total Qualified Expenses for this Employee [Columns (A) + (B) + (C)]
Name	SSN or ITIN	Hire Date	(A) Postsecondary Education	(B) High School Equivalency	(C) Transportation	

1 Total qualified expenses	**1**	
2 Total credit (total qualified expenses multiplied by .20). Enter here and on line 25 of Form 1040N, line 13 of Form 1120N, or line 17 of Form 1041N.	**2**	