

Please Type or Print

Your First Name and Initial	Last Name	Please Do Not Write In This Space
If a Joint Return, Spouse's First Name and Initial	Last Name	
Current Mailing Address (Number and Street or PO Box)		
City	State	

Your Social Security Number	Spouse's Social Security Number	High School District Code	
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During 2022, did you receive, sell, exchange, gift, or otherwise dispose of a digital asset or a financial interest in a digital asset? Yes No

(1) <input type="checkbox"/> Farmer/Rancher	(2) <input type="checkbox"/> Active Military	(1) <input type="checkbox"/> Deceased Taxpayer(s) (first name & date of death):	
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1 Federal Filing Status:

(1) Single (3) Married, filing separately – Spouse's SSN: _____ (4) Head of Household
 (2) Married, filing jointly and Full Name _____ (5) Widow(er) with dependent children

2a Check if YOU were: (1) 65 or older (2) Blind **2b** Check here if someone (such as your parent) can claim you or your spouse as a dependent: (1) You (2) Spouse

SPOUSE was: (3) 65 or older (4) Blind

3 Type of Return:

(1) Resident (2) Partial-year resident from _____ / _____, 2022 to _____ / _____, 2022 (attach Schedule III)
 (3) Nonresident (attach Schedule III)

4 Nebraska personal exemptions. (Enter 1 in each line of 4a or 4b that applies):

a Yourself. If someone can claim you as a dependent, leave blank. **4 a** _____

b Spouse. Married filing jointly returns, if someone can claim your spouse as a dependent leave blank. **4 b** _____

c

Dependents, if more than three, see instructions	Dependent's Social Security Number	
First Name	Last Name	

Total number of dependents listed **4 c** _____

Total Nebraska personal exemptions – add lines 4a, 4b, and 4c **4** _____

5 Federal adjusted gross income (AGI) (line 11, Federal Form 1040 or 1040-SR) Do not leave blank	5		00
6 Nebraska standard deduction (if you checked any boxes on line 2a or 2b above, see instructions; otherwise, enter \$7,350 if single; \$14,700 if married, filing jointly or qualified widow[er]; \$7,350 if married, filing separately; or \$10,750 if head of household)	6		00
7 Total itemized deductions (line 17, Federal Schedule A – see instructions)	7		00
8 State and local income taxes (line 5a, Schedule A, Federal Form 1040 or 1040-SR)	8		00
9 Nebraska itemized deductions (line 7 minus line 8)	9		00
10 Nebraska standard deduction or the Nebraska itemized deductions, whichever is greater (the larger of line 6 or line 9)	10		00
11 Nebraska income before adjustments (line 5 minus line 10)	11		00
12 Adjustments increasing federal AGI (line 9, from attached Nebraska Schedule I)	12		00
13 Adjustments decreasing federal AGI (line 33, from attached Nebraska Schedule I)	13		00
14 Nebraska Taxable Income (enter line 11 plus line 12 minus line 13). If less than -0-, enter -0-. Residents complete lines 15 and 16. Partial-year residents and nonresidents complete Nebr. Sch. III before continuing	14		00
15 Nebraska income tax (Partial-year residents and nonresidents enter the result from line 9, Nebraska Schedule III. Paper filers may use the Nebraska Tax Table. All others must use Tax Calculation Schedule.)	15		00
16 Nebraska other tax calculation:			
a Federal Tax on Lump-Sum Distributions (Federal Form 4972) 16 a \$ _____			
b Federal tax on early distributions (lesser of Federal Form 5329 or line 8, Sch. 2, Federal Form 1040 or 1040-SR) 16 b \$ _____			
c Total (add lines 16a and 16b) 16 c \$ _____			
Residents multiply line 16c by 29.6% (x .296) and enter the result on line 16. Partial-year residents and nonresidents enter the result from line 10, Nebraska Schedule III	16		00
17 Total Nebraska tax before Nebraska personal exemption credit (add lines 15 and 16). Do not pay the amount on this line. Pay the amount from line 43.	17		00

