

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	

Important: SSN(s) must be entered below.				High School District Code					
Your Social Security Number	Spouse's Social Security Number								

(1) Farmer/Rancher (2) Active Military (1) Deceased Taxpayer(s)
(first name & date of death): _____ / /

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
 SPOUSE was: (3) 65 or older (4) Blind your spouse as a dependent: (1) You (2) Spouse

3 Type of Return:
 (1) Resident (2) Partial-year resident from _____ / _____ , 2015 to _____ / _____ , 2015 (attach Schedule III)
 (3) Nonresident (attach Schedule III)

4 Federal exemptions (number of exemptions claimed on your 2015 federal return)	4	
5 Federal adjusted gross income (AGI) (line 4, Federal Form 1040EZ; line 21, Federal Form 1040A; line 37, Federal Form 1040)	5	00
6 Nebraska standard deduction (if you checked any boxes on line 2a or 2b above, see instructions; otherwise, enter \$6,300 if single; \$12,600 if married, filing jointly or qualified widow[er]; \$6,300 if married, filing separately; or \$9,250 if head of household)	6	00
7 Total itemized deductions (line 29, Federal Schedule A – see instructions)	7	00
8 State and local income taxes (line 5, Schedule A, Federal Form 1040 – see instructions)	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 29, 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 Nebraska Schedule 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 59, Federal Form 1040) 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 personal exemption credit (add lines 15 and 16). Do not pay the amount on this line. Pay the amount from line 39.	17	00

