

18 Amount from line 17 (Total Nebraska tax)			18	
19 Nebraska personal exemption credit for residents only (\$101 per exemption claimed on line 4). If line 5 is more than \$119,000 – married/joint, \$72,000 – single, \$99,000 – head of household, \$59,500 – married-separate – see page 11 of instructions. Nonresidents and partial-year residents – enter -0-, and complete line 65, Nebraska Schedule III.	19			
20 Credit for tax paid to another state (attach Nebraska Schedule II and the other state's return). Check this box if reporting AMT credit <input type="checkbox"/>	20			
21 Credit for the elderly or disabled (attach copy of Federal Schedule R/ Schedule 3 – see instructions)	21			
22 CDAA credit (see instructions)	22			
23 Form 3800N credit (attach Form 3800N)	23			
24 Form 829N credit (see instructions)	24			
25 Nebraska dependent/child care credit, if line 5 is more than \$29,000 (see page 8 of instructions)	25			
26 Total nonrefundable credits (add lines 19 through 25)			26	
27 Subtract line 26 from line 18 (if line 26 is more than line 18, enter -0-). If result is more than your federal tax liability and line 12 is less than \$5,000, see instructions. If entering federal tax, check box: <input type="checkbox"/> , attach federal return copy			27	
28 Nebraska income tax withheld (attach 2004 Forms W-2, W-2G, 1099-R, 1099-MISC, or 14N)	28			
29 2004 estimated tax payments (include 2003 overpayment credited to 2004 and any payments submitted with an extension request)	29			
30 Form 4136N credit (attach Form 4136N)	30			
31 Nebraska child/dependent care refundable credit, if line 5 is \$29,000 or less (see page 9 of instr. and attach copy of Fed. Form 1040A, Sch. 2; or Fed. Form 2441)	31			
32 Beginning Farmer credit (attach certificate) <input type="checkbox"/> ; LB 608 credit <input type="checkbox"/> ; check applicable box	32			
33 Total of lines 28, 29, 30, 31, and 32			33	
34 AMOUNT YOU OWE (subtract line 33 from line 27 and pay in full with return). If over \$300 and Form 2210N is attached, check here: <input type="checkbox"/> . Include penalty in line 34 and show here: 99 \$			34	
35 If line 33 is more than line 27, subtract line 27 from line 33. This is the amount you OVERPAID			35	
36 Amount of line 35 you want APPLIED TO YOUR 2005 ESTIMATED TAX	36			
37 Nongame and Endangered Species Fund DONATION of \$1.00 or more	37			
38 Nebraska campaign finance CONTRIBUTION of \$1.00 or more	38			
39 Nebraska State Fair Foundation CONTRIBUTION of \$1.00 or more	39			
40 Amount of line 35 you want REFUNDED to you (line 35 minus lines 36, 37, 38, and 39). Allow three months for your refund, but if you file electronically and use Direct Deposit, you could receive your refund in 7-10 days. For credit card payment check here <input type="checkbox"/> and see page 5 of instructions			40	

Expecting a Refund?

• Have it sent directly to your bank account! (see instructions on page 10)

41a Routing Number **41b** Type of Account Checking Savings

(Enter 9 digits, first two digits must be 01 through 12, or 21 through 32; use an actual check or savings account number, not a deposit slip)

41c 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.)



Under penalties of perjury, I declare that, as taxpayer or preparer, I have examined this return and to the best of my knowledge and belief, it is correct and complete.

sign here X

Keep a copy of this return for your records.

Your Signature _____ Date _____ Signature of Preparer if Other Than Taxpayer _____ Date _____

Spouse's Signature (if filing jointly, both must sign) _____ Daytime Phone _____ Address _____ Daytime Phone _____

Mail refund returns (or returns without payment) to: **NEBRASKA DEPARTMENT OF REVENUE, P.O. BOX 98912, LINCOLN, NE 68509-8912**
Mail returns with payment to: **NEBRASKA DEPARTMENT OF REVENUE, P.O. BOX 98934, LINCOLN, NE 68509-8934**