

Nebraska S Corporation Income Tax Return

FORM 1120-SN

2016

for the calendar year January 1, 2016 through December 31, 2016 or other taxable year
beginning , and ending ,

Please Type or Print

Name Doing Business As (dba)			PLEASE DO NOT WRITE IN THIS SPACE	
Legal Name				
Street or Other Mailing Address				
City	State	Zip Code	Business Classification Code	Date Business Began in Nebraska
Principal Business Activity in Nebraska	Federal ID Number	Nebraska ID Number	Does the S corporation have nonresident individual shareholders? <input type="checkbox"/> YES (Complete Schedule II.) <input type="checkbox"/> NO	

Check the applicable boxes:

- | | | | |
|--|--|---|--|
| (1) <input type="checkbox"/> Initial Nebraska Return | (3) <input type="checkbox"/> Change in Address | (5) <input type="checkbox"/> Amended Return | (7) <input type="checkbox"/> Form 3800N Attached |
| (2) <input type="checkbox"/> Final Return | (4) <input type="checkbox"/> Change in Name | (6) <input type="checkbox"/> Form 7004 Attached | (8) <input type="checkbox"/> Distributed Form 3800N Credit |

Do not file if all shareholders are Nebraska residents and all income is derived from Nebraska sources.

1 Ordinary business income (line 21, Federal Form 1120S)	1		00
2 Nebraska adjustments increasing ordinary business income (line 7, Schedule A)	2		00
3 Nebraska adjustments decreasing ordinary business income (line 17, Schedule A)	3		00
4 Nebraska adjusted income (line 1 plus line 2 minus line 3)	4		00
5 Income reported to Nebraska (enter line 4 above or line 3, Schedule I, if applicable)	5		00
If line 5 shows a loss, skip lines 6 and 7 and go to line 8.			
6 Income reported to Nebraska subject to withholding. Enter the Column (F), Schedule II total . . .	6		00
7 Nebraska income tax withheld for nonresident individual shareholders. Enter the Column (G), Schedule II total	7		00
8 Form 3800N credit and recapture	8		00
9 Tax deposited with Form 7004N and 2016 estimated income tax payments.	9		00
10 TAX DUE if line 7 plus line 8 minus line 9 is greater than zero. <input type="checkbox"/> Check this box if your payment is being made electronically	10		00
11 Overpayment if line 7 plus line 8 minus line 9 is less than zero.	11		00
12 Amount on line 11 you want credited to 2017 estimated income tax.	12		00
13 Overpayment to be REFUNDED (line 11 minus line 12). Complete lines 14a, 14b, and 14c to receive your refund electronically. Complete line 14d if appropriate (see instructions)	13		00

14a Routing Number **14b** Type of Account 1 = Checking 2 = Savings
(Enter 9 digits - the first two digits must be 01 through 12, or 21 through 32.
Use the checking or savings account number from an actual check, not a deposit slip.)

14c 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.)

14d ☐ Check this box if this refund will go to a bank account outside the United States (see instructions).

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



sign here			
	Signature of Officer	Date	Email Address
paid preparer's use only			
	Title	Phone Number	
	Preparer's Signature	Date	Preparer's PTIN
	Firm's Name (or yours if self-employed), Address, and Zip Code	EIN	Daytime Phone

Paper filers must attach a copy of the federal return and supporting schedules to this return.
All filers are encouraged to e-file their return including schedules K-1N.

Mail this return and payment to: **Nebraska Department of Revenue, PO Box 94818, Lincoln, NE 68509-4818.**

S Corporation With Other Income And Deductions
Nebraska Schedule A—Adjustments to Ordinary Business Income
• Enter amounts for lines 1 through 4 from Schedule K, Federal Form 1120S.

Name on Form 1120-SN

Nebraska ID Number

Adjustments Increasing Ordinary Business Income		Totals	
1 Net income from rental real estate activities	1		00
2 Net income from other rental activities	2		00
3 Portfolio income:			
a Interest income 3 a _____			
b Dividend income 3 b _____			
c Royalty income 3 c _____			
d Net short-term capital gain..... 3 d _____			
e Net long-term capital gain..... 3 e _____			
f Other portfolio income 3 f _____			
Total portfolio income (total of lines 3a through 3f).....	3		00
4 Net gain under Section 1231 (other than casualty or theft)	4		00
5 State and local government interest and dividend income (see instructions)	5		00
6 Other income (attach schedule)	6		00
7 Total adjustments increasing ordinary business income (total of lines 1 through 6). Enter here and on line 2, Form 1120-SN.....	7		00
Adjustments Decreasing Ordinary Business Income		Totals	
• Enter amounts for lines 9 through 15 from Schedule K, Federal Form 1120S.			
8 Qualified U.S. government interest deduction (see instructions)	8		00
9 Net loss from rental real estate activities	9		00
10 Net loss from other rental activities	10		00
11 Portfolio loss:			
a Net short-term capital loss..... 11 a _____			
b Net long-term capital loss 11 b _____			
c Other portfolio loss..... 11 c _____			
Total portfolio loss (total of lines 11a through 11c)	11		00
12 Net loss under Section 1231	12		00
13 Other loss not included in lines 9 through 12.....	13		00
14 Charitable contributions	14		00
15 Section 179 expense deduction	15		00
16 Other deductions (attach schedule)	16		00
17 Total adjustments decreasing ordinary business income (total of lines 8 through 16). Enter here and on line 3, Form 1120-SN.....	17		00

Nebraska ID Number

8-289-2016

(A)		(B) Shareholder SSN or FEIN	(C) Percent of Ownership	(D) Nebraska Resident (Y or N)	Nonresident Individuals and Grantor Trusts		
Shareholder Name	Shareholder Address				(E) Check if Form 12N Attached	(F) Shareholder Income Line 5 Form 1120SN x Column C Percent	(G) Nebraska Income Tax Withholding Amount [Col (F) x .0684] (Enter on Nebr. Sch. K-1N)
Totals							

Nebraska Schedule III—Subsidiary or Affiliated Corporations

Name and Address of All Corporations	ID Numbers		Apportionment Factor Information*
	Nebraska	Federal	Amount of Nebraska Sales or Receipts
S Corporation Filing this Return			
Parent Corporation, If Different from Above			
Subsidiary/Affiliated Corporations			
Totals			

*Complete the apportionment factor information summarizing the numerator of the corporations filing a combined corporation income tax return.

Nebraska Schedule K-1N —
Shareholder's Share of Income, Deductions, Modifications, and Credits

Corporation's Name and Mailing Address			Shareholder's Name and Mailing Address		
Name Doing Business As (dba)			Name		
Legal Name					
Street or Other Mailing Address			Street or Other Mailing Address		
City	State	Zip Code	City	State	Zip Code
Nebraska ID Number	Federal ID Number		Social Security Number/Federal ID Number	Spouse's Social Security Number	
Taxable Year of Organization			Check One:		
Beginning _____, 20____ and Ending _____, 20____			<input type="checkbox"/> Resident Individual <input type="checkbox"/> Nonresident Individual <input type="checkbox"/> Estate or Trust <input type="checkbox"/> Exempt Organization		
S Corporation's Nebraska Apportionment Factor			Shareholder's Ownership Percentage	If applicable, check the appropriate box:	
			%	<input type="checkbox"/> Final <input type="checkbox"/> Amended	

Part A
Shareholder's Share of Income and Deductions

1	Ordinary business income (loss)	1	
2	Net income (loss) from rental real estate activities	2	
3	Net income (loss) from other rental activities	3	
4	Interest income	4	
5	Dividend income	5	
6	Royalties	6	
7	Net short-term capital gain (loss)	7	
8	Net long-term capital gain (loss)	8	
9	Net Section 1231 gain (loss)	9	
10	Other income	10	
11	Charitable contributions	11	
12	Section 179 expense deduction	12	
13	Other deductions and losses	13	

Part B
Shareholder's Share of Modifications

14	Qualified U.S. government interest deduction	14	
15	State and local government interest and dividend income	15	
16	Income (loss) from non-Nebraska sources	16	

Part C
Shareholder's Share of Credits

17	Community Development Assistance Act credit	17	
18	Form 3800N credits (see instructions)		
	a Employment and Investment Growth Act	18 a	\$ _____
	b Nebraska Advantage Act	18 b	\$ _____
	c Nebraska Advantage Rural Development Act	18 c	\$ _____
	d Nebraska Advantage Research and Development Act	18 d	\$ _____
	e New Markets Tax Credit	18 e	\$ _____
	f Nebraska Historic Tax Credit	18 f	\$ _____
	Total of 18a through 18f	18	
19	Contractor withholding (see instructions)	19	
20	Nebraska income tax withheld (see instructions)	20	