


Nebraska Individual Income Tax Return
for the taxable year January 1, 2022 through December 31, 2022 or other taxable year:
, 2022 through ,

Please Type or Print	Your First Name and Initial AKSHARA		Last Name THUMMALAPALLY		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) 7505 PIERCE PLAZA, Apt. 08					
	City OMAHA		State NE	Zip Code 68124		
Your Social Security Number 1 1 4 3 1 6 8 8 3		Spouse's Social Security Number		High School District Code		
During 2022, did you receive, sell, exchange, gift, or otherwise dispose of a digital asset or a financial interest in a digital asset? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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):		
1 Federal Filing Status:						
(1) <input checked="" type="checkbox"/> Single		(3) <input type="checkbox"/> Married, filing separately—Spouse's SSN: _____		(4) <input type="checkbox"/> Head of Household		
(2) <input type="checkbox"/> Married, filing jointly		and Full Name _____		(5) <input type="checkbox"/> Widow(er) with dependent children		
2a Check if YOU were:						
(1) <input type="checkbox"/> 65 or older		(2) <input type="checkbox"/> Blind		2b Check here if someone (such as your parent) can claim you or your spouse as a dependent: (1) <input type="checkbox"/> You (2) <input type="checkbox"/> Spouse		
3 Type of Return:						
(1) <input type="checkbox"/> Resident		(2) <input checked="" type="checkbox"/> Partial-year resident from 0 1 / 0 1 , 2022 to 0 7 / 0 1 , 2022 (attach Schedule III)				
(3) <input type="checkbox"/> 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 <input type="text" value="1"/>						
b Spouse. Married filing jointly returns, if someone can claim your spouse as a dependent leave blank. 4 b <input type="text"/>						
c						
Dependents, if more than three, see instructions		Dependent's				
First Name	Last Name	Social Security Number				
Total number of dependents listed 4 c				<input type="text" value="1"/>		
Total Nebraska personal exemptions – add lines 4a, 4b, and 4c						4 <input type="text" value="1"/>
5 Federal adjusted gross income (AGI) (line 11, Federal Form 1040 or 1040-SR) Do not leave blank 5 <input type="text" value="26,845.00"/>						
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 <input type="text" value="7,350.00"/>						
7 Total itemized deductions (line 17, Federal Schedule A – see instructions) 7 <input type="text" value="00"/>						
8 State and local income taxes (line 5a, Schedule A, Federal Form 1040 or 1040-SR) 8 <input type="text" value="0.00"/>						
9 Nebraska itemized deductions (line 7 minus line 8) 9 <input type="text" value="0.00"/>						
10 Nebraska standard deduction or the Nebraska itemized deductions, whichever is greater (the larger of line 6 or line 9) 10 <input type="text" value="7,350.00"/>						
11 Nebraska income before adjustments (line 5 minus line 10). 11 <input type="text" value="19,495.00"/>						
12 Adjustments increasing federal AGI (line 9, from attached Nebraska Schedule I) 12 <input type="text" value="00"/>						
13 Adjustments decreasing federal AGI (line 33, from attached Nebraska Schedule I) 13 <input type="text" value="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 <input type="text" value="19,495.00"/>						
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 <input type="text" value="128.00"/>						
16 Nebraska other tax calculation:						
a Federal Tax on Lump-Sum Distributions (Federal Form 4972) 16 a \$ <input type="text"/>						
b Federal tax on early distributions (lesser of Federal Form 5329 or line 8, Sch. 2, Federal Form 1040 or 1040-SR) 16 b \$ <input type="text"/>						
c Total (add lines 16a and 16b) 16 c \$ <input type="text"/>						
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 <input type="text" value="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 <input type="text" value="128.00"/>						

18	Nebr. personal exemption credit for residents only (\$146 times the number on line 4)	18	0.	00
19	Credit for tax paid to another state, line 6, Nebraska Schedule II (attach Nebraska Schedule II and a copy of the other state's return)	19		00
20	Credit for the elderly or disabled (attach copy of Federal Schedule R)	20	0.	00
21	Community Development Assistance Act credit (attach Form CDN)	21		00
22	Form 3800N nonrefundable credit (attach Form 3800N)	22		00
23	Nebraska child/dependent care nonrefundable credit, only if line 5 is more than \$29,000 (attach a copy of Federal Form 2441 and see instructions)	23	0.	00
24	Credit for financial institution tax (attach Form NFC)	24		00
25	Employer's credit for expenses incurred for TANF (ADC) recipients (see instr.)	25		00
26	Designated extremely blighted area tax credit (attach Form 1040N-EB)	26		00
27	Total nonrefundable credits (add lines 18 through 26)	27	0.	00
28	Nebraska tax after nonrefundable credits. Subtract line 27 from line 17 (if line 27 is more than line 17, enter -0-). If the result is greater than your federal tax liability, see instructions. If entering federal tax, check box <input type="checkbox"/> and attach a copy of the federal return	28	128.	00
29	Total Nebraska income tax withheld (attach 2022 Forms, see instructions) a W-2 \$ 152. b K-1N \$ c W-2G, 1099-R, 1099-MISC, 1099-NEC or others \$ 0.	29	152.	00
30	2022 estimated income tax payments (include any 2021 overpayment credited to 2022 and any payments submitted with an extension request)	30		00
31	Form 3800N refundable credit (attach Form 3800N)	31		00
32	Nebraska child/dependent care refundable credit, if line 5 is \$29,000 or less (attach a copy of Form 2441N)	32		00
33	Beginning Farmer credit from Form 1099 BFC (NDA NextGen)	33		00
34	Nebraska earned income credit. Enter number of qualifying children 97 <input type="checkbox"/> Federal credit 98 \$ <input type="text"/> .00 x .10 (10%) (attach pages 1-2 of federal return)	34		00
35	Credit for school district property taxes (attach Form PTC)	35		00
36	Credit for community college property taxes (attach Form PTC)	36		00
37	Credit for qualified Volunteer Emergency Responders (see instructions)	37		00
38	Stillborn child tax credit (attach Birth Resulting in Stillbirth Certificate and see instructions)	38		00
39	Total refundable credits (add lines 29 through 38)	39	152.	00
40	Penalty for underpayment of estimated tax (see instructions). If you calculated a Form 2210N penalty of -0- or greater, or used the annualized income method, attach Form 2210N, and check this box 96 <input type="checkbox"/>	40		00
41	Total tax and penalty. Add lines 28 and 40	41	128.	00
42	Use tax due on taxable purchases where applicable sales tax was not collected. (see instructions) Enter purchases subject to state tax 91 \$ <input type="text"/> State tax 92 \$ <input type="text"/> (purchases x 5.5%); Enter purchases subject to local tax 93 \$ <input type="text"/> Local tax 94 \$ <input type="text"/> (purchases x local rate of <input type="text"/> %) 95 Local code <input type="text"/> (see local rate schedule); Add state and local taxes and enter on line 42. If no use tax is due, enter -0- on line 42.	42	0.	00
43	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 from total of lines 41 and 42 Pay this amount in full. For electronic or credit card payment check here <input type="checkbox"/> and see instructions.	43		00
44	Overpayment. If line 39 is more than the total of lines 41 and 42, subtract the total of lines 41 and 42 from line 39.	44	24.	00
45	Amount of line 44 you want applied to your 2023 estimated tax	45		00
46	Wildlife Conservation Fund donation of \$1 or more 	46		00
47	Amount of line 44 you want refunded to you (line 44 minus lines 45 and 46) Your refund will generally be issued by July 15, if your paper return is filed by April 15 (see instructions).	47	24.	00

48a Routing Number

1	0	4	0	0	0	0	1	6
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 48b Type of Account

1

 1 = Checking 2 = Savings

48c Account Number

7	3	1	8	1	6	9	6	1											
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48d Check this box if this refund will go to a bank account outside the United States.



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 true, correct, and complete.

sign here

Your Signature _____ Date (531) 255-2711

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

REDDY.AKSHARA12@GMAIL.COM
Email Address

paid preparer's use only

SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/04/2023 P02082703
Preparer's Signature Date Preparer's PTIN
GLOBAL TAXES LLC 245 ROONEY CT E BRUNSWICK NJ 08816 84-3171965 (678) 965-9522
Print Firm's Name (or yours if self-employed), Address and Zip Code EIN CG REV 02/18/23 PRO Daytime Phone

Name on Form 1040N

AKSHARA THUMMALAPALLY

Social Security Number

1 1 4 3 1 6 8 8 3

Nebraska Schedule I — Nebraska Adjustments to Income for Nebraska Residents, Partial-Year Residents, and Nonresidents

• Attach additional pages if necessary.

Part A — Adjustments Increasing Federal AGI

1 Interest income from all state and local obligations exempt from federal tax		
a List type: _____	b Amount: \$ _____	
Total interest income exempt from federal tax. Enter total of lines 1b.....		1 00
2 Exempt interest income from Nebraska obligations		
a List type: _____	b Amount: \$ _____	
Total exempt interest income from Nebraska obligations. Enter total of lines 2b.....		2 00
3 Total taxable interest income. Enter the result of line 1 minus line 2.....		3 00
4 Financial Institution Tax Credit claimed. Enter amount from line 24, Form 1040N.....		4 00
5 Nebraska College Savings Program recapture (see instructions).....		5 00
6 Nebraska Enable plan recapture.....		6 00
7 Federal net operating loss deduction.....		7 00
8 S corporation or LLC Non-Nebraska loss.....		8 00
9 Total adjustments increasing federal AGI (total lines 3 through 8). Enter here and on line 12, Form 1040N.....		9 00

Part B — Adjustments Decreasing Federal AGI

10 State income tax refund deduction. Enter line 1, Schedule 1, Federal Form 1040 or 1040-SR.....		10 00
11 U.S. government obligations exempt for state purposes (list below or attach schedule)		
a List type: _____	b Amount: \$ _____	
Total U.S. government obligations exempt for state purposes. Enter total of lines 11b.....		11 00
12 List fund name, total dividend, and percent of regulated investment company dividends from		
a U.S. obligation: _____		
b Total dividend: \$ _____ x c _____ % = d \$ _____		
Total regulated investment company dividends. Enter total of lines 12d.....		12 00
13 Total U.S. government obligations. Enter total of lines 11 and 12.....		13 00
14 Benefits paid by the Railroad Retirement Board (RRB) included in the federal AGI. Attach pages 1 and 2 of your federal income tax return and all Forms 1099 and W-2 from the RRB.		
a List type: _____	b Amount: \$ _____	
Total benefits paid by the RRB included in federal AGI. Enter total of lines 14b.....		14 00
15 Special capital gains/extraordinary dividend deduction [attach Form 4797N; a copy of Federal Schedule D; and Form 8949 (or Federal Schedule B when claiming extraordinary dividend deduction)] (see instructions).....		15 00
16 Nebraska College Savings Program contribution (see instructions).....		16 00
17 Employer contribution to the Nebraska Educational Savings Plan (see instructions).....		17 00
18 Nebraska Enable plan contributions. List the account number and annual contribution amount for each account you contributed to during this tax year (list below or attach schedule)		
a Account Number: _____	b Amount: \$ _____	
Enter total Nebraska Enable plan contributions.....		18 00
19 S corp and LLC Non-Nebraska income (attach Federal schedules K-1 and Nebraska Schedules K-1N,.....)		19 00
20 Nonresident military servicemember active duty pay (attach active duty Form W-2, identifying the income as attributable to another state, see instructions).....		20 00
21 Income earned by a Native American Indian in Indian country.....		21 00
22 Claim of right repayment.....		22 00
23 Nebraska NOL carryforward (attach the Nebraska NOL Worksheet for each loss year claimed on this line).....		23 00
24 Nebraska agricultural revenue bond interest.....		24 00
25 Interest from federally taxable Nebraska Investment Finance Association (NIFA) bonds.....		25 00
26 Interest from federally taxable Build America Bonds issued by Nebraska governmental units.....		26 00
27 Social Security included in Federal AGI (see instructions) Attach pages 1 and 2 of your federal income tax return.....		27 00
28 Military retirement benefits (Attach supporting documentation, see instructions).....		28 00
29 Dividends received or deemed to be received from corporations not subject to the IRC (Attach supporting documentation) ...		29 00
30 Segal AmeriCorps Education Award (attach Form 1099-MISC, see instructions).....		30 00
31 Cancer benefits received from the Firefighter Cancer Benefits Act (Attach supporting documentation, see instructions).....		31 00
32 Teach in Nebraska Today Act student loan repayment assistance (Attach supporting documentation, see instructions).....		32 00
33 Total adjustments decreasing federal AGI (total lines 10 and 13 through 32). Enter here and on line 13, Form 1040N.....		33 00

Nebraska Schedule II — Credit for Tax Paid to Another State

Name on Form 1040N

AKSHARA THUMMALAPALLY

Social Security Number

1 1 4 | 3 1 | 6 8 8 3

Nebraska Schedule II —

Credit for Tax Paid to Another State for FULL-YEAR RESIDENTS ONLY

- Complete a separate Schedule II for each state.
- A complete copy of the return filed with another state must be attached. If the entire return is not attached, credit for tax paid to another state will not be allowed. Name of state:

1 Total Nebraska tax (line 17, Form 1040N)	1		00
2 Adjusted gross income derived from another state (do not enter amount of taxable income from the other state – use <u>Conversion Chart</u> on the DOR's website)	2		00
3 Ratio <div style="display: flex; align-items: center; justify-content: center;"> <div style="text-align: center; margin-right: 10px;">Line 2</div> <div style="border: 1px solid black; width: 60px; height: 15px; margin-right: 5px;"></div> <div style="margin: 0 5px;">=</div> <div style="border: 1px solid black; width: 60px; height: 15px; margin-right: 5px;"></div> <div style="margin: 0 5px;">÷</div> <div style="border: 1px solid black; width: 60px; height: 15px; margin-right: 5px;"></div> <div style="margin: 0 5px;">=</div> <div style="border: 1px solid black; width: 60px; height: 15px; margin-right: 5px;"></div> </div> (Form 1040N, Line 5 + Line 12 – Line 13) = <input type="text"/> + <input type="text"/> – <input type="text"/> = <input type="text"/>	3	<input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
4 Calculated tax credit. Line 1 multiplied by line 3 ratio	4		00
5 Tax due and paid to another state (do not enter amount withheld for the other state – use <u>Conversion Chart</u> on the DOR's website)	5		00
6 Allowable tax credit (line 1, 4, or 5, whichever is least). Enter amount here and on line 19, Form 1040N	6		00

Name on Form 1040N

AKSHARA THUMMALAPALLY

Social Security Number

1 1 4 | 3 1 | 6 8 8 3

Nebraska Schedule III —

Computation of Nebraska Tax for PARTIAL-YEAR RESIDENTS AND NONRESIDENTS ONLY

- You must complete lines 1 through 14, Form 1040N. If you have state, local, or federal bond interest or other adjustments, complete Parts A and B of Nebraska Schedule I. Use Schedule III to calculate your Nebraska tax liability.
- You do not have to provide a copy of other state returns when filing Schedule III.

<p>1 Income derived from Nebraska sources. Include income from wages, interest, dividends, business, farming, Nebraska unemployment payments, severance payments connected to Nebraska employment, partnerships, S corporations, limited liability companies, estates and trusts, gain or loss, rents, royalties, and financial institution tax credit amount. If there is no Nebraska income or loss, enter -0-.</p> <p>a List type: <u>Wages</u> b Amount: \$ <u>6,845.</u> List type: _____ Amount: _____ Total income derived from Nebraska sources. Enter total of lines 1b.....</p>		1	6,845.	00
<p>2 Adjustments as applied to Nebraska income, if any (see instructions)</p> <p>a List type: _____ b Amount: \$ _____ List type: _____ Amount: _____ Total adjustment as applied to Nebraska income. Enter total of lines 2b.....</p>		2		00
<p>3 Nebraska adjusted gross income (line 1 minus line 2).....</p>		3	6,845.	00
<p>4 Ratio — Nebraska's share of the total income (calculate to six decimal places, and round to five):</p> <p>Line 3 <u>6,845.</u> = <u>6,845.</u> (Form 1040N, Line 5 + Line 12 – Line 13) = <u>26,845.</u> + _____ – _____ = <u>26,845.</u></p>		4	0.	2 5 4 9 8
<p>5 Nebraska Taxable Income (line 14, Form 1040N)</p>		5	19,495.	00
<p>6 Nebraska tax calculation (see instructions)</p> <p>a Tax on Nebraska Taxable Income from line 5..... 6 a \$ <u>648.</u> b Partial-year residents, enter Nebraska nonrefundable credit for the elderly or disabled... 6 b \$ _____ c Partial-year residents, enter Nebraska child/dependent care nonrefundable credit..... 6 c \$ _____ d Subtotal credits (add lines 6b and 6c) 6 d \$ _____ Line 6a minus line 6d</p>		6	648.	00
<p>7 Multiply Nebraska personal exemption credit of \$146 by the number of Nebraska personal exemptions on line 4, Form 1040N.....</p>		7	146.	00
<p>8 Tax after Nebraska personal exemption credit (line 6 minus line 7). If less than \$0, enter -0- here, and if you have any other tax due, apply any unused Nebraska personal exemption credit against that tax on line 10e ...</p>		8	502.	00
<p>9 Nebraska income tax. Multiply line 8 by the ratio you computed on line 4. Enter result here and on line 15, Form 1040N.....</p>		9	128.	00
<p>10 Nebraska other tax calculation:</p> <p>a Federal Tax on Lump Sum Distributions (Form 4972)..... 10 a \$ _____ b Federal tax on early distributions (lesser of Form 5329 or line 8, Schedule 2, Federal Form 1040 or 1040-SR)..... 10 b \$ _____ c Subtotal (add lines 10a and 10b)..... 10 c \$ _____ d Tax calculation. Multiply line 10c by 29.6% (x .296)..... 10 d \$ _____ e Enter any unused Nebraska personal exemption credit from the calculation on line 8 10 e \$ _____ f Subtract line 10e from line 10d..... 10 f \$ _____ Multiply line 10f by line 4 ratio. Enter result here and on line 16, Form 1040N.</p>		10		00
<p>11 Earned income credit (Partial-Year Residents Only)</p> <p>a Number of qualifying children. Enter here and on line 34, box 97, Form 1040N..... 11 a _____ b Enter federal earned income credit from federal tax return here and on line 34, box 98, Form 1040N 11 b \$ _____ Multiply line 11b amount by 10% (x .10). Enter the result here (see instructions).</p>		11		00
<p>12 Nebraska earned income credit. Multiply line 11 by the ratio you computed on line 4 (Attach a copy of federal tax return pages 1 and 2 to your return). Enter result here and on line 34, Form 1040N</p>		12		00