

Nebraska and Local Sales and Use Tax Return

• If applicable, complete Schedule I on reverse side.
• See Nebraska Net Taxable Sales and Use Tax Worksheets.

Tax Category | Nebraska ID Number | Rpt. Code | Tax Period

Please Do Not Write In This Space

Due Date:

Name and Location Address

Name and Mailing Address

A Test Company
100 Main
Anywhere, WA 98070

• Name, address, or ownership changes? See instructions.

Check this box if your business has permanently closed, has been sold to someone else, or your permit is no longer needed. New owners must apply for their own sales tax permit.

1 Gross sales and services in Nebraska (see instructions and worksheets).....	1	\$300.00
2 Net Nebraska taxable sales as shown on line 2, Form 10 Worksheet (see instructions)	2	00
3 Nebraska sales tax (line 2 multiplied by .055)	3	\$16.50
4 Nebraska use tax (see instructions)	4	
Complete Nebraska Schedule I prior to completing lines 5 & 6.		
5 Local use tax from Nebraska Schedule I.....	5	\$0.00
6 Local sales tax from Nebraska Schedule I	6	\$3.00
7 Total Nebraska and local sales tax (line 3 plus line 6)	7	\$19.50
8 Sales tax collection fee (line 7 multiplied by .025; if the result is \$75.00 or more, enter \$75.00).....	8	\$0.49
9 Sales tax due (line 7 minus line 8).....	9	\$19.01
10 Total Nebraska and local use tax (line 4 plus line 5).....	10	\$0.00
11 Total Nebraska and local sales and use tax due (line 9 plus line 10).....	11	\$19.01
12 Previous balance with applicable interest at % per year and payments received through	12	

Check this box if your payment is being made electronically.

13 Balance due (line 11 plus or minus line 12). Pay in full with return 13 \$19.01

Under penalties of law, 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
 Authorized Signature _____ Title _____ Daytime Phone _____ Date _____ Email Address _____
 paid preparer's use only
 Preparer's Signature _____ Date _____ Preparer's PTIN _____
 Print Firm's Name (or yours if self-employed), Address, and Zip Code _____ EIN _____ Daytime Phone _____

For tax assistance, call 800-742-7474 (NE and IA) or 402-471-5729.
This return is due on or before the 20th day of the month following the tax period indicated above.
 Paper filers mail this return and payment to: Nebraska Department of Revenue, PO Box 98923, Lincoln, NE 68509-8923.