

NEBRASKA SCHEDULE I—Income Statement

- Attach this schedule to Nebraska Homestead Exemption Application or Certification of Status, Form 458
- Read instructions carefully

Applicant's Name as Shown on Form 458

Applicant's Social Security Number

This Income Statement is filed for (select one only, fill in oval completely, example:):

- Applicant Applicant & Spouse Spouse Other Owner/Occupant

Spouse's or Other Owner/Occupant's Name

Spouse's or Owner/Occupant's Soc. Sec. No.

NOTE: Do not include other owner/occupant's income on the income statement of the applicant/spouse listed above. Each other owner/occupant's income must be reported on a separate Nebraska Schedule I — Income Statement.

IF MARRIED DURING 2007, YOU MUST REPORT INCOME FOR BOTH YOU AND YOUR SPOUSE.

PART I—For Applicants Who DID NOT FILE a 2007 Federal Income Tax Return

- Complete Worksheet A on reverse side of white copy
- If you filed a 2007 federal income tax return, complete only Part II

Household Income: January 1 through December 31, 2007

1	Wages and salaries	1	\$	
2	Social security retirement income. If none, explain	2		
3	Tier I railroad retirement income	3		
4	Total pensions and annuities 4a _____ 4b Taxable amount	4b		
5	IRA distributions 5a _____ 5b Taxable amount	5b		
6	Tax exempt interest and dividends (must include all state and local bond income)	6		
7	Taxable interest and dividends	7		
8	Other income or adjustments (from line G, Worksheet A on reverse side of white copy)	8		
9	TOTAL OF LINES 1 THROUGH 8	9		
MEDICAL AND DENTAL EXPENSES – Caution: Do not include expenses reimbursed by insurance or paid by others				
10a	Medical and dental expenses (see instructions)	10a		
10b	Multiply LINE 9 by 4% (.04)	10b		
10c	Subtract line 10b from line 10a. If line 10b is more than line 10a enter -0-	10c		
11	HOUSEHOLD INCOME (line 9 minus line 10c)	11		

PART II—For Applicants Who FILED a 2007 Federal Income Tax Return

- If you did not file a 2007 federal income tax return, please complete only Part I and Worksheet A.

Household Income: January 1 through December 31, 2007

1	Federal adjusted gross income (AGI) from line 37, Federal Form 1040; line 21, Form 1040A or line 4, Form 1040EZ	1		
2	Social security retirement income (see instructions for Part II, line 2)	2		
3	Tier I railroad retirement income (see instructions for Part II, line 3)	3		
4	Nebraska adjustments increasing federal AGI (from line 12, Form 1040N)	4		
5	Income from Nebraska obligations (from line 45b, Schedule I, Form 1040N)	5		
6	TOTAL OF LINES 1 THROUGH 5	6		
MEDICAL AND DENTAL EXPENSES – CAUTION: Do not include expenses reimbursed by insurance or paid by others				
7a	Medical and dental expenses (see instructions)	7a		
7b	Multiply LINE 6, Part II , by 4% (.04)	7b		
7c	Subtract line 7b from line 7a. If line 7b is more than line 7a enter -0-	7c		
8	HOUSEHOLD INCOME (line 6 minus line 7c)	8		

Under penalties of law, I declare that I have examined this schedule, and that it is, to the best of my knowledge and belief, correct and complete.

sign here _____ (Spouse's Signature if Income Included) _____ Date _____ () Daytime Phone _____

**FILE FORM 458 AND THIS SCHEDULE WITH YOUR COUNTY ASSESSOR AFTER FEBRUARY 1 AND ON OR BEFORE JUNE 30
RETAIN CANARY COPY FOR YOUR RECORDS**

WORKSHEET A—Line 8, Part I; Other Income or Adjustments

A Net business (including rental) or farm income or (loss)	A	\$	
B Capital gains or (losses)	B		
C Other gains or (losses)	C		
D Unemployment compensation.	D		
E Any other income or (adjustments reducing income) (explain): _____	E		
F Penalty on early withdrawal of savings	F	<	>
G TOTAL of lines A through F (enter here and on line 8, Part I)	G		