



OKLAHOMA RESIDENT INCOME TAX RETURN

Your Social Security Number

Place an 'X' in this box if this taxpayer is deceased → ☐Spouse's Social Security Number
(joint return only)Place an 'X' in this box if this taxpayer is deceased → ☐

AMENDED RETURN!

Place an 'X' in this box if this is an amended 511. See Schedule 511-H. → ☐NAME AND ADDRESS
PLEASE PRINT OR TYPE

Your first name, middle initial and last name

If a joint return, spouse's first name, middle initial and last name

Mailing address (number and street, including apartment number, rural route or PO Box)

City, State and ZIP

FILING STATUS

- 1 ☐ Single
- 2 ☐ Married filing joint return (even if only one had income)
- 3 ☐ Married filing separate
- If spouse is also filing, list name and SSN in the boxes: Name: SSN:
- 4 ☐ Head of household with qualifying person
- 5 ☐ Qualifying widow(er) with dependent child
- Please list the year spouse died in box at right:

* NOTE: If claiming Special Exemption, see instructions on page 6 of 511 Packet.

	REGULAR	* SPECIAL	BLIND	
YOURSELF	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
SPOUSE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
NUMBER OF DEPENDENT CHILDREN				<input type="text"/>
NUMBER OF OTHER DEPENDENTS				<input type="text"/>

ADD THE TOTALS FROM THE 4 BOXES. WRITE THE TOTAL IN THE BOX BELOW.

TOTAL

NOTE: IF YOU MAY BE CLAIMED AS A DEPENDENT ON ANOTHER RETURN, ENTER "0" FOR YOUR REGULAR EXEMPTION.

AGE 65 OR OVER? (Please see instructions) ☐ Yourself ☐ Spouse

PART ONE: TO ARRIVE AT OKLAHOMA ADJUSTED GROSS INCOME

		Round to Nearest Whole Dollar
1	Federal adjusted gross income (from Federal 1040, 1040A, or 1040EZ)	<input type="text"/> 00
2	Oklahoma Subtractions (provide Schedule 511-A)	<input type="text"/> 00
3	Line 1 minus line 2	<input type="text"/> 00
4	Out-of-state income, except wages. Describe (4a) (Provide Federal schedule with detailed description; see instructions) .. 4b	<input type="text"/> 00
5	Line 3 minus line 4b	<input type="text"/> 00
6	Oklahoma Additions (provide Schedule 511-B)	<input type="text"/> 00
7	Oklahoma adjusted gross income (line 5 plus line 6)	<input type="text"/> 00

(If line 7 is different than line 1, provide a copy of your Federal return.)

PART TWO: OKLAHOMA TAXABLE INCOME, TAX AND CREDITS

8	Oklahoma Adjustments (provide Schedule 511-C)	<input type="text"/> 00
9	Oklahoma income after adjustments (line 7 minus line 8)	<input type="text"/> 00
STOP AND READ: If line 4b is zero, complete lines 10-11. If line 4b is more than zero, see Schedule 511-D and do not complete lines 10-11.		
10A	Federal itemized deductions from Federal Schedule A, line 29	<input type="text"/> 00
(Provide copy of the Federal Schedule A.) (If you did not itemize, skip lines 10A and 10B; enter the Oklahoma standard deduction on line 10C)		
10B	State and local sales or income taxes included in line 10A	<input type="text"/> 00
10C	Oklahoma itemized deductions (line 10A minus line 10B) or Oklahoma standard deduction (Single or Married Filing Separate: \$6,350 • Married Filing Joint or Qualifying Widow(er): \$12,700 • Head of Household: \$9,350)	<input type="text"/> 00
11	Exemptions (\$1,000 x total number of exemptions claimed above)	<input type="text"/> 00
12	Total deductions and exemptions (add lines 10C and 11 or amount from Sch. 511-D, line 5)	<input type="text"/> 00
13	Oklahoma Taxable Income (line 9 minus line 12)	<input type="text"/> 00
14	Oklahoma Income Tax from Tax Table (see pages 20-31 of instructions) If using Farm Income Averaging, enter tax from Form 573, line 22 and enter a "1" in box. If paying the Health Savings Account additional 10% tax, add additional tax here and enter a "2" in box. If recapturing the Oklahoma Affordable Housing Tax Credit, add recaptured credit here and enter a "3" in box....	<input type="text"/> 00
STOP AND READ: If line 7 is equal to or larger than line 1, complete lines 15 and 16. If line 7 is smaller than line 1, complete Schedules 511-E and 511-F.		
15	Oklahoma child care/child tax credit (see instructions)	<input type="text"/> 00
16	Oklahoma earned income credit (see instructions)	<input type="text"/> 00
17	Credit for taxes paid to another state (provide Form 511TX)	<input type="text"/> 00
18	Form 511CR - Other Credits Form. List 511CR line number claimed here:	<input type="text"/> 00
19	Income Tax (line 14 minus lines 15-18) Do not enter less than zero	<input type="text"/> 00

DO NOT PAY THIS AMOUNT. PAYMENT IS FIGURED ON LINE 43.



2017 Form 511 - Resident Income Tax Return - Page 2

Name(s) shown
on Form 511:Your Social
Security Number:

PART THREE: TAX, CREDITS AND PAYMENTS

20	Total from line 19	20	00
21	Use tax due on Internet, mail order, or other out-of-state purchases	21	00
(For use tax table, see page 11 of the Packet) If you certify that no use tax is due, place an 'X' here: <input type="checkbox"/>			
22	Balance (add lines 20 and 21)	22	00
23	Oklahoma withholding (provide all W-2s, 1099s or other withholding statements) ..	23	00
24	2017 estimated tax payments (qualified farmer <input type="checkbox"/>)	24	00
25	2017 payment with extension	25	00
26	Low Income Property Tax Credit (provide Form 538-H)	26	00
27	Sales Tax Relief Credit (provide Form 538-S)	27	00
28	Natural Disaster Tax Credit (provide Form 576)	28	00
29	Credits from Form.....a) <input type="checkbox"/> 577b) <input type="checkbox"/> 578	29	00
30	Amount paid with original return plus additional paid after it was filed (amended return only)	30	00
31	Payments and credits (add lines 23-30)	31	00
32	Overpayment, if any, as shown on original return and/or prior amended return(s) or as previously adjusted by Oklahoma (amended return only)	32	00
33	Total payments and credits (line 31 minus 32)	33	00

PART FOUR: REFUND

34	If line 33 is more than line 22, subtract line 22 from line 33. This is your overpayment	34	00
35	Amount of line 34 to be applied to 2018 estimated tax (original return only) ..	35	00
(For further information regarding estimated tax, see page 4 of the 511 Packet.) ..			
Schedule 511-G provides you with the opportunity to make a financial gift from your refund to a variety of Oklahoma organizations. Please place the line number of the organization from Schedule 511-G in the box below. If you give to more than one organization, put a "99" in the box. Provide Schedule 511-G..... <input type="checkbox"/>			
36	Donations from your refund (total from Schedule 511-G)	36	00
37	Total deductions from refund (add lines 35 and 36)	37	00
38	Amount to be refunded to you (line 34 minus line 37)	38	00

Direct Deposit Note:

Verify your account and routing numbers are correct. If your direct deposit fails to process or you do not choose direct deposit, you will receive a debit card. See the 511 Packet for direct deposit and debit card information.

Is this refund going to or through an account that is located outside of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Deposit my refund in my:	
<input type="checkbox"/> checking account	Routing Number: <input type="text"/>
<input type="checkbox"/> savings account	Account Number: <input type="text"/>

PART FIVE: AMOUNT YOU OWE

39	If line 22 is more than line 33, subtract line 33 from line 22. This is your tax due	39	00
40	Donation: Support the Oklahoma General Revenue Fund (original return only)	40	00
41	Underpayment of estimated tax interest (annualized installment method <input type="checkbox"/>) ..	41	00
(If you have an underpayment of estimated tax (line 41) & overpayment (line 34), see instructions.)			
42	For delinquent payment add penalty of 5%	42	00
plus interest of 1.25% per month		42	00
43	Total tax, donation, penalty and interest (add lines 39-42)	43	00

Under penalty of perjury, I declare the information contained in this document, and all attachments and schedules, is true and correct to the best of my knowledge and belief.

Place an 'X' in this box if the Oklahoma Tax Commission may discuss this return with your tax preparer..... ☐

Taxpayer's signature	Date	Spouse's signature	Date	Paid Preparer's signature	Date
Taxpayer's occupation		Spouse's occupation		Paid Preparer's address and phone number	
Daytime Phone (optional)		Daytime Phone (optional)		Paid Preparer's PTIN	

DO NOT STAPLE DOCUMENTATION TO THIS FORM. TO ATTACH ITEMS, PLEASE USE A PAPER CLIP.
MAILING ADDRESS FOR THIS FORM: P.O. BOX 26800, OKLAHOMA CITY, OK 73126-0800
The Oklahoma Tax Commission is not required to give actual notice to taxpayers of changes in any state tax law.

NOTE: Provide this page **ONLY** if you have an amount shown on a schedule.Name(s) shown
on Form 511:Your Social
Security Number:**SCHEDULE 511-A****Oklahoma Subtractions**See instructions for details on
qualifications and required documents.

1	Interest on U.S. government obligations	1		00
2	Social Security benefits taxed on your Federal Form 1040 or 1040A	2		00
3	Federal civil service retirement in lieu of social security	3		00
	Retirement Claim Number: Taxpayer <input type="text"/> Spouse <input type="text"/>			
4	Military Retirement (see instructions for limitation)	4		00
5	Oklahoma government or Federal civil service retirement (see instructions for limitation)	5		00
6	Other retirement income (see instructions for limitation)	6		00
7	U.S. Railroad Retirement Board benefits	7		00
8	Oklahoma depletion	8		00
9	Oklahoma net operating loss	Loss Year(s) <input type="text"/>	9	00
10	Exempt tribal income	10		00
11	Gains from the sale of exempt government obligations	11		00
12	Oklahoma Capital Gain Deduction (provide Form 561)	12		00
13	Income Tax Refund (Federal Form 1040, line 10)	13		00
14	Miscellaneous: Other subtractions (enter number in box for type of deduction) <input type="text"/>	14		00
15	Total subtractions (add lines 1-14, enter total here and on line 2 of Form 511)	15		00

SCHEDULE 511-B**Oklahoma Additions**See instructions for details on
qualifications and required documents.

1	State and municipal bond interest	1		00
2	Out-of-state losses (describe _____) Enter as a positive number	2		00
3	Lump sum distributions (not included in your Federal Adjusted Gross Income)	3		00
4	Federal net operating loss - Enter as a positive number	4		00
5	Recapture of depletion claimed on a lease bonus or add back of excess Federal depletion	5		00
6	Recapture of Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account(s)	6		00
7	Miscellaneous: Other additions (enter number in box for type of addition) <input type="text"/>	7		00
8	Total additions (add lines 1-7, enter total here and on line 6 of Form 511)	8		00

SCHEDULE 511-C**Oklahoma Adjustments**See instructions for details on
qualifications and required documents.

1	Military pay exclusion - Active Duty, Reserve and National Guard (not retirement income)	1		00
2	Qualifying disability deduction	2		00
3	Qualified adoption expense	3		00
4	Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account(s)	4		00
5	Deduction for providing foster care	5		00
6	Miscellaneous: Other adjustments (enter number in box for type of deduction) <input type="text"/>	6		00
7	Total adjustments (add lines 1-6, enter total here and on line 8 of Form 511)	7		00

2017 Form 511 - Resident Income Tax Return - Page 4

NOTE: Provide this page ONLY if you have an amount shown on a schedule.



Name(s) shown
on Form 511:

Your Social
Security Number:

SCHEDULE 511-D

Deductions and Exemptions

See instructions for details on
qualifications and required documents.

Use this schedule if you have income from out-of-state (Form 511, line 4). Your exemptions and deductions must be prorated on the ratio of Oklahoma Adjusted Gross Income to Federal Adjusted Gross Income reduced by allowable adjustments except out-of-state income. If you do not have out-of-state income on Form 511, line 4, do not use this schedule. Instead complete Form 511, lines 10-11.

1A	Federal itemized deductions from Federal Schedule A, line 29 1A		00	
	(If you did not itemize, skip lines 1A and 1B; enter the Oklahoma standard deduction on line 1C)			
1B	State and local sales or income taxes included in line 1A 1B		00	
1C	Oklahoma itemized deductions (line 1A minus line 1B) or Oklahoma standard deduction 1C			00
2	Exemptions (\$1,000 x number of exemptions claimed at top of Form 511) 2			00
3	Total (add lines 1C and 2) 3			00
4	Divide the amount on line 7 of Form 511 by the amount on line 3 of Form 511 <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div> ÷ <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div> Enter the percentage from the above calculation here (do not enter more than 100%) 4			%
5	Total allowable deductions and exemptions (multiply line 3 by percentage on line 4, enter total here and on line 12 of Form 511) (Leave lines 10 - 11 of Form 511 blank) 5			00

SCHEDULE 511-E

Child Care/Child Tax Credit

See instructions for details on
qualifications and required documents.

If your Federal Adjusted Gross Income is \$100,000 or less and you are allowed either a credit for child care expenses or the child tax credit on your Federal return, you are allowed a credit against your Oklahoma tax. Your Oklahoma credit is the **greater** of:

- 20% of the credit for child care expenses allowed by the IRS Code.
Your allowed Federal credit cannot exceed the amount of your Federal tax reported on your Federal return.
- or**
- 5% of the child tax credit allowed by the IRS Code.

This includes both the nonrefundable child tax credit and the refundable additional child tax credit.

The credit must be prorated based on the ratio of Oklahoma Adjusted Gross Income to Federal Adjusted Gross Income.

If your Federal Adjusted Gross Income is greater than \$100,000, no credit is allowed.

Provide a copy of your Federal return and, if applicable, the Federal child care credit schedule.

1	Enter your Federal child care credit 1		00	
2	Multiply line 1 by 20% 2		00	
3	Enter your Federal child tax credit (total of child tax credit & additional child tax credit) 3		00	
4	Multiply line 3 by 5% 4		00	
5	Enter the larger of line 2 or line 4 5			00
6	Divide the amount on line 7 of Form 511 by the amount on line 1 of Form 511 <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div> ÷ <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div> Enter the percentage from the above calculation here (do not enter more than 100%) 6			%
7	Multiply line 5 by line 6. This is your Oklahoma child care/child tax credit. Enter total here and on line 15 of Form 511 7			00

SCHEDULE 511-F

Earned Income Credit

See instructions for details on
qualifications and required documents.

You are allowed a credit equal to 5% of the Earned Income Credit allowed on your Federal return. The credit must be prorated on the ratio of Oklahoma Adjusted Gross Income to Federal Adjusted Gross Income. Provide a copy of your Federal return.

1	Federal earned income credit 1		00
2	Multiply line 1 by 5% 2		00
3	Divide the amount on line 7 of Form 511 by the amount on line 1 of Form 511 <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div> ÷ <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div> Enter the percentage from the above calculation here (do not enter more than 100%) 3		%
4	Oklahoma earned income credit 4 (multiply line 2 by line 3, enter total here and on line 16 of Form 511)		00