

# Oklahoma Resident Income Tax Return

Form 511  
2024



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-I. →

**Name and Address - Please Print or Type**

Your First Name:  Middle Initial:  Last Name:

If a Joint Return, Spouse's First Name:  Middle Initial:  Last Name:

Mailing Address (Number and street, including apartment number, rural route or PO Box):  City:  State:  ZIP or Postal Code:  Country:

**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
<input type="text"/>	<input type="text"/>

4  Head of household with qualifying person

5  Qualifying surviving spouse with dependent child

• Please list the year spouse died in box at right:

**\* Note:** If claiming **Special Exemption**, see instructions on page 9 of 511 Packet.

	Regular	* Special	Blind	=		
Yourself	1	+		+	1 (a)	
Spouse		+		+	(b)	
<b>Number of dependents</b>					=	(c)
<b>Add the Totals from boxes (a), (b) &amp; (c). Enter the TOTAL here:</b>					=	1

**Note:** If you may be claimed as a dependent on another return, enter "0" in the Total box for your regular exemption.

**Age 65 or Older?** (Please see instructions)  Yourself  Spouse

**Dependents -** If more than four dependents, see instructions and place an 'X' here:

1. First Name	2. Last Name	3. Social Security Number	4. Date of Birth	5. Relationship to You

**PART ONE: TO ARRIVE AT OKLAHOMA ADJUSTED GROSS INCOME**

1	Federal adjusted gross income (from Federal 1040 or 1040-SR) . . . . .
2	Oklahoma Subtractions ( <b>provide</b> Schedule 511-A) . . . . .
3	Line 1 minus line 2 . . . . .
4	Out-of-state income, <b>except wages</b> . Describe: _____ ( <b>Provide</b> Federal schedule with detailed description; see instructions) . . . . .
5	Line 3 minus line 4 . . . . .
6	Oklahoma Additions ( <b>provide</b> Schedule 511-B) . . . . .
7	<b>Oklahoma adjusted gross income</b> (line 5 plus line 6) . . . . . (If line 7 is different than line 1, provide a copy of your Federal return.)

**Round to Nearest Whole Dollar**

1	36972	00
2	18257	00
3	18715	00
4		00
5	18715	00
6		00
7	18715	00
8		00
9	18715	00

**PART TWO: OKLAHOMA TAXABLE INCOME, TAX AND CREDITS**

8	Oklahoma Adjustments ( <b>provide</b> Schedule 511-C) . . . . .
9	Oklahoma income after adjustments (line 7 minus line 8) . . . . .



Name(s) Shown on Form 511: A A

Your Social Security Number: 490549999

**PART TWO: OKLAHOMA TAXABLE INCOME, TAX AND CREDITS (continued)**

**STOP AND READ:** If line 4 on page 1 is zero, complete lines 10-11. If line 4 is more than zero, see Schedule 511-E and do not complete lines 10-11.

10	Oklahoma itemized deductions (from Schedule 511-D, line 11) or Oklahoma standard deduction (Single or Married Filing Separate: \$6,350 • Married Filing Joint or Qualifying Surviving Spouse: \$12,700 • Head of Household: \$9,350)	10	6350	00
11	Exemptions: Enter the total number of exemptions claimed on page 1 . . . <input type="text" value="1"/> X \$1,000 . . .	11	1000	00
12	Total deductions and exemptions (add lines 10 and 11 or amount from Sch. 511-E, line 5)	12	7350	00
13	Oklahoma Taxable Income (line 9 minus line 12)	13	11365	00
14	(a) Oklahoma Income Tax from Tax Table (see pages 27-38 of instructions) or if using Farm Income Averaging, enter tax from Form 573, line 22 and enter a "1" in box on line 14 . . . . .	14a	352	00
	(b) If paying the Health Savings Account additional 10% tax, add additional tax here and enter a "2" in box on line 14. If recapturing the Oklahoma Affordable Housing Tax Credit, add recaptured credit here and enter a "3" in box on line 14. If making an Oklahoma installment payment pursuant to IRC Section 965(h) and 68 OS Sec. 2368(K), add the installment payment here and enter a "4" in the box on line 14	14b		00
	Oklahoma Income Tax (line 14a plus line 14b)	14	352	00

**STOP AND READ:** If line 7 is equal to or larger than line 1, complete line 15. If line 7 is smaller than line 1, complete Schedules 511-F and 511-G.

15	Oklahoma child care /child tax credit (see instructions)	15		00
16	Credit for taxes paid to another state ( provide Form 511-TX)	16		00
17	Form 511-CR - Other Credits Form. List 511-CR line number claimed here: <input type="text"/>	17		00
18	<b>Income Tax</b> (line 14 minus lines 15-17) Do not enter less than zero <b>DO NOT PAY THIS AMOUNT. PAYMENT IS FIGURED ON LINE 41.</b>	18	352	00

**PART THREE: TAX, CREDITS AND PAYMENTS**

19	Use tax due on Internet, mail order, or other out-of-state purchases (For use tax table, see page 14 of the Packet) If you certify that no use tax is due, place an 'X' here: <input type="checkbox"/>	19		00
20	Balance (add lines 18 and 19)	20	352	00
21	Oklahoma withholding ( provide all W-2s, 1099s or other withholding statements )	21		00
22	2024 estimated tax payments . . . (qualified farmer <input type="checkbox"/> )	22		00
23	2024 payment with extension	23		00
24	Low Income Property Tax Credit ( provide Form 538-H)	24		00
25	Sales Tax Relief Credit ( provide Form 538-S)	25	40	00
26	Natural Disaster Tax Credit ( provide Form 576)	26		00
27	Credit from Form 578	27		00
28	Oklahoma earned income credit (see instructions)	28		00
29	Parental Choice Tax Credit for Homeschool Expenses ( provide Form 591-D) Total number of eligible students claimed: <input type="text"/>	29		00
30	Amount paid with original return plus additional paid after it was filed (amended return only)	30		00



Name(s) Shown on Form 511: A A

Your Social Security Number: 490549999

PART THREE: TAX, CREDITS AND PAYMENTS (continued)

Table with 3 columns: Line number, Description, Amount. Includes lines 31 (Payments and credits), 32 (Overpayment), and 33 (Total payments and credits).

PART FOUR: REFUND

Table with 3 columns: Line number, Description, Amount. Includes lines 34 (Overpayment), 35 (Estimated tax), 36 (Donations), 37 (Total deductions), and 38 (Amount to be refunded).

Refund Note: For Direct Deposit, verify your account and routing numbers are correct. If your direct deposit fails to process, you will receive a debit card. You can also choose to receive either a debit card or a paper check by placing an 'X' in the appropriate box below.

Send my refund as a: Debit Card, Paper Check. Is this refund going to or through an account that is located outside of the United States? Direct Deposit my refund in my: Checking Account, Savings Account.

PART FIVE: AMOUNT YOU OWE

Table with 3 columns: Line number, Description, Amount. Includes lines 39 (Tax due), 40 (Underpayment of estimated tax interest), 41 (Penalty and interest), and 42 (Total tax, penalty and interest).

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.

Signature and contact information table for Taxpayer, Spouse, and Paid Preparer.