# **OKLAHOMA RESIDENT INCOME TAX RETURN**

Form 511	
2018	Ē



Your	Social Security Number Place an 'X' in this AMENDED						
	box if this taxpayer is deceased						
	se's Social Security Number eturn only) Place an 'X' in this amended 511. See						
	box if this taxpayer Schedule						
ų	Your first name, middle initial and last name						
ESS							
DDR	If a joint return, spouse's first name, middle initial and last name						
D A	Multime edderer (norther and shreet inclusion endered to shreet and shreet inclusion						
AN	Mailing address (number and street, including apartment number, rural route or PO Box)						
NAME AND ADDRESS	City, State and ZIP		* NOTE: If claiming Special Exemption, see in REGULAR * SPECIAL BLIND		uctions on page 6 o	of 511 Packet.	
2 ā		0	Yourself	٦		ADD THE TOTALS	
		EXEMPTIONS	+ +		■	FROM THE 3 BOXES.	
	1 Single	ĬĬ	SPOUSE + +			WRITE THE TOTAL IN THE BOX BELOW.	
S	2 Married filing joint return (even if only one had income)	MP		_		TOTAL	
LATL	Married filing separate     If spouse is also filing, list     Name:	XE	NUMBER OF DEPENDENT	s	╘╸┤╴┝┚╹	ª	
FILING STATUS	name and SSN in the boxes: SSN:	ш					
ILIN	4 Head of household with qualifying person		NOTE: IF YOU MAY BE CLAIMED AS A DEP "O" IN THE TOTAL BOX FOR YOUR REGULA			R RETURN, ENTER	
LL.	5 Qualifying widow(er) with dependent child		1	=			
	Please list the year spouse died in box at right:	Age	65 OR OVER? (Please see instructions)		Yourself	Spouse	
P۵	RT ONE: TO ARRIVE AT OKLAHOMA ADJUSTED O	GROSS			Round to Near	est Whole Dollar	
	Federal adjusted gross income (from Federal 1040)			- L	nound to near		
1	Oklahoma Subtractions (provide Schedule 511-A)			1		00	
3	Line 1 minus line 2						
4	Out-of-state income, except wages. Describe (4a)						
	(Provide Federal schedule with detailed description; see instructions)					00	
5	Line 3 minus line 4b			- L			
6 7	Oklahoma Additions (provide Schedule 511-B)					00	
	Oklahoma adjusted gross income (line 5 plus line 6) (If line 7 is different than line 1, provide a copy of your Federal return.)			7		00	
PA	rt Two: Oklahoma Taxable Income, Tax and	CRE	DITS				
8	Oklahoma Adjustments (provide Schedule 511-C)			8		00	
9	Oklahoma income after adjustments (line 7 minus line 8					00	
STO	P AND READ: If line 4b is zero, complete lines 10-11. If line 4b is more than z	ero. see S	Schedule 511-E and do not complete line	s 1(	0-11.		
					• • • •		
10	Oklahoma itemized deductions (from Schedule 511-D, line (Single or Married Filing Separate: \$6,350 • Married Filing Join						
	Head of Household: \$9,350)			10		00	
11	Exemptions: Enter the total number of exemptions claim					00	
12	Total deductions and exemptions (add lines 10 and 11 or amount					00	
13	Oklahoma Taxable Income (line 9 minus line 12)			13		00	
14	Oklahoma Income Tax from Tax Table (see pages 20-31						
	If using Farm Income Averaging, enter tax from Form 573, line 22 and en Account additional 10% tax, add additional tax here and enter a "2" in box						
	Affordable Housing Tax Credit, add recaptured credit here and enter a "3"	' in box. İ	f making an Oklahoma installment				
	payment pursuant to IRC Section 965(h) and 68 O.S. Sec. 2368(K), add t and enter a "4" in the box			14		00	
				L			
STO	PAND READ: If line 7 is equal to or larger than line 1, complete lines 15 and 1				511-F and 511-0	<i>i</i>	
15	Oklahoma child care/child tax credit (see instructions)					00	
16	Oklahoma earned income credit (see instructions)					00	
17	Credit for taxes paid to another state (provide Form 511	,				00	
	Form 511CR - Other Credits Form. List 511CR line number Income Tax (line 14 minus lines 15-18) Do not enter le					00	
19	DO NOT PAY THIS AMOUNT. PAYMENT IS FIGURED ON LINE 43.	55 tildi	1 2CI U 1	9	<u> </u>	100	

#### 2018 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 orde	er, or other out-of-state purchases	
	ket) If you certify that no use tax is due, place an 'X' here:	
22 Balance (add lines 20 and 21)	L	
	2s, 1099s or other withholding statements) 23	00
24 2018 estimated tax payments (qu	alified farmer)24	00
		00
	provide Form 538-H)	00
	orm 538-S)27	00
	de Form 576)	
	a) 577b) 578 29	
I mount paid with original rotain p	lus additional paid after it was filed	00
31 Payments and credits (add lines	23-30)	
<sup>32</sup> Overpayment, if any, as shown or	original return and/or prior amended return(s) or	
	na (amended return only)	
33 Total payments and credits (line	9 31 minus 32)	33 00
PART FOUR: REFUND		
34 If line 33 is more than line 22, subtrac	t line 22 from line 33. This is your <b>overpayment</b>	
35 Amount of line 34 to be applied to 20		
	ited tax, see page 4 of the 511 Packet.) 35	00
	ty to make a financial gift from your refund to a variety of Oklahor	
	ne organization from Schedule 511-H in the box below. If you give	to
more than one organization, put a "99" in the bo		
36 Donations from your refund (total f	rom Schedule 511-H)	00
	lines 35 and 36)	
[38] Amount to be <b>refunded</b> to you (lir	ne 34 minus line 37)	
Direct Deposit Note:	s refund going to or through an account that is located outside of th	e United States? Yes No
	sit my refund in my:	
bers are correct. If your direct deposit fails to process or you do not choose	checking account Number	
direct deposit, you will receive a debit		
card. See the 511 Packet for direct deposit and debit card information.	Account Savings account Number:	
PART FIVE: AMOUNT YOU OWE		
	act line 33 from line 22. This is your <b>tax due</b>	
	General Revenue Fund (original return only)	
	terest (annualized installment method	) 41 00
	nalty of 5%\$	42 00
	\$	
Under penalty of perjury, I declare the information contained in t	his document, and all Place an 'X' in this box if the Oklahoma Tax Commission	
attachments and schedules, is true and correct to the best of my		
Taxpayer's signature Date	Spouse's signature Date Paid Preparer'	s signature Date
Taxpayer's	Spouse's Paid Preparer'	s address and phone number
occupation	occupation	
Daytime Phone	Daytime Phone	
(optional)		
(· F. · · · · · )	(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.

2018 Form 511 - Resident Income Tax Return - Page 3
NOTE: Provide this page ONLY if you have an amount shown on a schedule.



	e(s) shown orm 511:	Your So Securit	ocial y Number:
	SCHEDULE 511-A Oklahoma Subtractions	See in qualif	structions for details on ications and required documents.
1	Interest on U.S. government obligations	1	00
2	Social Security benefits taxed on your Federal Form 1040	2	00
3	Federal civil service retirement in lieu of social security	3	00
	Retirement Claim Number: Taxpayer Spouse		
4	Military Retirement (see instructions for limitation)		00
5	Oklahoma government or Federal civil service retirement (see instructions for limitation	ı) 5	00
6	Other retirement income (see instructions for limitation)	6	00
7	U.S. Railroad Retirement Board benefits		00
8	Oklahoma depletion	8	00
9	Oklahoma net operating loss (provide schedules)Loss Year(s)	9	00
10	Exempt tribal income (see instructions for qualifications)		00
11 12	Gains from the sale of exempt government obligations Oklahoma Capital Gain Deduction (provide Form 561)		00
12	Income Tax Refund (Federal Form 1040, Schedule 1, line 10)		00
14	Miscellaneous: Other subtractions (enter number in box for type of deduction)		00
15	<b>Total subtractions</b> (add lines 1-14, enter total here and on line 2 of Form 511)		00
	,		
			ions for details on Is and required documents.
1		ificatior	
_		ification	as and required documents.
1	SCHEDULE STI-B OKIANOMA ACCILIONS quality State and municipal bond interest	ification 1 mber . 2	as and required documents.
1 2	SCHEDULE STI-B       Okianoma Additions       quali         State and municipal bond interest	ification 1 mber . 2 3	and required documents.       00       00       00       00
1 2 3	Schedule STI-B       Oktanoma Additions       quality         State and municipal bond interest        Out-of-state losses (describe) Enter as a positive nur         Lump sum distributions (not included in your Federal Adjusted Gross Income)	ification 1 mber 2 3	and required documents.       00       00       00       00       00       00       00
1 2 3 4	SCHEDULE STI-B       Okranoma Additions       quality         State and municipal bond interest        Out-of-state losses (describe) Enter as a positive num         Lump sum distributions (not included in your Federal Adjusted Gross Income)       Federal net operating loss - Enter as a positive number	ification            1           mber         2            3            4           l         5	and required documents.         00           00         00           00         00           00         00           00         00
1 2 3 4 5	Schedule STI-B       Okranoma Additions       quality         State and municipal bond interest          Out-of-state losses (describe) Enter as a positive number          Lump sum distributions (not included in your Federal Adjusted Gross Income)          Federal net operating loss - Enter as a positive number          Recapture of depletion claimed on a lease bonus or add back of excess Federal depletion	ification            1           mber         2            3            4           l         5	and required documents.         00           00         00           00         00           00         00           00         00           00         00           00         00           00         00
1 2 3 4 5 6	Schedule STI-B       Okranoma Additions       quality         State and municipal bond interest          Out-of-state losses (describe) Enter as a positive number          Lump sum distributions (not included in your Federal Adjusted Gross Income)          Federal net operating loss - Enter as a positive number          Recapture of depletion claimed on a lease bonus or add back of excess Federal depletion         Recapture of Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account	ification              nber.           2              3              4              5                 5	and required documents.         00           00         00           00         00           00         00           00         00           00         00           00         00           00         00           00         00           00         00           00         00
1 2 3 4 5 6 7 8	SCHEDULE STI-B       Oktanoma Additions       quality         State and municipal bond interest	ification            1           nber         2            3            4            5            5            6            7            8            8            8	and required documents.         00           00         00           00         00           00         00           00         00           00         00           00         00           00         00           00         00
1 2 3 4 5 6 7 8	SCHEDULE STI-B       Oktanoma Additions       quality         State and municipal bond interest       Out-of-state losses (describe) Enter as a positive number       Description         Lump sum distributions (not included in your Federal Adjusted Gross Income)       Description       Description         Federal net operating loss - Enter as a positive number       Recapture of depletion claimed on a lease bonus or add back of excess Federal depletion         Recapture of Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account         Miscellaneous: Other additions (enter number in box for type of addition)       College Savings Plan and on line 6 of Form 511)         Schedule 511-C       Oklahoma Adjustments	ification            1           nber         2            3            4            5            5            6            7            8           See in         9           qualifi         1	s and required documents.          00
1 2 3 4 5 6 7 8	SCHEDULE 311-B       OKIANOMIA Additions       quality         State and municipal bond interest       Out-of-state losses (describe) Enter as a positive num         Out-of-state losses (describe) Enter as a positive num       Description         Lump sum distributions (not included in your Federal Adjusted Gross Income)       Image: Comparison of the positive number         Federal net operating loss - Enter as a positive number       Image: Comparison of the positive number         Recapture of depletion claimed on a lease bonus or add back of excess Federal depletion       Recapture of Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account         Miscellaneous: Other additions (enter number in box for type of addition)       Image: Comparison of the positive number in box for type of addition)         SCHEDULE 511-C       Oklahoma Adjustments         Military pay exclusion - Active Duty, Reserve and National Guard (not retirement income	ification          1         nber.       2          3          4          5          5          6          7          8          8          9          1          1	s and required documents.          00         structions for details on tractions and required documents.         00         00
1 2 3 4 5 6 7 8 8 1 2	Schedule 311-B       Oklahoma Additions       quality         State and municipal bond interest       ) Enter as a positive number       ) Enter as a positive number         Out-of-state losses (describe       ) Enter as a positive number       ) Enter as a positive number         Lump sum distributions (not included in your Federal Adjusted Gross Income)          Federal net operating loss - Enter as a positive number          Recapture of depletion claimed on a lease bonus or add back of excess Federal depletion         Recapture of Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account         Miscellaneous: Other additions (enter number in box for type of addition)         Total additions (add lines 1-7, enter total here and on line 6 of Form 511)         Schedule 511-C         Oklahoma Adjustments         Military pay exclusion - Active Duty, Reserve and National Guard (not retirement income Qualifying disability deduction	ification          1         nber.       2          3          4          5          5          6          7          8          8          8          1          1          2	s and required documents.          00
1 2 3 4 5 6 7 8 8	Schedule STI-B       Oklanoma Additions       qualitiestimation         State and municipal bond interest       ) Enter as a positive num         Out-of-state losses (describe       ) Enter as a positive num         Lump sum distributions (not included in your Federal Adjusted Gross Income)          Federal net operating loss - Enter as a positive number          Recapture of depletion claimed on a lease bonus or add back of excess Federal depletion       Recapture of Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account         Miscellaneous: Other additions (enter number in box for type of addition)          Schedultions (add lines 1-7, enter total here and on line 6 of Form 511)          Schedultions (add lines 1-7, enter total here and on line 6 of Form 511)          Military pay exclusion - Active Duty, Reserve and National Guard (not retirement income Qualifying disability deduction	ification          1         nber       2          3          4          5          5          6          7          8          8          8          8          1          2          2          3	s and required documents.          00
1 2 3 4 5 6 7 8 8 1 2 3	Schedule 311-B       Oklahoma Additions       quality         State and municipal bond interest       ) Enter as a positive num         Out-of-state losses (describe       ) Enter as a positive num         Lump sum distributions (not included in your Federal Adjusted Gross Income)          Federal net operating loss - Enter as a positive number          Recapture of depletion claimed on a lease bonus or add back of excess Federal depletion       Recapture of Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account         Miscellaneous: Other additions (enter number in box for type of addition)          Schedule 511-C       Oklahoma Adjustments         Military pay exclusion - Active Duty, Reserve and National Guard (not retirement income         Qualifying disability deduction	ification          1         nber       2          3          4          5          5          6          7          8          8          1          2          2          2          3         S)       4	s and required documents.          00
1 2 3 4 5 6 7 8 8 1 2 3 4	Schedule STI-B       Oklanoma Additions       qualitiestimation         State and municipal bond interest       ) Enter as a positive num         Out-of-state losses (describe       ) Enter as a positive num         Lump sum distributions (not included in your Federal Adjusted Gross Income)          Federal net operating loss - Enter as a positive number          Recapture of depletion claimed on a lease bonus or add back of excess Federal depletion       Recapture of Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account         Miscellaneous: Other additions (enter number in box for type of addition)          Schedultions (add lines 1-7, enter total here and on line 6 of Form 511)          Schedultions (add lines 1-7, enter total here and on line 6 of Form 511)          Military pay exclusion - Active Duty, Reserve and National Guard (not retirement income Qualifying disability deduction	ification          1         nber       2          3          4          5          5          6          7          8          8          1          2          2          2          3         S)       4	s and required documents.          00



Name(s) shown on Form 511:

# SCHEDULE 511-D

**Oklahoma Itemized Deductions** 

Your Social

Security Number:

If you claimed itemized deductions on your Federal return, you must claim Oklahoma Itemized Deductions.

1	Federal itemized deductions from Federal Sch. A, line 17 1	
2	State and local sales or income taxes from Federal Sch. A, line 5a (If Federal Sch A, line 5e is limited, enter that portion of Federal Sch A, line 5a included in line 5e)	
3	Line 1 minus line 2	00
4	Medical and Dental expenses from Federal Sch. A, line 4 4	
5	Gifts to Charity from Federal Sch. A, line 14 5	
6	Line 3 minus lines 4 and 56	00
7	Is line 6 more than \$17,000?	
	YES. Your itemized deductions are limited. Complete lines 9-11.	
	NO. Your itemized deductions are not limited. Skip lines 9 & 10. Go to line 11.	
8	Maximum amount allowed for itemized deductions. (exception, lines 9 & 10) 8	17,000 00
9	Medical and Dental expenses from Federal Sch. A, line 49	00
10	Gifts to Charity from Federal Sch. A, line 14 10	00
11	Oklahoma Itemized Deductions	
	If you responded YES on line 7: Add lines 8, 9 and 10	
	If you responded NO on line 7: enter the amount from line 3 11	00

Enter your Oklahoma Itemized Deductions on line 10 of Form 511 unless you have income from out-of-state on line 4 of Form 511. If you have an amount on line 4 of Form 511, complete Schedule 511-E "Deductions and Exemptions" to determine the amount to enter on line 12 of Form 511.

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 claimed itemized deductions on your federal return, complete Schedule 511-D before completing this schedule.

1	Oklahoma itemized deductions (Schedule 511-D, line 11) or Oklahoma standard deduction	00
2	Exemptions (\$1,000 x number of exemptions claimed at top of Form 511) 2	00
3	Total (add lines 1 and 2)	00
4	Divide the amount on line 7 of Form 511 by the amount on line 3 of Form 511	
	Enter the percentage from the above calculation here (do not enter more than 100%)4	%
5	<b>Total allowable deductions and exemptions</b> (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)	00



Name(s) shown on Form 511:

Your Social Security Number:

# SCHEDULE 511-F 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 <u>care</u> credit1	00	
2	Multiply line 1 by 20%2	00	
3	Enter your Federal child <u>tax</u> 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	!	00
6	Divide the amount on line 7 of Form 511 by the amount o	n line 1 of Form 511	
	· · ·		
	Enter the percentage from the above calculation here (do	not enter more than 100%)	%
7	Multiply line 5 by line 6. This is your Oklahoma child care Enter total here and on line 15 of Form 511		00

# SCHEDULE 511-G

## 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	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	
	$\sim$	
	Enter the percentage from the above calculation here (do not enter more than 100%) 3	%
4	Oklahoma earned income credit	00



Name(s) shown on Form 511:

# SCHEDULE 511-H

Donations from Refund (Original return only)

Your Social

Security Number:

This schedule allows you to make a donation from your refund to a variety of Oklahoma organizations. Information regarding each program, its mission, how funds are utilized, and mailing addresses are shown in Schedule 511-H Information. If you are not receiving a refund, but would like to make a donation to one of these organizations, Schedule 511-H Information lists the mailing address to mail your donation to the organization. If you are not receiving a refund and wish to donate to Support the Oklahoma General Revenue Fund, see line 40 of Form 511.

Place an 'X' in the box associated with the dollar amount you wish to have deducted from your refund and donated to that organization. Then carry that figure over into the column at the right. When you carry your figure back to line 36 of Form 511, please list the line number of the organization to which you donated. If you donate to more than one organization, please write a "99" in the box at line 36 of Form 511.

See Packet 511, page 19 for Schedule 511-H Information.

1	Support of Programs for Volunteers to Act as Court Appointed Special Advocates for Abused or Neglected Children		\$2		\$5		\$		1	00
2	Y.M.C.A. Youth and Government Program		\$2		\$5		\$		2	 00
3	Indigent Veteran Burial Program	L	\$2		\$5		\$		3	 00
4	Support the Oklahoma General Revenue Fund		\$2		\$5		\$		4	00
5	Oklahoma Emergency Responders Assistance Program		\$2		\$5		\$		5	00
6	Support of Folds of Honor Scholarship Program		\$2		\$5		\$		6	 00
7	Support the Wildlife Diversity Fund		\$2		\$5		\$		7	 00
8	Total donations (add lines 1-7, enter total here	ar	nd on l	ine	36 of	For	m 5	511)	8	00

## SCHEDULE 511-I: AMENDED RETURN INFORMATION

Yes

Did you file an amended Federal return?

No

If Yes, provide a copy of the IRS Form 1040X or 1045 AND proof of IRS acceptance, such as a copy of the IRS "Statement of Adjustment", IRS check or deposit slip. IRS documents submitted after filing this Oklahoma amended return may delay processing.

Explain the changes to income, deductions, and/or credits below. Enter the line reference number for which you are reporting a change and give the reason. If more space is needed, provide a separate schedule.

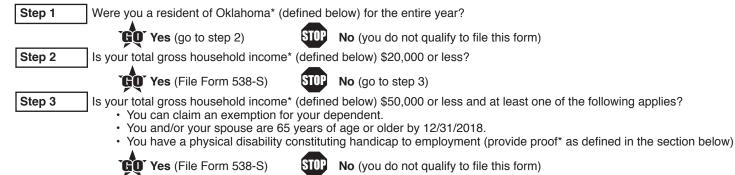
## State of Oklahoma CLAIM FOR CREDIT/REFUND OF SALES TAX



		If died in 2018 or 2019								
Security Number		enter date of death:			Instructions on page 2. Please read carefully as an incomplete form may delay your refund.					
Spouse's Social Security Number		If died in 2018 or 2019 enter date of death:			an inco delay	mplete y your	e forn refui	n may 0 <b>330 3</b>		
Taxpayer first name, middle initial and last name					DADT	1. T	AVE	PAYER INFORMATION		
Spouse's first name, middle initial and last name (if a	i joint return)							if different than shown in mailing address sect	tion)	
	, ,				i nyoloal ac		. 2010 (		,	
Mailing address (number and street, including apartm	nent number, o	or rural route)			Plac	na an 'X	' if you	or your shouse have a physical disability	,	
					Place an 'X' if you or your spouse have a physical disability constituting a substantial handicap to employment (submit proof)					
City, State and ZIP					Plac	ce an ')	(' if voi	u or your spouse are 65 years of age or	r over	
					Oklahom	a resid	ent foi	r the entire year? yes no		
PART 2: DEPENDENT Note:	Do not en	ter the taxpayer or s	spouse as	a depen	ident.			EXEMPTION INFORMAT	ION	
1. Dependents (first name, middle initial, last name) If you have		See Instru	ctions			5.Yea	rly	QUALIFIED EXEMPTION	S	
additional dependents, please attach schedule.	2. Age 3.	Social Security Nun	nber	4. Relat	ionship	Inco		A. Yourself		
								B. Spouse	L	
								C. Number of dependents		
								D. Total exemptions		
								claimed (add A-C)		
PART 3: GROSS INCOME: E	nter taxable	and nontaxable gross	income and	assistan	ce receive	d by Al	L mer	mbers of your household in the year 2	018.	
See "Total gross household income"	definition	on nade 2 for exam	nles of inc	ome			Г	Yearly Income		
1. Enter total wages, salaries, fees			•	onic.				You may not enter negative amount	ts.	
(including <b>nontaxable</b> income f							🗖	1	00	
2. Enter total interest and dividend	d income	received						2	00	
3. Total of all dependents' income							·· –	3	00	
<ol> <li>Social Security payments (total</li> <li>Bailroad Retirement benefits</li> </ol>	•						·· –	5	00	
<ol> <li>Railroad Retirement benefits</li> <li>Other pensions, annuities and I</li> </ol>								6	00	
<ol> <li>Other periodella, annulles and i</li> <li>Alimony</li> </ol>								7	00	
8. Unemployment benefits								8	00	
9. Earned Income Credit (EIC) rec	ceived in a	2018					上	9	00	
<b>10.</b> Nontaxable sources of income					····		10		00	
11. Enter gross (positive) income fr						-		You may not enter negative amount	us. 00	
from the sale or exchange of pr 12. Enter gross (positive) income fr									00	
<b>13.</b> Other income-including income					g schedules	,			00	
14. Total gross household incom							14	4	00	
If line 14 is over income limits sh	own in ste	eps 2 and 3 on back	of this for	m, no ci	redit is al	lowed				
PART 4: SALES TAX CRED	ит Сом	PUTATION (For h	iouseholds v	vith gross	income be	elow all	owable	e limits, see steps 2 and 3 on back of f	orm.)	
15. Total qualified exemptions claim			x \$40	) (credit	claimed	)	1	5	00	
		NOT filing a Form 511. 2 for Refund Informatio	n.		lf you a	are filin	g a Fo	rm 511, carry the credit to Form 511, I	ine 27.	
	Deposit ı	my refund in my:	Routing							
account that is located outside of the United States?		cking account	Number: Account							
Yes No	sav	ings account	Number:							
Under penalty of perjury, I declare the information contained in the Taxpayer's Signature and Date	nis document and	d any attachments is true and corr Spouse's Signature an		ny knowledge	e and belief.	_ ۲	If the O	Oklahoma Tax Commission may discuss this with your tax preparer, place an 'X' here:		
						Dr	enaror	's Signature and Date		
Occupation		Occupation				<b> </b>   <sup>-</sup>	oparei	S Signature and Date		

# NOTICE Persons who have received TANF (Temporary Assistance for Needy Families) for any month in the year of 2018 will not be eligible for the sales tax credit or refund. Your monthly TANF benefit included Sales Tax Relief money. The Department of Human Services will make sales tax refunds to persons who have continuously received aid to the aged, blind, disabled or Medicaid payment for nursing home care from January 1, 2018 to December 31, 2018. FORM 538-S INSTRUCTIONS

#### Follow the steps below to determine if you (or your spouse) are eligible to claim the Sales Tax Relief/Credit.



#### Exceptions:

- A person convicted of a felony and who is an inmate in the custody of the Department of Corrections for any portion of the year is not eligible to file a claim for the sales tax relief.
- Individuals living in Oklahoma under a visa do not qualify for the sales tax relief.
- If a taxpayer or spouse died during the tax year, he/she will not qualify for the sales tax credit. If the death occurred after December 31, 2018, but before this tax form was filed, the sales tax credit or refund for the deceased will be issued to their estate. Enter the date of death in the box next to the taxpayer and/or spouse's Social Security Number.

#### **Dependents:**

To qualify as a dependent for the sales tax credit or refund, your listed dependent must qualify and be claimed as a dependent for Federal income tax purposes. The name, social security number, age, relationship and yearly income (if any) must be entered for all dependents. All of the other sales tax credit or refund requirements listed above must also be met (example: resident of Oklahoma for the entire year). Do not enter the taxpayer or spouse as a dependent.

#### Refund Information for those Not Filing a Form 511:

- If you are **not** filing a Form 511, and would like to have the amount shown on line 15 deposited directly into your checking or savings account, complete the "Direct Deposit Option" section. (If you **are** filing a Form 511, you will complete the Direct Deposit section on the Form 511). **If you do not choose direct deposit, you will receive a debit card.**
- WARNING! The Oklahoma Tax Commission will not allow direct deposits to or through foreign financial institutions. If you use a foreign financial institution, your refund will be mailed to the address shown on your return.

#### \*Definitions for the purpose of this form:

Resident of Oklahoma is defined as a person legally domiciled in this state for the entire tax year.

Household means any house, dwelling or other type of living quarters.

Total gross household income means the total amount of gross income received by ALL persons living in the same household whether the income was taxable or not for income tax purposes. This includes, but is not limited to, public assistance payments, support money (example: child support), workers' compensation, school grants or scholarships, veterans disability compensation, loss-of-time insurance payments and all of the types of income shown on the front of this form. Income that is exempt must be included in the year received, for example: nontaxable sources of income on your W-2 (such as a dependent care reimbursement account), military housing assistance, and the distribution of earnings from a Roth IRA. Note: Do not include income deferred for Federal Income Tax purposes, for example: tax deductible contributions to a 401K or to a traditional IRA. This income will be included when distributed and taxed on your Federal return.

**Proof of disability** may be established by certification by an agency of State Government, an insurance company or a physician, or by eligibility to receive disability benefits under the Federal Social Security Act. A veteran certified by the Veterans Administration of the Federal government as having a service-connected disability shall constitute proof.

#### Filing instructions and due date:

If you are required to file an Oklahoma Income Tax Return, claim the sales tax refund as a credit on your tax return, Form 511, and provide this signed form. Your return claiming the sales tax credit must be filed no later than April 15th. (See note at bottom of page)

If you are **not** required to file an Oklahoma Income Tax Return, this form must be filed no later than June 30. If you have withholding or made estimated payments and are filing for a refund on Form 511, you must claim the sales tax credit on your return and provide this signed form. If you are not filing an income tax return, mail this completed and signed form to: Oklahoma Tax Commission, Post Office Box 26800, Oklahoma City, OK 73126-0800.

An amended return cannot be filed to claim this credit after the due date. The claim must be filed on or before the due date, including extensions.

#### Note:

- If the Internal Revenue Code (IRC) of the IRS provides for a later due date, this form may be filed by the later due date.
- If the due date falls on a weekend or legal holiday when OTC offices are closed, this form is due the next business day.
- Extensions **do** apply to this form. If you have been granted an extension of time in order to file your income tax return (including the April 20th due date for electronically filed returns), file this form with your income tax return on or before the due date granted by the extension. Provide a copy of the extension.

## State of Oklahoma OTHER CREDITS FORM

Name as shown on return:

Provide this form and supporting documents with your Oklahoma tax return.



1

Social Security Number:

-OR-

Federal Employer Identification Number:

Enter in Column A all unused carryover credits established in prior tax years but not used in any prior tax year.
Enter in Column B all credits established this tax year. This includes a credit generated this tax year; a credit transferred to you on a filed transfer agreement (Form 572) which may be claimed this tax year; and a credit, that once established, may be claimed over multiple years and you are claiming the subsequent years' credit (e.g. Investment/New Jobs Credit).

Attention members of pass-through entities: Enter your share of the pass-through entities' credit on the appropriate line for the type of credit. For example: Your share of the pass-through entities' Coal Credit would be entered on line 2.

#### See instructions for details on qualifications and required enclosures.

		<u>A</u> Unused Credit Carried Over from Prior Year(s)	om During Current		<u>C</u> Total Available Credit (A + B = C)	
1a	Oklahoma Investment/New Jobs Credit (provide Form 506)	00 1	a	00	00	
1b	Rate (Percent of total credit allowed to offset tax) (This rate does not apply to fiscal year returns with tax years ending in 2019.)	Not Applicable 1	b	Not Applicable	97.6%	
1c	Credit Allowed (multiply Column C, line 1a by line 1b). (fiscal year returns with tax years ending in 2019, enter the amount from Column C, line 1a) Credits not allowed due to the percent on line 1b will carry forward to subsequent tax years.	Not Applicable	c	Not Applicable	- 00	
1d	Check the box to indicate the type of credit	Investment Credit	t	New Jobs Cr	edit	
2	Coal Credit	00	2	00	00	
3	Credit for Investment in a Clean-Burning Motor Vehicle Fuel Property (provide Form 567-A) Enter the number of Form(s) 567-A provided with this return for 3a and 3b	Number of Form(s) 567-A	-			
3a	Credit from Form 567-A, Part 1, Section A, line 3. (If completing multiple Forms 567-A; enter the total amounts from all Part 1, Section A, line 3.)	00 3	a	00	00	
3b	Credit from Form 567-A, Part 4, line 4	00 31	ь	00	00	
4	Small Business Guaranty Fee Credit (provide Form 529)	00	4	00	00	
5	Credit for Entities in the Business of Providing Child Care Services	00	5	Not Applicable	00	
6	Credit for Tourism Development or Qualified Media Production Facility	00	6	Not Applicable	00	
7	Oklahoma Local Development and Enterprise Zone Incentive Leverage Act Credit		7	Not Applicable	00	
8	Credit for Qualified Rehabilitation Expenditures	00	8	00	00	
9a	Credit for Electricity Generated by Zero-Emission Facilities	00 98	a	00	00	
9b	Check the box to indicate the renewable resource used to generate electricity	Wind Mov	/in	g Water, Sun, or Ge	othermal Energy	

## 2018 Form 511CR - Page 2

## **OTHER CREDITS FORM**



Name as shown on return: Social Security/Federal Employer Identification Number:

				Credit Established During Current	<u>C</u> Total Available Credit (A + B = C)	
10	Credit for Financial Institutions Making Loans under the Rural Economic Development Loan Act	00	10	Not Applicable	00	
11	Credit for Manufacturers of Small Wind Turbines	00	11	00	00	
12	Poultry Litter Credit	00	12	Not Applicable	00	
13	Volunteer Firefighter Credit (provide FTAC's Form, see instructions on page 5)	Not Applicable	13	00	00	
14	Credit for Breeders of Specially Trained Canines	00	14	Not Applicable	00	
15	Credit for the Construction of Energy Efficient Homes	00	15	00	00	
16	Credit for Railroad Modernization	00	16	00	00	
17	Research and Development New Jobs Credit (provide Form 563)	00	17	00	00	
18	Credit for Stafford Loan Origination Fee (for banks & credit unions filing Form 512)	00	1		00	
19	Credit for Biomedical Research Contribution	00	19	00	00	
20	Credit for Employees in the Aerospace Sector (provide Form 564)	00	20	00	00	
21	Credits for Employers in the Aerospace Sector (provide Form 565)	Not Applicable	21	00	00	
22	Wire Transfer Fee Credit	00	22	Not Applicable	00	
23	Credit for Manufacturers of Electric Vehicles	00	23	Not Applicable	00	
24	Credit for Cancer Research Contribution	00	24	00	00	
	Oklahoma Capital Investment Board Tax Credit	Not Applicable	25	00	00	
26	Credit for Contributions to a Scholarship-Granting Organization	00	26	00	00	
27	Credit for Contributions to an Educational Improvement Grant Organization	00	27	00	00	
28	Credit for Venture Capital Investment (provide Form 518-A or 518-B)	00	28	00	00	
29	Oklahoma Affordable Housing Tax Credit	00	29	00	00	
30	<b>Total</b> (add lines 1c through 29) Enter on the applicable line of income tax return and enter the lf more than one credit is claimed, enter "99" in the box.	ne number in the box	for	the type of credit.	00	

## **NOTICE**

Tax credits transferred or allocated must be reported on Oklahoma Tax Commission (OTC) Form 569. Failure to file Form 569 will result in the affected credits being denied by the OTC pursuant to 68 Oklahoma Statutes (OS) Sec. 2357.1A-2.

## State of Oklahoma **OKLAHOMA CAPITAL GAIN DEDUCTION** FOR RESIDENTS FILING FORM 511

(Qualifying Assets Held for the Applicable 2 or 5 Year Period)



Na

(see instructions)

Name(s) as Shown on Return				Social S	al Security Number		
1. List qualifying Oklahoma capita	I gains and loss	es, not included	on lines 2 throug	h 5 below.			
A1. Description of Property:	B. Date Acquired (mm/dd/yy)	C. Date Sold or Disposed (mm/dd/yy)	D. Proceeds (Sales Price)	E. Cost or Other Basis minus Adjustments to	F. Gain or (Loss) Combine Columns (D) and (E)		
A2. Oklahoma Location/Address or Federal ID Number:	(See instructions)	(iiii)ddyy)		Gain or Loss			
A3. Type of property sold: (see instructions)							
A1. Description of Property:	B. Date Acquired (mm/dd/yy)	C. Date Sold or Disposed (mm/dd/yy)	D. Proceeds (Sales Price)	E. Cost or Other Basis minus Adjustments to	F. Gain or (Loss) Combine Columns (D) and (E)		
A2. Oklahoma Location/Address or Federal ID Number:	(See instructions)			Gain or Loss			
A3. Type of property sold: (see instructions)							
A1. Description of Property:	B. Date Acquired (mm/dd/yy)	C. Date Sold or Disposed (mm/dd/yy)	D. Proceeds (Sales Price)	E. Cost or Other Basis minus Adjustments to	F. Gain or (Loss) Combine Columns (D) and (E)		
A2. Oklahoma Location/Address or Federal ID Number:	(See instructions)	(1111)(02)(y)		Gain or Loss			
A3. Type of property sold:					1		

2.	Qualifying Oklahoma capital gain from installment sales reported on Federal Schedule D,		
	line 11. (Provide a copy of Federal Form 6252)	2	
	Type of property sold (See instructions)	2	
3.	Qualifying Oklahoma net capital gain from sale of business property reported on Federal Schedule D,		
	line 11. (Provide a copy of Federal Form 4797) (If gain/loss is from a Federal K-1, complete		
	the worksheet on page 2 and provide a copy of the Federal Schedule K-1)		
	Type of property sold (See instructions)	3	
4.	Other qualifying Oklahoma net capital gain or (loss) reported on Federal Schedule D, line 11, not		
	included in lines 2 and 3 above. (Provide a copy of the applicable Federal form[s])		
	Type of property sold (See instructions)	4	
5.	Qualifying Oklahoma net capital gain or (loss) from partnerships, S corporations, estates		
	or trusts reported on Federal Schedule D, line 12. (Complete the worksheet on page 2 and		
	provide a copy of the Federal Schedule K-1)		
	Type of property sold (See instructions)	5	
6.	Add amounts in Column F on line 1 and lines 2 through 5	6	
7.	Qualifying Oklahoma capital loss carryover reported on Federal Schedule D, line 14		
	(See instructions)	7	
8.	Qualifying Oklahoma net capital gain. Subtract line 7 from line 6		
	(If zero or less, enter "0")	8	
9.	Oklahoma net capital gain included in Federal adjusted gross income.		
	See instructions and worksheet. (If zero or less, enter "0")	9	
10.	Oklahoma Capital Gain Deduction. Enter the smaller of lines 8 or 9 here and on Form 511,		
	Schedule 511-A, line 12. (Do not enter less than zero)	10	



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## OKLAHOMA CAPITAL GAIN DEDUCTION FOR RESIDENTS FILING FORM 511

68 Oklahoma Statutes (OS) Sec. 2358 and Rule 710:50-15-48

#### Worksheets - (Provide with Form 561)

Name(s) as Shown on Return			Social Security Number			
For	FORM 561 WORKSHEET FOR (CHECK ONE): LINE 3 OR LINE 5					
Complete a separate worksheet for each piece of property sold. Provide a copy of the Federal Schedule K-1.						
Name of pass-through entity: FEIN:						
Description of property sold:						
Location of property:						
Date	Date acquired: Date sold:					
Date(s) you acquired ownership in the pass-through entity:						
FORM 561 WORKSHEET FOR LINE 9						
Refer to the instructions for Form 511, line 4 and Form 511, Schedule 511-B, line 2 to determine what gains and losses are considered "out-of-state". (Generally, sale of an intangible, such as stock, is not considered out-of-state.)						
Α	Net Short-Term Capital Gain (or loss) from Federal Schedule D, line	7				
В	Add Out-of-State Capital Losses included in line A above	+				
С	Subtract Out-of-State Capital Gains included in line A above	-				
D	Net Oklahoma Short-Term Capital Loss (if greater than zero, enter "0")					
Е	Net Long-Term Capital Gain (or loss) from Federal Schedule D. line	15				

**Note:** For U.S. Government and municipal bonds, which are exempt from Oklahoma tax, include any capital gain on the Out-of-State Capital Gains line (Line C or G) and any capital loss on the Out-of-State Capital Losses line (Line B or F).

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Add Out-of-State Capital Losses included in line E above

(combine lines H and D) (if less than zero, enter "0")

Subtract Out-of-State Capital Gains included in line E above

Net Oklahoma Long-Term Capital Gains (if less than zero, enter "0")

Oklahoma Net Capital Gain - Enter on the front of form on line 9

### **General Information**

Individual taxpayers can deduct qualifying gains receiving capital gain treatment which are included in Federal adjusted gross income. "Qualifying gains receiving capital treatment" means the amount of net capital gains, as defined under Internal Revenue Code Section 1222(11). The qualifying gain must result from:

1. the sale of real or tangible personal property located within Oklahoma that has been owned for at least five uninterrupted years prior to the date of the transaction that gave rise to the capital gain;



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#### OKLAHOMA CAPITAL GAIN DEDUCTION FOR RESIDENTS FILING FORM 511 68 OS Sec. 2358 and Rule 710:50-15-48 General Information - continued

- 2. the sale of stock or an ownership interest in an Oklahoma company, limited liability company, or partnership where such stock or ownership interest has been owned for at least two uninterrupted years prior to the date of the transaction that gave rise to the capital gain; or
- 3. the sale of real property, tangible personal property or intangible personal property located within Oklahoma as part of the sale of all or substantially all of the assets of an Oklahoma company, limited liability company, or partnership or an Oklahoma proprietorship business enterprise where such property has been owned by such entity or business enterprise or owned by the owners of such entity or business enterprise for a period of at least two uninterrupted years prior to the date of the transaction that gave rise to the capital gain.

An Oklahoma company, limited liability company, partnership or proprietorship business enterprise is an entity whose primary headquarters has been located in Oklahoma for at least three uninterrupted years prior to the date of sale.

A capital loss carryover from qualified property reduces the current year gains from eligible property.

#### Pass-through entities...

Capital gain from qualifying property, as described above, held by a pass-through entity is eligible for the Oklahoma capital gain deduction, provided the individual has been a member of the pass-through entity for an uninterrupted period of the applicable two or five years and the pass-through entity has held the asset for not less than the applicable two or five uninterrupted years prior to the date of the transaction that created the capital gain. The type of asset sold, as shown in 1-3 above, determines whether the applicable number of uninterrupted years is two or five. The pass-through entity must provide supplemental information to the individual identifying the pass-through of qualifying capital gains.

#### Installment sales...

Qualifying gains included in an individual taxpayer's Federal adjusted gross income for the current year which are derived from installment sales are eligible for exclusion, provided the appropriate holding periods are met.

#### Specific Instructions

#### Lines 1-5: Type of Property Sold

Enter the number in the box which corresponds to the type of property sold:

- 1. The sale of stock in a qualified Oklahoma corporation.
- 2. The sale of an ownership interest in a qualified Oklahoma company, limited liability company, or partnership.
- 3. The sale of qualified real property located within Oklahoma.
- 4. The sale of qualified tangible personal property located within Oklahoma.
- 5. The sale of qualified intangible personal property located within Oklahoma as part of the sale of all or substantially all of the assets of an Oklahoma company, limited liability company, or partnership or an Oklahoma proprietorship business enterprise.
  20. For lines 2-5, enter a 90 if the net gain/loss is from the sale of more than one type of property.
- 99. For lines 2-5, enter a 99 if the net gain/loss is from the sale of more than one type of property.

Line 1: List qualifying Oklahoma capital gains and losses from Federal Form(s) 8949, Part II or from Federal Schedule D, line 8a. Provide a copy of Form(s) 1099-B if the qualifying Oklahoma capital gain or loss is reported on Federal Schedule D, line 8a. In <u>Column A</u>, line A1 enter the description of the property as shown on Federal Form 8949, Column a or on Form 1099-B. On line A2 enter either the Oklahoma location/address of the real or tangible personal property sold or the Federal Identification Number of the company, limited liability company or partnership whose stock or ownership interest was sold. Complete <u>Columns B through E</u> using the information from Federal Form 8949, Columns b through g or on Form 1099-B. In <u>Column B</u>, enter the date the property was acquired. If you entered "VARIOUS" or "INHERITED" from your federal form, enter the date you actually acquired the property. For <u>Column F</u> combine Columns D and E. Do not include gains and losses reported on Form 561 lines 2 through 5.

Line 2: If Federal Form 6252 was used to report the installment method for gain on the sale of eligible property on the Federal return, compute the capital gain deduction using the current year's taxable portion of the installment payment. Provide Federal Form 6252. Capital gain from an installment sale is eligible for the Oklahoma capital gain deduction provided the property was held for the appropriate holding period as of the date sold.

**Line 3:** Enter the qualifying Oklahoma net capital gain, reported on Federal Schedule D, from the Federal Form 4797. Provide a copy of the Federal Form 4797. If reporting a gain/loss from a Federal Schedule K-1, complete the worksheet on page 2 and provide a copy of the Federal Schedule K-1.

**Line 4:** Enter other qualifying Oklahoma capital gains reported on Federal Schedule D, line 11. Provide the applicable Federal form(s). If not shown on the Federal form, provide a schedule identifying the type and location of the property sold, the date of the sale, and the date the property was acquired.

Line 5: Enter qualifying Oklahoma net capital gain or loss from partnerships, S corporations, trusts and estates. Complete the worksheet on page 2 and provide a copy of the Federal Schedule K-1.

Line 7: Enter the total qualifying Oklahoma capital loss carryover from the prior year's return.

Line 9: The Oklahoma capital gain deduction may not exceed the Oklahoma net capital gain included in Federal adjusted gross income. To determine the Oklahoma net capital gain, complete the worksheet on page 2.