Do not mail this form with your income tax return.





## INJURED SPOUSE CLAIM AND ALLOCATION



Name(s) shown on return	Y	our Social Security Number					
ARE YOU AN INJURED SPOUSE?							
Is your share of the overpayment, shown on your joint retu	rn, being applied aga	inst vour spouse's <b>Okl</b> a	ahoma				
Tax Commission liability? ☐ Yes No ☐	, somg approce aga	or your opoulous a cities					
<b>Note:</b> Answer "no" if your overpayment is being applied against your spouse's debt with another state agency such as past due child support or spousal support payments; certain Federal debt such as student loans or amounts due the Internal Revenue Service; or county court debts.							
If you answered no, <u>STOP!</u> <u>Do not complete this form</u> . You must claim your refund by contacting the agency to which your refund was applied. <b>Other agencies will not accept this form.</b> Form 505 is for Oklahoma Tax Commission use only.							
If you answered yes, you may file this form to claim your	part of the refund if <b>a</b>	II three of the following	g apply:				
<ul> <li>✓ You are not required to pay your spouse's Oklahoma Tax Commission liability.</li> <li>✓ You received and reported income (such as wages, taxable interest, etc.) on the joint return.</li> <li>✓ You had Oklahoma income tax withheld or made estimated tax payments, or you claimed the sales tax relief credit or other refundable credit on the joint return.</li> </ul>							
If all three of the above apply and you want your share of the overpayment shown on the joint return refunded to you, complete this form. The Oklahoma Tax Commission will figure your part of the overpayment and send you any refund that is due. However, if you owe past-due child support or a debt to another state agency, part or all of your share of the overpayment may be applied to that debt. Please allow at least 8 weeks for the processing of this claim.							
WHEN DO YOU FILE FORM 505?							
After you have been notified that your refund is going to be	e applied to a debt oth	her than your own, file	Form 505				
and mail to: Oklahoma Tax C	Commission						
Account Maintenance Division Post Office Box 269060							
Oklahoma City, Ok							
<b>Note:</b> Include copies of all W-2 forms of both spouses, any Forms 1099-R showing income tax withheld and your Federal return. If you do not include these copies, the processing of your claim may be delayed. Do not include a copy of your Oklahoma income tax return.							
PART 1: INFORMATION ABOUT THE JOINT TAX	RETURN FOR WE	HICH THIS CLAIM I	s Fil FD				
<ol> <li>Enter the following information exactly as it is shown on the tax return for which you are filing this claim. The spouse's name and social security number shown first on that tax return must also be shown first below.</li> </ol>							
First name, initial, and last name shown first on the return	Social security number sh	own first If Injured Spouse check here	1 1 1				
First name, initial, and last name shown second on the return	Social security number show	wn second If Injured Spouse check here	1 1 1				
2. Enter the tax year for which you are filin	g this claim: _						
3							
Current home address City		State Zip C					
<b>4.</b> Is the address on your joint return different from	your current addre	ess (line 3)? 🔲 <b>Yes</b>	∐ No				

Form	505: In	iured S	pouse (	Claim a	and All	ocation -	- Page	2
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Name(s)	Your Social Security
shown	Security
on return:	Number:

	81111 88181 81111 8811	

PAF	RT 2: /	ALLOCATION BETWEEN SPOUSES OF	ITEMS ON TH	IE JOINT	TAX	RE	TURN	
	Allocated Items		(a) Amount Show on Joint Return		(b) Allocated to Injured Spouse		(c) Allocated to Other Spouse	
A a s	llocate jo ccount, a hown on	Enter the separate income that each spouse earned.  bint income, such as interest earned on a joint bank as you determine. But be sure to allocate <b>all</b> income the joint return.						
						$\perp$		<u> </u>
<b>b</b> A	III other i	ncome. Identify the type and amount:						
_								
6 A	diuetme	ents to income. Enter each spouse's separate ad-						
jι	ustments	, such as an IRA deduction. Allocate other adjust- you determine				Т		
<b>7. A</b> E	<b>Adjustme</b> Enter eac hilitary p	ents from Oklahoma adjusted gross income. h spouse's separate adjustments, such as a partial ay exclusion. Allocate other adjustments as you						I
8. C	Oklahom ons, go t c) 1/2 of	a Standard deduction. If you itemized your deduction line 9. Otherwise, enter in both columns (b) and the amount shown in column (a) and go to						
ti	ons, suc	deductions. Enter each spouse's separate deduc- h as employee business expenses. Allocate other				1		
		s as you determineof exemptions. Allocate the exemptions claimed on						
th if (f	ne joint re separate for exam	eturn to the spouse who would have claimed them e returns had been filed. Enter whole numbers only ple, you <b>cannot</b> allocate 3 exemptions by giving 1.5						T
		ns to each spouse). Allocate credits to the spouse who had the business						
o ta	r the inco ax relief	ome. Allocate any child care/child tax credit or sales credit claimed for a dependent to the spouse who allocated the dependent's exemption. Allocate any						
		dits as you determine				Τ		
12. C	<b>)klahom</b> ax withhe	a income tax withheld. Enter Oklahoma income eld from each spouse's income as shown on Forms 1099s. Be sure to attach copies of these forms						
		505 <b>.</b>						
		s. Allocate joint estimated tax payments as you				Т		Т
		ne Oklahoma Tax Commission will figure the amount	of any refund due	the injured s	spouse			
PAR	RT III:	SIGNATURE						
Under	penalties	of perjury, I declare that I have examined this form and any accoe, correct, and complete. Declaration of preparer (other than ta						
this f	a copy of form for records	Injured Spouse's Signature:		Date		Ph	one Number (optional)	)
Paid	I	Preparer's Signature:	Date	Check if self-employed	<sub>3</sub> 🔲	Prepare	er's Social Security Nui	mber
Preparer's Use Only		Firm's name (or yours if self-employed) and			EIN Zin Co	ide.		