OKLAHOMA RESIDENT INCOME TAX RETURN Your Social Security Number Place an 'X' in this

Form 511	
2014	

	œ.	
2.5	е.	87
	5	Ċ,

				box if this taxp	bayer	R	ETURN!								
			urity Number	1		box if	an 'X' in this this is an led 511. See								
(joint ret	urn only			Place an 'X' in box if this taxp	bayer	Sched 511-H.	ule								
				is deceased -]							
SS (PE	Your fi	rst name	, middle initial and	last name											
: AND ADDRESS E PRINT OR TYPE	lf a joi	nt return,	spouse's first name	e, middle initial a	nd last name										
AND PRIN	Mailin	g address	s (number and stree	et, including apar	tment numbe	r, rural ro	ute or PO Box)	1							
NAME /	City, S	tate and	ZIP					No	t Reg	UIRED TO FILE					
P N										X' in this box if you do require you to file a l					
Г		7							1						
	1	Sing	jle ried filing join	nt return (ev	en if only (one ha	d income)		* NOTE	If claiming Special Exempti REGULAR *SPECIAL	on, see Blint	_	ns on pag	ge 7 of 511 Pa	cket.
<u> </u>	3	Mar	ried filing sep	oarate				<u>N</u>	Yourse			ا ا	\neg	ADD THE TOT	
			e is also filing, l nd SSN in the b					EXEMPTIONS	<u> </u>			_ -		WRITE THE IN THE BOX	BELOW.
FILING	4	_	d of househo		lifvina pe	rson		MP	SPOUS	^{5E} + +			H		<u>. </u>
	5	Qua	lifying widow	, (er) with de	ependent	child		E E		NUMBER OF DEPENDENT CHILD	EN	╵╻╵	\neg	▋▋	
	• P	lease	list the year s	spouse died	in box at	right:			<u> </u>			_ -		NOTE: IF YOU CLAIMED AS A D	DEPENDENT
Age 6	65 or (OVER?	(Please see instru	uctions)	Yourse	f	Spouse			NUMBER OF OTHER DEPENDEN	ITS		ŀ	ON ANOTHER ENTER "O" F REGULAR EXE	OR YOUR
Par		NE: -	To Arrive	E AT OKL	АНОМА	ADJ	USTED	GROSS	5 Inc	OME	R	Round	to Nea	rest Whole	Dollar
If you a		1	Federal ad	djusted gro	oss incor	ne (fr	om Fede	ral 104	0, 104	0A, or 1040EZ) .	. 1				00
not rec to file,		2	Oklahoma	Subtractio	ons (enc	lose	Schedule	511-A)			2				00
	of the	3	4					,							00
			Out-of-sta	te income.	except	wade	s. Descri	be (4a)							00
If line 7	7 is nt than	5	(Enclose Fede	ral schedule wi	ith detailed o	lescripti	on; see instru	ctions)							00
line 1,	enclose	├──	4								- H				00
a copy your Fo	ederal	6	4												
return.		7									. 7				00
PAR		/0: (OKLAHOM/												—
Oklaho Standa		8	Oklahoma	a Adjustme	nts (enc	lose	Schedule	511-C)			. 8				00
Deduc	tion:	9	1							3)					00
 Singl Marrie 	e or d Filing		1							han zero, see Schedule	Г	and do	not cor	nplete lines	
Separa	ate: \$6,200	r—	1							ctions					00
• Marr		11	Exemption	ıs (\$1,000	x total n	umbe	er of exen	nptions	claim	ed above)	. 11				00
Filing	Joint	12	Total dedu	ctions and	l exempt	ions	add lines 10	and 11 or	amoun	t from Sch. 511-D, line 5)	. 12				00
Widow	alifying /(er):	13	Oklahoma	a Taxable	Income	(line	9 minus l	ine 12)			13				00
	\$12,400	14	Oklahoma	Income Ta	ax from	from Fo	able (see	pages 2	20-31 er a "1"	of instructions)	ıГ				
 Head House 			If paying the He	ealth Savings A	ccount addi	tional 10	0% tax, add a	dditional ta	x here a	Ind enter a "2" in box.	14				00
	\$9,100 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 Schedule 511-E. Itemized 15 Oklahoma child care/child tax credit (see instructions)														
Itemize Deduc		15							,						00
Enclos	se сору	16	{	-						ITX)					00
of the Sched	Federal ule A.	17	-							claimed here	17				00
		18		ax (line 14) THIS AMOU						ess than zero	18				00



2014 Form 511 - Resident Income Tax Return - Page 2

Name(s) shown on Form 511:		Your Social Security Number:
PART THREE: TAX, CREDITS AN	D PAYMENTS	
	er, or other out-of-state purchases	
	ket) If you certify that no use tax is due, place an 'X'	
21 Balance (add lines 19 and 20)		
	2s, 1099s or other withholding statements) 22	00
23 2014 estimated tax payments (qu	alified farmer) 23	00
		00
	enclose Form 538-H)25	00
26 Sales Tax Relief Credit (enclose		00
		00
than line 1, complete line 28. If line 7 is smaller th	(SEE INSTRUCTIONS)(If line 7 is equal to or more an line 1, complete Schedule 511-F. If you are not a 5 of the <u>511</u> Packet for instru <u>ctions</u>)	00
29 Credits from Form	(a + b) = 5 of the 511 Packet for instructions	00
	lus additional paid after it was filed	
		00
	\$ 22-30)	
	n original return and/or prior amended return(s)	
as previously adjusted by Oklaho	ma (amended return only)	
	e 31 minus 32)	
PART FOUR: REFUND		
For further 34 If line 33 is more than I	ne 21, subtract line 21 from line 33. This is your over	erpayment . 34 00
	be applied to 2015 estimated tax	
estimated tax, (original return only	′) 35	00
see page 5 of Schedule 511-G provides you with th	e opportunity to make a financial gift from your refund to a variety	
	number of the organization from Schedule 511-G in the box below. 9" in the box. Enclose Schedule 511-G.	If you give to
	refund (total from Schedule 511-G) 36	
	n refund (add lines 35 and 36)	
38 Amount to be retund	ed to you (line 34 minus line 37)	
Direct Deposit Note:	s refund going to or through an account that is located outs	ide of the United States? Yes No
Verify your account and routing num-	osit my refund in my:	
hers are correct of your direct deposit	checking account Number:	
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.	Account savings account Number:	
	•	
PART FIVE: AMOUNT YOU OWE		
39 If line 21 is more than	line 33, subtract line 33 from line 21. This is your	tax due 39 00
	Cedar Revolving Fund (original return only)	
of estimated 41 Donation: Public Schoo	I Classroom Support Fund (original return only)	
tax (line 42) & + 42 Underpayment of est	imated tax interest	
overpayment (line 34), see)42 00
(instructions.) 43 For delinquent pay	nent add penalty of 5%\$	
	5 per month\$	43 00
44 Total tax, donation, p	enalty and interest (add lines 39-43)	44 00
Under penalty of perjury, I declare the information contained in		
attachments and schedules, is true and correct to the best of m Taxpayer's signature Date		Preparer's signature Date
Date Date		Dale Dale
Taxpayer's	Spouse's Paid	Preparer's address and phone number
occupation	occupation	ייסטערפיס מווע אווטוופ וועוווטפו
Daytime Phone (optional)	Daytime Phone (optional)	

 ptional)
 (optional)

 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.

Paid Preparer's PTIN

2014 Form 511 - Resident Income Tax Return - Page 3
NOTE: Enclose this page ONLY if you have an amount shown on a schedule.



Name(s) sho on Form 511:

Sc

1

2

3

4

5

6

7

8

9

10

11

12

13

14

1

2

3

4

5

6

7

8

1

2

3

4

5

Sc

Sc

Form 511 - Resident Income Tax Return - Page 3 E: Enclose this page <u>ONLY</u> if you have an amount shown on a schedule	а.	
(s) shown m 511:	Your Social Security Number:	
SCHEDULE 511-A Oklahoma Subtra	actions See instructions for details on qualifications and required enclo	osures.
Interest on U.S. government obligations	1	00
Social Security benefits taxed on your Federal Form 1040 or 1040A	A 2	00
Federal civil service retirement in lieu of social security	3	00
Retirement Claim Number: Taxpayer Spouse		
Military Retirement (see instructions for limitation)	4	00
Oklahoma government or Federal civil service retirement (see instruct	tions for limitation) 5	00
Other retirement income		00
U.S. Railroad Retirement Board benefits		00
Oklahoma depletion		00
Oklahoma net operating lossLoss Year(s)	9	00
Exempt tribal income		00
Gains from the sale of exempt government obligations	11	00
Oklahoma Capital Gain Deduction (enclose Form 561)	12	00
Miscellaneous: Other subtractions (enter number in box for type of o	deduction) .	00
Total subtractions (add lines 1-13, enter total here and on line 2 of	f Form 511) 14	00
SCHEDULE 511-B Oklahoma Additi	ONS See instructions for details on qualifications and required enclosures	
State and municipal bond interest	1	00
Out-of-state losses (describe) Ent	ter as a positive number . 2	00
Lump sum distributions (not included in your Federal Adjusted Gros		00
Federal net operating loss - Enter as a positive number	4	00
Recapture of depletion claimed on a lease bonus or add back of excess Fe	ederal depletion 5	00
Recapture of Contributions to Oklahoma 529 College Savings Plan and OklahomaDre	eam 529 Account(s). 6	00
Miscellaneous: Other additions (enter number in box for type of add	dition) 7	00
Total additions (add lines 1-7, enter total here and on line 6 of Forr		00
SCHEDULE 511-C Oklahoma Adjus	stments See instructions for details on qualifications and required enclo	osures.
Military pay exclusion - Active Duty, Reserve and National Guard (not		00
Qualifying disability deduction		00
Qualified adoption expense		00
Contributions to Oklahoma 529 College Savings Plan and OklahomaDream		00
Deduction for providing foster care		00
- 1		100

6	Miscellaneous: Other adjustments (enter number in box for type of deduction)	6
7	Total adjustments (add lines 1-6, enter total here and on line 8 of Form 511)	7

00 00



Name(s) shown on Form 511:

SCHEDULE	511-D	

Deductions and Exemptions See instructions for details on qualifications and required enclosures.

Your Social

Security Number:

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

inco	ome. 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.
1	Oklahoma standard deduction or Federal itemized deductions claim	00
2	Exemptions (\$1,000 x number of exemptions claimed at top of Form 511) 2	00
3	Total (add lines 1 and 2) 3	00
4	Divide the amount on line 7 of Form 511 by the amount on line 3 of Form 511	
	$ \rightarrow $	
	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 and 11 of Form 511 blank) 5	00
	SCHEDULE 511-E Child Care/Child Tax Credit See instructions for details on qualifications and required enclosures	s.
	our Federal Adjusted Gross Income is \$100,000 or less and you are allowed either a credit for child care expenses or dit on your Federal return, you are allowed a credit against your Oklahoma tax. Your Oklahoma credit is the greater or	
	 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. <u>or</u> 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. 	
Tho	e credit must be prorated based on the ratio of Oklahoma Adjusted Gross Income to Federal Adjusted Gross Income.	
	bur Federal Adjusted Gross Income is greater than \$100,000, no credit is allowed.	
•	close a copy of your Federal return and, if applicable, the Federal child care credit schedule.	
—		
1	Enter your Federal child <u>care</u> credit 1 00 Multiply line 1 by 20%	
3	Enter your Federal child tax credit	
	(total of child tax credit & additional child tax credit)	
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 on line 1 of Form 511	
ľ		
	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	00

SCHEDULE 511-F Earned Income Credit See instructions for details on qualifications and required enclosures.

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. Enclose a copy of your Federal return. If you are not required to file, see "Not Required to File" on page 5 of the 511 Packet for instructions.

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	
	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 28 of Form 511)	00

2014 Form 511 - Resident Income Tax Return - Page 5 NOTE: Enclose this page <u>ONLY</u> if you have an amount shown on a schedule.



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

SCHEDULE 511-G Donations from Refund (Original return only)

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-G Information. If you are not receiving a refund, but would like to make a donation to one of these organizations, Schedule 511-G Information lists the mailing address to mail your donation to the organization. If you are not receiving a refund and wish to donate to the Eastern Red Cedar Revolving Fund or the Public School Classroom Support Fund, please see line 40 or 41 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.

1	Support of Programs for Volunteers to Act as Court Appointed Special Advocates for Abused or Neglected Children	□\$2	□\$5	□\$□	1	00
2	Support of the Oklahoma National Guard	\$2	\$5		2	00
3	Support of Programs for Regional Food Banks					
	in Óklahoma	\$2	\$5	\$	3	00
4	Support Oklahoma Honor Flights	\$2	\$5	\$	4	00
5	Eastern Red Cedar Revolving Fund	\$2	\$5		5	00
6	Support of Domestic Violence and Sexual					
	Assault Services	\$2	\$5	\$	6	00
7	Support of Volunteer Fire Departments	\$2	\$5	\$	7	00
8	Oklahoma Lupus Revolving Fund	\$2	\$5	\$	8	00
9	Oklahoma Sports Eye Safety Program	\$2	\$5		9	00
10	Historic Greenwood District Music Festival Fund	\$2	\$5		. 10	00
11	Public School Classroom Support Fund	\$2	\$5	\$. 11	00
12	Total donations (add lines 1-11, enter total here	e and o	n line 36 of	Form 511) 12	00

Schedule 511-H: Amended Return Information

Yes

Did you file an amended Federal return?

No

If Yes, enclose a copy of the IRS Form 1040X or 1045 AND a copy of the "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, enclose a separate schedule.

Information for Schedule 511-G

1- Support for Programs for Volunteers to Act as Court Appointed Special Advocates for Abused or Neglected Children

You may donate from your tax refund to support programs for volunteers to act as Court Appointed Special Advocates for abused or neglected children. Donations will be placed in the Income Tax Checkoff Revolving Fund for Court Appointed Special Advocates. Monies will be expended by the Office of the Attorney General for the purpose of providing grants to the Oklahoma CASA Association. If you are not receiving a refund, you may still donate. Mail your contribution to: Oklahoma CASA Association, Inc., P.O. Box 54946, Oklahoma City, OK 73154.

2- Support of the Oklahoma National Guard

You have the opportunity to donate from your tax refund for the benefit of providing financial relief to qualified members of the Oklahoma National Guard and their families. Donations will be placed in the Income Tax Checkoff Revolving Fund for the Support of the Oklahoma National Guard Relief Program. Monies, to assist Oklahoma National Guard members and their families with approved hardship expenses, will be expended by the Military Department. If you are not receiving a refund, you may still donate. Please mail your contribution to: Operation Homefront Task Force, 3501 Military Circle, Oklahoma City, OK 73111-4398.

Information for Schedule 511-G - continued

3- Support of Programs for Regional Food Banks in Oklahoma You may donate from your tax refund for the benefit of the Regional Food Bank of Oklahoma and the Community Food Bank of Eastern Oklahoma (Oklahoma Food Banks). The Oklahoma Food Banks are the largest hunger-relief organizations in the state - distributing food to charitable and faith-based feeding programs throughout all 77 counties in Oklahoma. Your donation will be used to help provide food to the more than 500,000 Oklahomans at risk of hunger on a daily basis. If you are not receiving a refund, you may still donate by mailing your contribution to: Oklahoma Department of Human Services, Revenue Processing Unit, Re: Programs for OK Food Banks, P.O. Box 248893, Oklahoma City, OK 73124.

4- Support Oklahoma Honor Flights

You have the opportunity to donate any amount of your tax refund to support Oklahoma Honor Flights. Oklahoma Honor Flights is a 501(c) (3) not-for-profit organization that transports Oklahoma World War II veterans to Washington, D.C. to visit the memorial dedicated to honor their service and sacrifice. If you are not receiving a refund, you may still donate. Mail your contribution to: Oklahoma Honor Flights, P.O. Box 10492, Midwest City, OK 73140.

5- Eastern Red Cedar Revolving Fund

Help stimulate rural development, improve public health and enhance wildlife habitat by donating to the Eastern Red Cedar Revolving Fund. The Fund was established to promote the harvesting and utilization of eastern red cedar trees and to promote the marketing, research and education efforts concerning the tree and eastern red cedar products. Monies donated may be expended by the State Board of Agriculture as directed by the Eastern Red Cedar Registry Board. You may also mail a contribution to: Eastern Red Cedar Revolving Fund, Oklahoma Department of Agriculture, Food and Forestry, 2800 North Lincoln Boulevard, Oklahoma City, OK 73105.

6- Support of Domestic Violence and Sexual Assault Services

You may donate from your tax refund for the benefit of domestic violence and sexual assault services in Oklahoma that have been certified by the Attorney General. Your donation will be used to provide grants to domestic violence and sexual assault service providers for the purpose of providing domestic violence and sexual assault services in Oklahoma. The term "services" includes but is not limited to programs, shelters or a combination thereof. If you are not receiving a refund, you may still donate. Mail your contribution to: Attorney General, Domestic Violence and Sexual Assault Services Fund, 313 NE 21st Street, Oklahoma City, OK 73105.

7- Support of Volunteer Fire Departments

You may donate from your tax refund for the benefit of volunteer fire departments in Oklahoma. Your donation will be used to provide grants to volunteer fire departments in this state for the purpose of purchasing bunker gear, wildland gear and other protective clothing. If you are not receiving a refund, you may still donate. Mail your contribution to: Oklahoma State Fire Marshal, Attn: Volunteer Fire Department Fund, 2401 NW 23rd Street, Suite 4, Oklahoma City, OK 73107.

8- Oklahoma Lupus Revolving Fund

You may donate from your refund for the benefit of the Oklahoma Lupus Revolving Fund. Monies from the fund will be used by the State Department of Health to provide grants to the Oklahoma Medical Research Foundation for the purpose of funding research into treating and curing lupus in this state. If you are not receiving a refund, you may still donate. Mail your contribution to: State Department of Health, Lupus Revolving Fund, P.O. Box 268823, Oklahoma City, OK 73152-8823.

9- Oklahoma Sports Eye Safety Program

You may donate from your refund for the benefit of the Oklahoma Sports Eye Safety Program. Your donation will be used by the State Department of Health to establish a sports eye safety grant program for the purchase and distribution of sports eye safety programs and materials to Oklahoma classrooms and sports eye safety protective wear to children age 18 and under. Monies will also be used to explore opportunities to utilize nonprofit organizations to provide such safety information or equipment. If you are not receiving a refund, you may still donate. Mail your contribution to: State Department of Health, Sports Eye Safety Fund, P.O. Box 268823, Oklahoma City, OK 73152-8823.

10 - Historic Greenwood District Music Festival Fund

With part of your tax refund you can support music festivals in the Historic Greenwood District of Tulsa. Your donation will be used by the Oklahoma Historical Society to assist with music education, public concerts, and a celebration of Tulsa's and Oklahoma's musical heritage. You may also mail your contributions to: Greenwood District Music Festival Fund, Oklahoma Historical Society, 800 Nazih Zuhdi Dr., Oklahoma City, OK 73105.

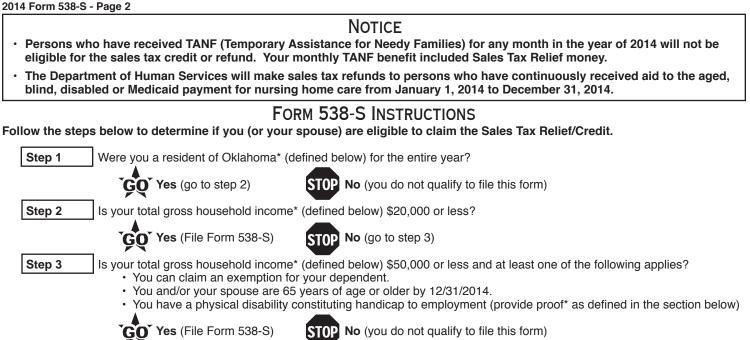
11 - Public School Classroom Support Fund

Donations to the Public School Classroom Support Revolving Fund will be used by the State Board of Education to provide one or more grants annually to public school classroom teachers. Grants will be used by the classroom teacher for supplies, materials, or equipment for the class or classes taught by the teacher. Grant applications will be considered on a statewide competitive basis. You may also mail a donation to: Oklahoma State Board of Education, Public School Classroom Support Fund, Office of the Comptroller, 2500 North Lincoln Boulevard, Room 415, Oklahoma City, OK 73105-4599.

State of Oklahoma CLAIM FOR CREDIT/REFUND OF SALES TAX

	51	
<u> </u>	8	2
	7	Ŕ,

Taxpayer Social Security Number	If died in 2014 or 2015 enter date of death:		Instructions on page 2. Please read carefully as ☐ 539.6			
Spouse's Social Security Number	If died in 2014 or 2015 enter date of death:	/	an incomplete form may delay your refund.			
Taxpayer first name, middle initial and last name			PART 1: TAXPAYER INFORMATION			
Spouse's first name, middle initial and last name (if a joint retu	m)		Physical a	address in 2014	(if different than shown in mailing address section)	
				ce an 'X' if vo	ou or your spouse have a physical disability	
Mailing address (number and street, including apartment numb	er, or rural route)		constituting a substantial handicap to employment (submit proof)			
City, State and ZIP			Place an 'X' if you or your spouse are 65 years of age or over			
	Oklahon	na resident fo	or the entire year? yes no			
PART 2: DEPENDENT Note: Do not	enter the taxpayer or	spouse as a depe	endent.		EXEMPTION INFORMATION QUALIFIED EXEMPTIONS	
1. Dependents	See Instru	ictions		5.Yearly] ·	
(first name, middle initial, last name) If you have additional dependents, please attach schedule. 2. Age	3. Social Security Nur		ationship	Income	A. Yourself	
					B. Spouse	
					C. Number of your	
					dependent children	
					dependents	
					E. Total exemptions claimed (add A-D)	
PART 3: GROSS INCOME: Enter taxa	ble and nontaxable gross	income and assista	ance receive	ed by ALL me	embers of your household in the year 2014.	
See "Total gross household income" definiti	on on page 2 for exam	ples of income.		Γ	Yearly Income	
1. Enter total wages, salaries, fees, com					You may not enter negative amounts.	
(including nontaxable income from ye	,			-	1 00	
 Enter total interest and dividend incon Total of all dependents' income (from 					2 00 3 00	
 Total of all dependents' income (from Part 2, column 5) Social Security payments (total including Medicare) 				4 00		
 Godal Gedany payments (total including Medicare) Railroad Retirement benefits					5 00	
6. Other pensions, annuities and IRAs					6 00	
7. Alimony					7 00	
8. Unemployment benefits					8 00	
9. Earned Income Credit (EIC) received					9 00	
10. Nontaxable sources of income (specif				H	10 00 You may not enter negative amounts.	
11. Enter gross (positive) income from ren					11 00	
from the sale or exchange of property 12. Enter gross (positive) income from bu					12 00	
13. Other income-including income of oth					13 00	
14. Total gross household income (Add	• •				14 00	
If line 14 is over income limits shown in						
PART 4: SALES TAX CREDIT CO	MPUTATION (For h	nouseholds with gro	ss income b	elow allowab	le limits, see steps 2 and 3 on back of form.)	
15. Total qualified exemptions claimed in	Box E above	x \$40 (crea	lit claimed	d) [1	15 00	
	se NOT filing a Form 511. ge 2 for Refund Informatio	n.	If you	are filing a F	form 511, carry the credit to Form 511, line 26	
	it my refund in my:	Routing	1			
account that is located outside of the United States? checking account Account						
Yes No S	avings account	Number:				
Under penalty of perjury, I declare the information contained in this documen Taxpayer's Signature and Date	t and any attachments is true and corr Spouse's Signature an		dge and belief.	If the	Oklahoma Tax Commission may discuss this return with your tax preparer, place an 'X' here:	
				Prepare	er's Signature and Date	
Occupation	Occupation					
L	1					



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, 2014, 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, you 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 or have a foreign address on your income tax return, your refund will be mailed to the address shown on your return. If you have an address with an APO, FPO or DPO, you are not considered to have a foreign address; your refund is eligible for direct deposit.

*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), worker's 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 enclose this signed form. Your return claiming the sales tax credit must be filed no later than <u>April 15th</u>. (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 enclose 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: Extensions <u>do</u> 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. Enclose a copy of the extension.

State of Oklahoma OTHER CREDITS FORM

² 511CR²

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

Name as shown on return

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 or Credit for Qualified Ethanol Facilities).

<u>Attention members of pass-through entities</u>: 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.

requ	instructions for details on qualifications and ired enclosures.	<u>A</u> Unused Credit Carried Over from Prior Year(s)	<u>B</u> Credit Established During Current Tax Year	<u>C</u> Total Available Credit (A + B = C)
1	Oklahoma Investment/New Jobs Credit (enclose Form 506)1	00	00	00
2	Coal Credit2	00	00	00
3	Credit for Investment in a Clean-Burning Motor Vehicle Fuel Property (enclose Form 567-A) Enter the number of Form(s) 567-A enclosed 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.) 3a	00	00	00
3b	Credit from Form 567-A, Part 4, line 43b	00	00	00
4	Credit for Investment in Qualified Electric Motor Vehicle Property (placed in service before July 1, 2010) . 4	00	Not Applicable	00
5	Small Business Capital Credit (enclose Form 527-A)5	00	Not Applicable	00
6	Oklahoma Agricultural Producers Credit (enclose Form 520)6	00	Not Applicable	00
7	Small Business Guaranty Fee Credit (enclose Form 529)7	00	00	00
8	Credit for Qualified Recycling Facility8	00	Not Applicable	00
9	Credit for Employers Providing Child Care Programs9	00	Not Applicable	00
10	Credit for Entities in the Business of Providing Child Care Services10	00	00	00
11	Credit for Commercial Space Industries 11	00	Not Applicable	00
12	Credit for Tourism Development or Qualified Media Production Facility 12	00	Not Applicable	00
13	Oklahoma Local Development and Enterprise Zone Incentive Leverage Act Credit13	00	Not Applicable	00
14	Credit for Qualified Rehabilitation Expenditures 14	00	00	00



2014 Form 511CR - Page 2 OTHER CREDITS FORM



Nam	e as shown on return:	Social Security/Federal Employer Identification Number:			
		<u>A</u> Unused Credit Carried Over from Prior Year(s)	<u>B</u> Credit Established During Current Tax Year	<u>C</u> Total Allowable Credit (A + B)	
15	Rural Small Business Capital Credit (enclose Form 526-A)15	00	Not Applicable	00	
16	Credit for Electricity Generated by Zero-Emission Facilities16	00	00	00	
17	Credit for Financial Institutions Making Loans under the Rural Economic Development Loan Act. 17	00	00	00	
18	Credit for Manufacturers of Small Wind Turbines18	00	00	00	
19	Credit for Qualified Ethanol Facilities19	Not Applicable	00	00	
20	Poultry Litter Credit20	00	Not Applicable	00	
21	Volunteer Firefighter Credit (enclose COFT's Form, see instructions on page 5)21	Not Applicable	00	00	
22	Credit for Qualified Biodiesel Facilities 22	Not Applicable	00	00	
23	Film or Music Project Credit (enclose Form 562) 23	Not Applicable	00	00	
24	Credit for Breeders of Specially Trained Canines 24	00	Not Applicable	00	
25	Credit for Wages Paid to an Injured Employee 25	Not Applicable	00	00	
26	Credit for Modification Expenses Paid for an Injured Employee	Not Applicable	00	00	
27	Dry Fire Hydrant Credit27	00	Not Applicable	00	
28	Credit for the Construction of Energy Efficient Homes	00	00	00	
29	Credit for Railroad Modernization	00		00	
30	Research and Development New Jobs Credit				
31	(enclose Form 563)	00	00	00	
51	(for banks & credit unions filing Form 512)	00	Not Applicable	00	
32		00	00	00	
33	Credit for Employees in the Aerospace Sector (enclose Form 564)	00	00	00	
34	Credits for Employers in the Aerospace Sector				
	(enclose Form 565)	Not Applicable	00	00	
35	Wire Transfer Fee Credit35	00	00	00	
36	Credit for Manufacturers of Electric Vehicles	00	Not Applicable	00	
37	Credit for Cancer Research Contribution37	00	00	00	
38 39	Oklahoma Capital Investment Board Tax Credit 38 Credit for Contributions to a Scholarship Grapting	Not Applicable	00	00	
29	Credit for Contributions to a Scholarship-Granting Organization	00	00	00	
40	Credit for Contributions to an Educational Improvement Grant Organization	00	00	00	
41				00	
- T 1	Total (add lines 1 through 40) Enter on the applicable line of income tax return and enter the	e number in the box for	the type of credit.		

If more than one credit is claimed, enter "99" in the box.