

			MA RESIDENT INCOME TAX	RETURN	2015	77
Your So	cial Sec	urity	Number Place an 'X' in this box if this taxpayer RETURN!			
Spouse	's Socia	l Sec	is deceased Place an 'X' in this box if this is an			
(joint retu			Place an 'X' in this amended 511. See Schedule			
			is deceased — 511-H.			
SS	Your first	name				
NAME AND ADDRESS PLEASE PRINT OR TYPE	If a joint	return,				
AND /	Mailing a	address				
NAME	City, Sta	te and	2IP	REQUIRED TO FILE	<i></i>	
				e an 'X' in this box if you do not home to require you to file a Federa		
	1 🗖	Sing	le 🔲	* NOTE: If claiming Special Exemption, see	instructions on page 7 of 511 Pack	et
<u>s</u>		_	ied filing joint return (even if only one had income)	REGULAR *SPECIAL BLIND	_	
STATUS			ried filing separate s is also filing, list Name:	Yourself + +	THE 4 BOXES	s.
FILING S			d SSN in the boxes: SSN:	SPOUSE + +	IN THE BOX BEI	LOW.
			ied filing separate is also filing, list d SSN in the boxes: d of household with qualifying person lifying widow(er) with dependent child		┤ [┺] ├─┤│ॿऻ	
L			list the year spouse died in box at right:	NUMBER OF DEPENDENT CHILDREN	NOTE: IF YOU M	PENDENT
AGE 6	5 or 0\	/ER?	(Please see instructions) Yourself Spouse	NUMBER OF OTHER DEPENDENTS	ON ANOTHER RE ENTER "O" FOR REGULAR EXEMF	YOUR
PAR	T ONI	Ξ: [TO ARRIVE AT OKLAHOMA ADJUSTED GROSS	INCOME	ound to Nearest Whole D	olla
If you a	re	1	Federal adjusted gross income (from Federal 1040	, 1040A, or 1040EZ) 1		00
not req		2	Oklahoma Subtractions (enclose Schedule 511-A)		00	
page 5 511 Pag		3	Line 1 minus line 2	· · · · · · · · · · · · · · · · · · ·		00
		4	Out-of-state income, except wages. Describe (4a)		00	
If line 7 differen	-	5	(Enclose Federal schedule with detailed description; see instructions) Line 3 minus line 4b			00
line 1, e		6	Oklahoma Additions (enclose Schedule 511-B)			00
your Fe		7	Oklahoma adjusted gross income (line 5 plus lin	_		00
	т Two	Ľ	OKLAHOMA TAXABLE INCOME, TAX AND CRED			00
Oklaho	ma	8	Oklahoma Adjustments (enclose Schedule 511-C)			00
Standa	- 1	9	Oklahoma income after adjustments (line 7 minus	line 8) 9		00
· Single		STO	PAND READ: If line 4b is zero, complete lines 10-11. If line 4b is a	nore than zero, see Schedule 511-D	and do not complete lines 1	0-11.
Married Separa	- I	10	Oklahoma standard deduction or Federal itemized	deductions 10		00
	66,300	11	Exemptions (\$1,000 x total number of exemptions	claimed above) 11		00
Marrie Filing J	- 1	12	Total deductions and exemptions (add lines 10 and 11 or	amount from Sch. 511-D, line 5) . 12		00
or Qual Widow(13	Oklahoma Taxable Income (line 9 minus line 12)			00
'	12,600	14	Oklahoma Income Tax from Tax Table (see pages 2: If using Farm Income Averaging, enter tax from Form 573, line 22 and enter			
· Head	nold:		If paying the Health Savings Account additional 10% tax, add additional tax	there and enter a "2" in box. 14_		00
\$	9,250	$\overline{}$	PAND READ: If line 7 is equal to or larger than line 1, complete		e 1, complete Schedule 511	
Itemize	- 1	15	Oklahoma child care/child tax credit (see instructio	<i>'</i>		00
Deduct Enclose	- 1	16	Credit for taxes paid to another state (enclose Form	· — -		00
of the F	- 1	17	Form 511CR - Other Credits Form. List 511CR line no			00
		18	Income Tax (line 14 minus lines 15-17) Do not en DO NOT PAY THIS AMOUNT. PAYMENT IS FIGURED ON LINE 4			00





Name(s) shown	
PART THREE: TAX, CREDITS AND PAYMENTS	
19 Total from line 18	00
20 Use tax due on Internet, mail order, or other out-of-state purchases	00
(For use tax table, see page 11 of the Packet) If you certify that no use tax is due, place an 'X' here:	
21 Balance (add lines 19 and 20)21	00
22 Oklahoma withholding (enclose all W-2s, 1099s or other withholding statements)22	
23 2015 estimated tax payments (qualified farmer)	
24 2015 payment with extension 00	
Low Income Property Tax Credit (enclose Form 538-H)	
26 Sales Tax Relief Credit (enclose Form 538-S)(see back of Form 538-S or	
511 Packet for further information)	
27 Natural Disaster Tax Credit (enclose Form 576)	
28 Oklahoma Earned Income Credit (see instructions)(If line 7 is equal to or more	
Oklahoma Earned Income Credit (see instructions)(If line 7 is equal to or more than line 1, complete line 28. If line 7 is smaller than line 1, complete Schedule 511-F. If you are not required to file, see "Not Required to File" on page 5 of the 511 Packet for instructions)	
29 Credits from Forma) 577b) 57829 00	
30 Amount paid with original return plus additional paid after it was filed	
(amended return only)	
Payments and credits (add lines 22-30)	00
32 Overpayment, if any, as shown on original return and/or prior amended return(s) or	\Box
as previously adjusted by Oklahoma (amended return only)	00
Total payments and credits (line 31 minus 32)	00
PART FOUR: REFUND	
For further 34 If line 33 is more than line 21, subtract line 21 from line 33. This is your overpayment . 34	00
information 35 Amount of line 34 to be applied to 2016 estimated tax	
regarding Coriginal return only)	
estimated tax, see page 5 of Schedule 511-G provides you with the opportunity to make a financial gift from your refund to a variety of Oklahoma	
the 511 Packet. organizations. Please place the line number of the organization from Schedule 511-G in the box below. If you give to	
more than one organization, put a "99" in the box. Enclose Schedule 511-G.	
Donations from your refund (total from Schedule 511-G) 36 00	
Total deductions from refund (add lines 35 and 36)	00
Amount to be refunded to you (line 34 minus line 37)	00
Direct Deposit Note: Is this refund going to or through an account that is located outside of the United States?	1
	No
Verify your account and routing numbers are correct. If your direct deposit Deposit my refund in my:	
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	\neg
deposit and debit card information.	
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
If you have an underpayment 40 Donation: Public School Classroom Support Fund (original return only)	00
of estimated 41 Underpayment of estimated tax interest	
tax (line 41) & (annualized installment method)	00
overpayment (line 34), see 42 For delinquent payment add penalty of 5%	
(instructions.) plus interest of 1.25% per month\$42	00
Total tax, donation, penalty and interest (add lines 39-42)	00
Under papelly of partium I dealers the information contained in this decument, and all	
Under penalty of perjury, I declare the information contained in this 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 knowledge and belief. may discuss this return with your tax preparer	
Taxpayer's signature Date)
Taxpayer's signature Date Spouse's signature Date Paid Preparer's signature Date	,
	·
Taxpayer's signature Date Spouse's signature Date Paid Preparer's signature Date Paid Preparer's address and phone number	-

<u>DO NOT STAPLE</u> 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.

2015 Form 511 - Resident Income Tax Return - Page 3 NOTE: Enclose this page <u>ONLY</u> if you have an amount shown on a schedule.



	SCHEDULE 511-A Oklahoma Subtractions See instructions for detail qualifications and required	ls on d enclosures.
1	Interest on U.S. government obligations	00
2	Social Security benefits taxed on your Federal Form 1040 or 1040A 2	00
3	Federal civil service retirement in lieu of social security 3	00
	Retirement Claim Number: Taxpayer Spouse	
4	Military Retirement (see instructions for limitation) 4	00
5	Oklahoma government or Federal civil service retirement (see instructions for limitation) 5	00
6	Other retirement income 6	00
7	U.S. Railroad Retirement Board benefits 7	00
8	Oklahoma depletion 8	00
9	Oklahoma net operating lossLoss Year(s)	00
10		00
11	Gains from the sale of exempt government obligations	00
12	Oklahoma Capital Gain Deduction (enclose Form 561)	00
13	Miscellaneous: Other subtractions (enter number in box for type of deduction) . 13	00
14	Total subtractions (add lines 1-13, enter total here and on line 2 of Form 511) 14	00
	SCHEDULE 511-B Oklahoma Additions See instructions for details on qualifications and required enc	losures.
1	State and municipal bond interest	00
2	Out-of-state losses (describe) Enter as a positive number . 2	00
3	Lump sum distributions (not included in your Federal Adjusted Gross Income) 3	00
4	Federal net operating loss - Enter as a positive number	00
5	Recapture of depletion claimed on a lease bonus or add back of excess Federal depletion 5	00
6	Recapture of Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account(s) 6	00
7	Miscellaneous: Other additions (enter number in box for type of addition)	00
8	Total additions (add lines 1-7, enter total here and on line 6 of Form 511) 8	00
	SCHEDULE 511-C Oklahoma Adjustments See instructions for detail qualifications and require	ls on d enclosures.
1	Military pay exclusion - Active Duty, Reserve and National Guard (not retirement income) 1	00
2	Qualifying disability deduction	00
3	Qualified adoption expense	00
4	Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account(s) 4	00
5	Deduction for providing foster care5	00
6	Miscellaneous: Other adjustments (enter number in box for type of deduction) 6	00
7	Total adjustments (add lines 1-6, enter total here and on line 8 of Form 511)	00

2015 Form 511 - Resident Income Tax Return - Page 4
NOTE: Enclose this page ONLY if you have an amount shown on a schedule.

NOTE: Enclose this page ONLY if you h	ave an amount shown on a schedule.		
Name(s) shown on Form 511:		Your Social Security Number:	
SCHEDULE 511-D	Deductions and Exe See instructions for details on qualificat		osures.
ratio of Oklahoma Adjusted Gross Income	n out-of-state (Form 511, line 4). Your exemptions to Federal Adjusted Gross Income reduced by a ome on Form 511, line 4, do not use this schedu	allowable adjustments exc	cept out-of-state
2 Exemptions (\$1,000 x number of	Federal itemized deductions claim exemptions claimed at top of Form 511)	2	00 00 00
4 Divide the amount on line 7 of Fo	orm 511 by the amount on line 3 of Form 51	1	
Enter the percentage from the ab	DOVE CALCULATION here (do not enter more than 10	0%) 4	%
5 Total allowable deductions and	d exemptions (multiply line 3 by percentage form 511) (Leave lines 10 and 11 of Form 511	on line 4,	00
SCHEDULE 511-E	Child Care/Child Tax	Credit	
If your Federal Adjusted Gross Income is \$	See instructions for details on qualificates 100,000 or less and you are allowed either a cruyed a credit against your Oklahoma tax. Your Ok	edit for child care expense	es or the child tax
 20% of the credit for child care Your allowed Federal credit can or 5% of the child tax credit allowed 	expenses allowed by the IRS Code. anot exceed the amount of your Federal tax reported by the IRS Code.	orted on your Federal retu	
	ndable child tax credit and the refundable additio ratio of Oklahoma Adjusted Gross Income to Fe		omo
•	greater than \$100,000, no credit is allowed.	derai Adjusted Gross inco	ine.
·	, if applicable, the Federal child care credit sche	dule.	
1 Enter your Federal child <u>care</u> cre 2 Multiply line 1 by 20%	edit 1	00	
3 Enter your Federal child <u>tax</u> cred (total of child tax credit & addition 4 Multiply line 3 by 5%	lit nal child tax credit)3	00	
		5	00
	orm 511 by the amount on line 1 of Form 51		
	:		
Enter the percentage from the ab	oove calculation here (do not enter more than 1	00%) 6	%
	our Oklahoma child care/child tax credit.	7	00
SCHEDULE 511-F	Earned Income Cred		details on
You are allowed a credit equal to 5% of the ratio of Oklahoma Adjusted Gross Income	e Earned Income Credit allowed on your Federal to Federal Adjusted Gross Income. Enclose a coon page 5 of the 511 Packet for instructions.	return. The credit must b	e prorated on the
· · · · · · · · · · · · · · · · · · ·		1	00
2 Multiply line 1 by 5%		2	00
Divide the amount on line 7 of Fo	orm 511 by the amount on line 1 of Form 51	1	
Enter the negrounts as from the call	oove calculation have (1		%
4 Oklahoma earned income credit.	pove calculation here (do not enter more than 1		
(multiply line 2 by line 3 enter to	tal here and on line 28 of Form 511)		00

2015 Form 511 - Resident Income Tax Return - Page 5
NOTE: Enclose this page ONLY if you have an amount shown on a schedule or are filing an amended return.

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 Public School Classroom Support Fund, please 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.

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 Öklahoma	\\$2	\$5	\$	3	00
4	Support of Domestic Violence and Sexual					
	Assault Services	\\$2	\\$5	\$	4	00
5	Support of Volunteer Fire Departments	\$2	\$5	\$	5	00
6	Oklahoma Lupus Revolving Fund	\$2	\$5	\$	6	00
7	Oklahoma Sports Eye Safety Program	\$2	\$5	\$	7	00
8	Historic Greenwood District Music Festival Fund	\$2	\$5	\$	8	00
9	Public School Classroom Support Fund	\$2	\$5	\$	9	00
10	Total donations (add lines 1-9, enter total here	and on li	ne 36 of F	orm 511).	10	00
	· · · · · · · · · · · · · · · · · · ·			<u> </u>		
S	chedule 511-H: Amended Return	Infor	mation			
Did y	ou file an amended Federal return? Yes	No 📗				
f Voc	, enclose a copy of the IRS Form 1040X or 1045 AND	اسا	the "States	mont of Adiu	iotmont" IDC abook or i	donocit alin IDC
	nents submitted after filing this Oklahoma amended re				istilient, ind theth of t	deposit slip. Ino
	· ·	-		•		
	in the changes to income, deductions, and/or credits t	below. Ent	er the line r	reterence ni	umber for which you are	renomina a change
- ha	ive the reason If mare energic panded analogs are	narata aak	a a duula		,	reporting a change
and g	ive the reason. If more space is needed, enclose a se	parate sch	nedule.		,	reporting a change
and g	ive the reason. If more space is needed, enclose a se	parate sch	nedule.		,	reporting a change
and g	ive the reason. If more space is needed, enclose a se	parate sch	nedule.			Toporting a change
and g	ive the reason. If more space is needed, enclose a se	parate sch	nedule.			Toporting a change
and g	ive the reason. If more space is needed, enclose a se	parate sch	nedule.			oreporting a change
and g	ive the reason. If more space is needed, enclose a se	parate sch	nedule.			
and g	ive the reason. If more space is needed, enclose a se	parate sch	nedule.			
and g	ive the reason. If more space is needed, enclose a se	parate sch	nedule.			
and g	ive the reason. If more space is needed, enclose a se	parate sch	nedule.			Toporting a change

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 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.

5- 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.

6- 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.

7- 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.

8 - 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.

9 - 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

CLAIM TON CHEL	<i>/</i>		<u> </u>) 1 /-	IA					
Taxpayer Social Security Number		If died in 2015 or 2016, enter date of death: →		Please	ctions on p	efully as II La ` J J J L T				
Spouse's Social Security Number		If died in 2015 or 2016, enter date of death: ▶		an inco	omplete fo by your ref	orm may \bigcirc				
Taxpayer first name, middle initial and last name				PART	1: TAX	KPAYER INFORMATION				
					Physical address in 2015 (if different than shown in mailing address section)					
Spouse's first name, middle initial and last name (if	a joint return)									
Mailing address (number and street, including apart	ment number	or rural route)		Place an 'X' if you or your spouse have a physical disability constituting a substantial handicap to employment (submit proof)						
			Place an 'X' if you or your spouse are 65 years of age or over							
City, State and ZIP	┝	Oklahoma resident for the entire year? yes no								
PART 2: DEPENDENT Note:	Do not e	ntor the taynayer or enouge a	a denen	dent		EXEMPTION INFORMATION				
	. Do not e	The the taxpayer of spouse as	a depen	uent.		QUALIFIED EXEMPTIONS				
1. Dependents (first name, middle initial, last name) If you have		See Instructions			5.Yearly	[A. 10015611				
additional dependents, please attach schedule.	2. Age 3	. Social Security Number	4. Relati	ionship	Income	┥ —				
						B. Spouse				
						C. Number of your dependent children				
						D. Number of other				
			1			dependents				
						E. Total exemptions				
						claimed (add A-D)				
PART 3: GROSS INCOME:	Enter taxab	e and nontaxable gross income an	d assistan	ce receiv	ed by ALL m	nembers of your household in the year 2015.				
See "Total gross household income"	definitio	n on page 2 for examples of in	come.		[Yearly Income				
1. Enter total wages, salaries, fee						You may not enter negative amounts.				
(including nontaxable income					- 1	1 00				
 Enter total interest and dividen Total of all dependents' income 						2 00				
3. Total of all dependents' income4. Social Security payments (total	-				г	4 00				
5. Railroad Retirement benefits						5 00				
6. Other pensions, annuities and					Г	6 00				
7. Alimony						7 00				
8. Unemployment benefits						8 00				
9. Earned Income Credit (EIC) re	ceived in	2015				9 00				
10. Nontaxable sources of income						10 00				
11. Enter gross (positive) income f						You may not enter negative amounts. 11 00				
from the sale or exchange of p 12. Enter gross (positive) income				-		11 00 12 00				
13. Other income-including income				g scriedule	-,	13 00				
14. Total gross household incom						14 00				
If line 14 is over income limits sl	•	•				100				
PART 4: SALES TAX CREE	OIT COM	IPUTATION (For households	with gross	income b	elow allowa	able limits, see steps 2 and 3 on back of form.)				
15. Total qualified exemptions clair	med in Bo	ox E above x \$4	0 (credit	claime	d)[15 00				
DIRECT DEPOSIT OPTION:		NOT filing a Form 511. 2 for Refund Information.		If you	are filing a l	Form 511, carry the credit to Form 511, line 2				
Is this refund going to or through an	<u> </u>	my refund in my: Routing Number:								
account that is located outside of the United States?		ecking account								
Yes No		rings account Number:								
Under penalty of perjury, I declare the information contained in Taxpayer's Signature and Date	this document a	Spouse's Signature and Date	f my knowledge	and belief.	If the	e Oklahoma Tax Commission may discuss this return with your tax preparer, place an 'X' here:				
					Prepar	urer's Signature and Date				
Occupation		Occupation								

NOTICE

- Persons who have received TANF (Temporary Assistance for Needy Families) for any month in the year of 2015 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, 2015 to December 31, 2015.

FORM 538-S INSTRUCTIONS

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

Step 1 Were you a resident of Oklahoma* (defined below) for the entire year?

Yes (go to step 2)

No (you do not qualify to file this form)

Step 2 Is your total gross household income* (defined below) \$20,000 or less?

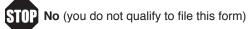
Yes (File Form 538-S)

STOP No (go to step 3)

Step 3
 Is your total gross household income* (defined below) \$50,000 or less and at least one of the following applies?
 You can claim an exemption for your dependent.

- You and/or your spouse are 65 years of age or older by 12/31/2015.
- You have a physical disability constituting handicap to employment (provide proof* as defined in the section below)





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, 2015, 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.

<u>Proof of disability</u> 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 April 18th. (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 <u>June 30</u>. 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.



Name as shown on return:



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

			Federal Emplo			
Ente	er in Column A all unused carryover credits established	d in pri	or tax years b	out	not used in any prio	r tax year.
to yo	er in Column B all credits established this tax year. This on a filed transfer agreement (Form 572) which may be claimed over multiple years and you are claiming the tredit for Qualified Ethanol Facilities).	be cla	aimed this tax	ye	ar; and a credit, that	once established,
	ention members of pass-through entities: Enter you for the type of credit. For example: Your share of the page 1					
	instructions for details on qualifications and uired enclosures.	Carri	A used Credit ied Over from rior Year(s)		B Credit Established During Current Tax Year	<u>C</u> Total Available Credit (A + B = C)
1	Oklahoma Investment/New Jobs Credit (enclose Form 506)		00	1	00	00
2	Coal Credit		00	2	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]		
3а	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] 3a	00	00
3b	Credit from Form 567-A, Part 4, line 4		00	3b	00	00
4	Credit for Investment in Qualified Electric Motor Vehicle Property (placed in service before July 1, 2010)		00	4	Not Applicable	00
5	Small Business Capital Credit (enclose Form 527-A)		00	5	Not Applicable	00
6	Oklahoma Agricultural Producers Credit (enclose Form 520)		00	6	Not Applicable	00
7	Small Business Guaranty Fee Credit (enclose Form 529)		00	7	00	00
8	Credit for Employers Providing Child Care Programs		00	8	Not Applicable	00
9	Credit for Entities in the Business of Providing Child Care Services		00	9	00	00
10	Credit for Commercial Space Industries		00	10	Not Applicable	00
11	Credit for Tourism Development or Qualified Media Production Facility		00	11	Not Applicable	00
12	Oklahoma Local Development and Enterprise Zone Incentive Leverage Act Credit		00	12	Not Applicable	00
13	Credit for Qualified Rehabilitation Expenditures		00	13	00	00
14	Rural Small Business Capital Credit (enclose Form 526-A)		00	14	Not Applicable	00

Social Security Number:

-OR-

2015 Form 511CR - Page 2 OTHER CREDITS FORM



Nam	e as shown on return:	Social Security/Federal Employer Identification Number:				
		A Unused Credit Carried Over from Prior Year(s)		B Credit Established During Current Tax Year	C Total Available Credit (A + B = C)	
15	Credit for Electricity Generated by Zero-Emission Facilities	00	15	00	00	
16	Credit for Financial Institutions Making Loans under the Rural Economic Development Loan Act	00	16	00	00	
17	Credit for Manufacturers of Small Wind Turbines	00	17	00	00	
18	Credit for Qualified Ethanol Facilities	Not Applicable	18	00	00	
19	Poultry Litter Credit	00	19	Not Applicable	00	
20	Volunteer Firefighter Credit (enclose COFT's Form, see instructions on page 5)	Not Applicable	20	00	00	
21	Credit for Qualified Biodiesel Facilities	Not Applicable	21	00	00	
22		00	22	Not Applicable	00	
23	Credit for Modification Expenses Paid for an Injured Employee	Not Applicable	23	00	00	
24	Dry Fire Hydrant Credit	00	24	Not Applicable	00	
25	Credit for the Construction of Energy Efficient Homes	00	25	00	00	
26	Credit for Railroad Modernization	00	26	00	00	
27	Research and Development New Jobs Credit (enclose Form 563)	00	27	00	00	
28	Credit for Stafford Loan Origination Fee (for banks & credit unions filing Form 512)	00	28	Not Applicable	00	
-	Credit for Biomedical Research Contribution	00	29	00	00	
30	Credit for Employees in the Aerospace Sector (enclose Form 564)	00	30	00	00	
31	Credits for Employers in the Aerospace Sector (enclose Form 565)	Not Applicable	31	00	00	
32	Wire Transfer Fee Credit	00	32	00	00	
33	Credit for Manufacturers of Electric Vehicles	00	33	Not Applicable	00	
34	Credit for Cancer Research Contribution	00	34	00	00	
35	Oklahoma Capital Investment Board Tax Credit	Not Applicable	35	00	00	
36	Credit for Contributions to a Scholarship-Granting Organization	00	36	00	00	
37	Credit for Contributions to an Educational Improvement Grant Organization	00	37	00	00	
38	Credit for Venture Capital Investment (enclose Form 518-A or 518-B)	00	38	00	00	
39	Total (add lines 1 through 38)	ne number in the box	for	39 the type of credit.	00	