Do not mail this form with your income tax return.

Oklahoma Tax Commission



INJURED SPOUSE CLAIM AND ALLOCATION

Name(s) shown on return	Y	our Social Securit	y Number			
ADE VOU AN INJURED CROUGE?						
ARE YOU AN INJURED SPOUSE?						
Is your share of the overpayment, shown on your joint retu Tax Commission liability? Yes No	rn, being applied aga	unst your spot	ise's Okianoma			
Note: 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 , STOP! Do not complete this form. You must claim your refund by contacting the agency to which your refund was applied. If the other agency requests you complete Form 505, mail this form to that agency and NOT to the Oklahoma Tax Commission.						
If you answered yes, you may file this form to claim your	part of the refund if a	II three of the	following apply:			
 ✓ You are not required to pay your spouse's Oklahoma Tax Commission liability. ✓ You received and reported income (such as wages, taxable interest, etc.) on the joint return. ✓ 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. 						
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 and mail to: *	e applied to a debt ot	her than your	own, file Form 505			
Oklahoma Tax C	Commission					
Account Maintena Post Office Bo						
Oklahoma City, Ok						
Note: 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.						
* If you are completing Form 505 for another agency, mail this form to that agency and NOT to the Oklahoma Tax Commission.						
PART 1: INFORMATION ABOUT THE JOINT TAX	RETURN FOR WI	HICH THIS (CLAIM IS FILED			
1. Enter the following information exactly as it	is shown on the t	ax return fo	r which you are			
filing this claim. The spouse's name and soc return must also be shown first below.			•			
First name, initial, and last name shown first on the return	Social security number sh	nown first	njured Spouse			
		1	eck here			
First name, initial, and last name shown second on the return	Social security number sho		njured Spouse eck here			
2. Enter the tax year for which you are filin	g this claim: _					
3						
Current home address City		State	ZIP			
Is the address on your joint return different from	your current addre	ess (line 3)?	☐ Yes ☐ No			

Name(s) Your Social	
shown Security on return: Number:	

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<u>90:</u>	
	ew.

PART 2: ALLOCATION BETWEEN SPOUSES OF ITEMS ON THE JOINT TAX RETURN							
	Allocated Items	(a) Amount Shown on Joint Return		cated to Spouse	(c) Allocated to Other Spouse		
Allocate jo account, a shown 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 all income the joint return.						
	name Identify the time and emprish						
b All other I	ncome. Identify the type and amount:						
•	ents to income. Enter each spouse's separate ad-						
•	, such as an IRA deduction. Allocate other adjust- you determine	T					
7. Adjustme Enter eac military p	ch spouse's separate adjustments, such as a ay exclusion. Allocate other adjustments as you						
	a Standard deduction. If you itemized your deduc-						
	to line 9. Otherwise, enter in both columns (b) and						
	the amount shown in column (a) and go to	T					
	deductions. Enter each spouse's separate deduc-						
	h as employee business expenses. Allocate other						
	s as you determine						
	of exemptions. Allocate the exemptions claimed on						
	eturn to the spouse who would have claimed them						
•	e returns had been filed. Enter whole numbers only						
	ple, you cannot allocate 3 exemptions by giving otions to each spouse)						
	Allocate credits to the spouse who had the business						
	ome. Allocate any child care/child tax credit or sales						
tax relief	credit claimed for a dependent to the spouse who						
	allocated the dependent's exemption. Allocate any	<u> </u>					
	dits as you determine						
	a income tax withheld. Enter Oklahoma income eld from each spouse's income as shown on Forms						
	1099s. Be sure to enclose copies of these forms						
	n 505						
	s. Allocate joint estimated tax payments as you	<u> </u>					
determine	9						
Note: Th	ne Oklahoma Tax Commission will figure the amount	of any refund due th	e injured sp	ouse.			
PART III.	SIGNATURE						
Under penalties	of perjury, I declare I have examined this form and any according to the correct, and complete. Declaration of preparer (other than						
Keep a copy of this form for	Injured Spouse's		Date		Number (optional)		
your records	Signature: Preparer's	Date	Check if	(Prepare) r's PTIN		
Paid Preparer's	Signature:		self-employed				
Use Only	Firm's name (or yours if self-employed) and			Zin Code			