Form 511 2019



Oklahoma Resident Income Tax Return

Your	Soc	cial Security Number Place an 'X		AMENDED					
		box if this t is decease		RETURN!					
Spou	se's	Social Security Number		Place an 'X' in this box if this is an					
(joint r	etur	n only) Place an 'X		amended 511. See Schedule					
		box if this t is decease		511-l. -					
	1)	Your first name Middle in	itial Last nam	e					
ess	yp								
dg [20	If a joint return, spouse's first name Middle in	itial Last nam	e					
Name and Address	Ĭ								
an	7	Mailing address (number and street, including a	apartment nun	nber, rural route or PO Box)					
me	ase		1-		* NOTE: I	f claiming Sr	pecial Exemption, see instru	uctions on page	6 of 511 Packet
Na	<u> </u>	City	State	ZIP	11012	olaining o l	•	Blind	
						Yourself	- Openin		(2)
					Jus	Toursen	+ +		(a)
	1	Single			Exemptions	0			(b)
,	2	Married filing joint return (eve	en if only o	ne had income)	pt	Spouse	+ +	$\Box\Box$	
ıtrı	3				٤		Number of depende	ents 🗏	(c)
Filing Status		Il spouse is also lilling, list	me:		×				
ing		name and SSN in the boxes			Ш	Add the T	otals from boxes (a), (b) an	` '	
匝		SSI	N:				Enter the TOTAL I	here:	
							claimed as a dependent of	on another retu	rn, enter "0" in the
	4	Head of household with qua			Total box	k for your re	gular exemption.		
	5	Qualifying widow(er) with de	pendent ch	nild					
		 Please list the year spouse died 	d in box at	right:	Age 65	or Over?	(Please see instructions)	Yoursel	f Spouse
ΡΔ	RT	ONE: TO ARRIVE AT OKL	ΔΗΟΜΔ	ADJUSTED GR	OSS INC	OME			
									earest Whole Dollar
1		ederal adjusted gross income (from							.00
2		klahoma Subtractions (provide Sche		•					.00.
3		ne 1 minus line 2						3	.00
4	(D	ut-of-state income, except wages. I rovide Federal schedule with detailed d	Describe (4	a)			11		.00
5		ne 3 minus line 4b							.00
6		klahoma Additions (provide Schedu							.00
		VI	,						.00.
7	U	klahoma adjusted gross income ((If line 7 is different than line 1, pr	ovide a co	ppy of your Federal r	eturn.)			/	.00
PAI		TWO: OKLAHOMA TAXAE							
8		klahoma Adjustments (provide Sche						3	.00
-		klahoma income after adjustments (.00
$\overline{}$		D READ: If line 4b is zero, complete lines	`	,					
10		klahoma itemized deductions (from							
		(Single or Married Filing Separate Head of Household: \$9,350)						n .	.00
11		emptions: Enter the total number o					1		.00
12		tal deductions and exemptions (add							.00
13		klahoma Taxable Income (line 9 min				,			.00
14		Oklahoma Income Tax from Tax Table	,						
		enter tax from Form 573, line 22 and	enter a "1"	in box on line 14			.00 14	а	
(b) If paying the Health Savings Account additional 10% tax, add additional tax here and enter a "2" in box on line 14. If recapturing the Oklahoma Affordable Housing									
		Tax Credit, add recaptured credit her	e and enter	a "3" in box on line 14	1. If making				
		an Oklahoma installment payment po 2368(K), add the installment paymen	ursuarii to II it here and e	กบ อยนแบก ขอ5(n) and enter a "4" in the box c	ວວ ປ.ວ. 5e n line 14		.00 14	b	
	0	klahoma Income Tax (line 14a plus I							.00
STOP		D READ: If line 7 is equal to or larger than line	,						.30
15		klahoma child care/child tax credit (.00
16		klahoma earned income credit (see		•					.00
17		redit for taxes paid to another state		•					.00
18		orm 511CR - Other Credits Form. Li		,					.00
19		come Tax (line 14 minus lines 15-18							.00
.5		DO NOT PAY THIS AMOUNT. PAY	,						

2019 Form 511 - Resident Income Tax Return - Page 2

The Oklahoma Tax Commission is not required to give actual notice to taxpayers of changes in any state tax law.



	e(s) shown orm 511:			Your Social Security Numb	per:
PA	RT THREE: TAX, CREDITS AND PAYMI	ENTS			
20	Total from line 19			20	.00
21		out-of-state purchases		21	.00
	(For use tax table, see page 11 of the Packet	t) If you certify that no use tax is due, place an '〉	(' here:		
22	,			22	.00
23	Oklahoma withholding (provide all W-2s, 1099s	s or other withholding statements) 23		.00	
24	2019 estimated tax payments (qualit	fied farmer) 24		.00	
25	2019 payment with extension			.00	
26	Low Income Property Tax Credit (provide For			.00	
27	Sales Tax Relief Credit (provide Form 538-S)	27		.00	
28	Natural Disaster Tax Credit (provide Form 57			.00	
29	Credits from Form			.00	
30	Amount paid with original return plus additio	·		00	
	(amended return only)			.00	
31	- ,			31	.00
32	Overpayment, if any, as shown on original re			00	
		led return only)			.00
33	Total payments and credits (line 31 minus 3	32)		33	.00
РΑ	RT FOUR: REFUND				
34		2 from line 33. This is your overpayment		34	.00
35	Amount of line 34 to be applied to 2020 esting	` 3			l
	(For further information regarding estimated	tax, see page 4 of the 511 Packet.) 35to make a financial gift from your refund to a va		.00	
36	than one organization, put a "99" in the box. Donations from your refund (total from Sched	dule 511-H)36		.00	00
37	,	nd 36)s line 37)			.00.
50	Amount to be relatided to you (line 54 minus	s line 37)			.00
Di		fund going to or through an account that is locate	ed outside o	of the United	States? Yes No
	y your account and routing numbers Deposit	t my refund in my:			
to p	rocess or you do not choose direct Cho	ecking account Routing Number:			
	osit, you will receive a <u>debit card</u> . the 511 Packet for direct deposit and	Account			
	it card information.	vings account Number:			
PA	RT FIVE: AMOUNT YOU OWE				
39		2 from line 22. This is very tay due		20	00
40		3 from line 22. This is your tax due			.00
40	b) Donation: Public School Classroom Support			.00	
44					.00
41	• •	nualized installment methodax (line 41) & overpayment (line 34), see instruc)41	.00
42		\$			
		\$.00
43		I lines 39-42)			.00
	penalty of perjury, I declare the information contained in this ments and schedules, is true and correct to the best of my kn				
Taxpa	yer's signature Date	Spouse's signature Date	Paid Prep	parer's signature	Date
Taxpa		Spouse's occupation	Paid Prep	parer's address a	nd phone number
Daytir (optio	ne Phone nal)	Daytime Phone (optional)	Paid Prep	parer's PTIN	

2019 Form 511 - Resident Income Tax Return - Page 3 NOTE: Provide this page <u>ONLY</u> if you have an amount shown on a schedule.



Name(s) shown

	e(s) shown orm 511:	1	r Social curity Number:		
S	chedule 511-A: Oklahoma Subtractions See instru	uctic red	ons doc	for details ouments.	on qualifications
1	Interest on U.S. government obligations			. 1	.00
2	Social Security benefits taxed on your Federal Form 1040 or 1040-SR	.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 (see instructions for limitation)			. 6	.00
7	U.S. Railroad Retirement Board benefits			.7	.00
8	Oklahoma depletion			.8	.00
9	Oklahoma net operating loss (provide schedules)Loss Year(s)]	.9	.00
10	, , , , , , , , , , , , , , , , , , , ,				.00
11	Gains from the sale of exempt government obligations				.00
12	Oklahoma Capital Gain Deduction (provide Form 561)				.00
13	Income Tax Refund (Federal Form 1040 or 1040-SR, Schedule 1, line 1)		·	13	.00
14	Oklahoma income distributed by an electing PTE		······ ·	14	.00
15	Miscellaneous: Other subtractions (enter number in box for type of deduction)			15	.00
16	Total subtractions (add lines 1-15, enter total here and on line 2 of Form 511)	16	.00.		
S	chedule 511-B: Oklahoma Additions See instruction required documents	s for nent	r de s.	tails on qua	lifications and
1	State and municipal bond interest			.1	.00
2	Out-of-state losses (describe) Enter as a positive nu	umbe	er	.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			4	.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 Acc	count	t(s)	. 6	.00
7	Oklahoma loss distributed by an electing PTE			.7	.00
8	Miscellaneous: Other additions (enter number in box for type of addition)			8	.00
9	Total additions (add lines 1-8, enter total here and on line 6 of Form 511)			.9	.00
S	chedule 511-C: Oklahoma Adjustments See instructive delication in the control of	tion	s fo	or details on ts.	qualifications and
1	Military pay exclusion - Active Duty, Reserve and National Guard (not retirement income)			. 1	.00
2	Qualifying disability deduction			.2	.00.
3	Qualified adoption expense			.3	.00
4	Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account(s)			. 4	.00
5	Deduction for providing foster care			.5	.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)			. 7	.00

2019 Form 511 - Resident Income Tax Return - Page 4 NOTE: Provide this page ONLY if you have an amount shown on a schedule.



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

Schedule 511-D: Oklahoma Itemized Deductions See instructions for details on qualifications and required documents.

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	.00.	
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)	.00.	
3	Line 1 minus line 2	3	.00
4	Medical and Dental expenses from Federal Sch. A, line 4	.00	
5	Gifts to Charity from Federal Sch. A, line 145	.00	
6	Line 3 minus lines 4 and 5	6	.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 1	1.	
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 4	9	.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.

Schedule 511-E: Deductions and Exemptions See instructions for details on qualifications and required documents.

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)	.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	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 - 11 of Form 511 blank)	.00

2019 Form 511 - Resident Income Tax Return - Page 5 NOTE: Provide this page ONLY if you have an amount shown on a schedule.



Name(s) shown on Form 511:		Your Social Security Number:
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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.
If yo	credit must be prorated based on the ratio of Oklahoma Adjusted Gross Income to Federal Adjusted Gross Income is greater than \$100,000, no credit is allowed. vide a copy of your Federal return and, if applicable, the Federal child care credit schedule.	ljusted Gross Income.
1	Enter your Federal child <u>care</u> credit	00
2	Multiply line 1 by 20%	00
3	Enter your Federal child tax credit (total of child tax credit & additional child tax credit)	00
4	Multiply line 3 by 5%	00
5	Enter the larger of line 2 or line 4	5
6	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%)	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	7
S	chedule 511-G: Earned Income Credit See instructions for required documents.	details on qualifications and
	are allowed a credit equal to 5% of the Earned Income Credit allowed on your Federal return. of Oklahoma Adjusted Gross Income to Federal Adjusted Gross Income. Provide a copy of your	
1	Federal earned income credit	100
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 (multiply line 2 by line 3, enter total here and on line 16 of Form 511)	4



	ne(s) shown Form 511:				Your Social Security Number:	
S	Schedule 511-H: Donations from	n Ref	fund (Original re	turn only)	
pro a re mai	s schedule allows you to make a donation from your refugram, its mission, how funds are utilized, and mailing additund, but would like to make a donation to one of these I your donation to the organization. If you are not receiving or Public School Classroom Support Fund, see line 40	dresses a organiza ng a refui	are shown tions, Sche nd and wis	in Schedule edule 511-H h to donate	511-H Information. If you Information lists the ma	ou are not receiving iling address to
org list	ce an 'X' in the box associated with the dollar amount you anization. Then carry that figure over into the column at the line number of the organization to which you donated at line 36 of Form 511.	he right.	When you	carry your f	gure back to line 36 of I	Form 511, please
See	Packet 511, pages 19 and 20 for Schedule 511-H Inform	nation.				
1	Support of Programs for Volunteers to Act as Court Appointed Special Advocates	Φ0	Φ.			.00
2	for Abused or Neglected Children	\$2 \$2	\$5 \$5	\$	1	.00.
3	Support the Oklahoma General Revenue Fund	\$2	\$5	\$	3	.00.
4	Oklahoma Emergency Responders Assistance Program	\$2	\$5	\$	4	.00
5	Support of Folds of Honor Scholarship Program	\$2	\$5	\$	5	.00
6	Support Wildlife Diversity Fund	\$2	\$5	\$	6	.00
7	Support of Programs for Regional Food Banks	Φ0	ΦE	()	7	.00
8	in Oklahoma Public School Classroom Support Fund	\$2 \$2	\$5 \$5	\$ \$	7	.00.
9	Oklahoma Pet Overpopulation Fund	\$2	\$5	\$	9	.00.
10	Support the Oklahoma AIDS Care Fund	\$2	\$5	\$	10	.00
11	Total donations (add lines 1-10, enter total here and on line 3	6 of Form	511)		11	.00
C	Schedule 511-I: Amended Retu	ırn İn	form	otion		
2	chedule 511-1. Amended Retu	Irri III	IIOIIII	ation		
Did	you file an amended Federal return? Yes		lo			
	es, provide a copy of the IRS Form 1040X or 1045 AND pustment," IRS check or deposit slip. IRS documents sub					
	lain the changes to income, deductions, and/or credits but nge and give the reason. If more space is needed, provide				umber for which you ar	e reporting a

State of Oklahoma Claim for Crodit/Pofund of



Claim for Cre	ait/F				IX	
Taxpayer's Social Security Number:		If died in 2019 or 2020 enter date of death:),	Instru	ctions on	page 2. Efully as orm may 538-S
Spouse's Social		If died in 2019 or 2020),	an inco	omplete fo	page 2. Efully as C 538-S
Security Number:		enter date of death:		dela	ay your re	fund.
Taxpayer's first name, middle initial and last name)			DART	1. TAY	PAYER INFORMATION
Spouse's first name, middle initial and last name	(if a joint return)					19 (if different than shown in mailing address section)
opedes s mot name, made mila and last name,	a jo rota,			l Triyolcar e	address III 20	10 (ii dilielent tilan shown in mailing address section)
Mailing address (number and street, including apa	artment number,	or rural route)				
						you or your spouse have a physical disability substantial handicap to employment (submit proof)
					nistituting a s	abstantial nandicap to employment (submit proof)
City, State and ZIP				L Pla	ace an 'X' if	you or your spouse are 65 years of age or over
				Oklahar	ma rasidant	t four the centiles years?
				Uklarioi	ma resident	for the entire year? yes no
PART 2: DEPENDENT Note:	Do not ente	er the taxpayer or sp	oouse as a	dependent.		EXEMPTION INFORMATION
1. Dependents		See Instru			l	QUALIFIED EXEMPTIONS
(first name, middle initial, last name) If you have	2. Age 3.	Social Security Nun		4. Relationship	5.Yearly Income	
additional dependents, please attach schedule.	2. Age 3.	Social Security Nun	nber	4. Relationship	Income	A. Yourself
						C. Number of
						dependents
						D. Total exemptions
						claimed (add A-C)
PART 3: GROSS INCOME: E	inter taxable	and nontaxable gross i	ncome and as	sistance received	d by ALL me	embers of your household in the year 2019.
Gee "Total gross household income	" definition	on page 2 for exam	ples of inco	me.		YEARLY INCOME
1 Enter total wages, salaries, fe						You may not enter negative amounts.
(including nontaxable incom-	•	•				.00
2 Enter total interest and divide						.00
3 Total of all dependents' incor	-	·				.00
4 Social Security payments (tot 5 Railroad Retirement benefits		-				.00
6 Other pensions, annuities and						.00
7 Alimony						.00
8 Unemployment benefits						.00
9 Earned Income Credit (EIC) re	eceived in a	2019			9	.00
Nontaxable sources of incom					10	.00
11 Enter gross (positive) income	from renta	ls, royalties, partne	rships, esta	tes & trusts, a	nd gains	YOU MAY NOT ENTER NEGATIVE AMOUNT
from the sale or exchange of						.00
Enter gross (positive) income				-		.00
Other income-including income Total gross household income						.00
If line 14 is over income limits		·				.00
PART 4: SALES TAX CREDI	т сомр	JTATION (For house	eholds with gr	oss income below	v allowable	limits, see steps 2 and 3 on back of form.)
	aimed in Bo	ox D above	x \$40	(credit claime	ed) 15	.0
DIRECT DEPOSIT OPTION:	For those NC	T filing a Form 511. Se	e page 2 for	Refund Information	on.	If you are filing a Form 511, carry the credit t Form 511, line 27.
Is this refund going to or through an	Deposit	my refund in my:	Routing Number:			
account that is located outside of the United States?	che	cking account	Account			
Yes No	sav	ings account	Number:			
Inder penalty of perjury, I declare the information contained	in this document a	+ · · · · · · · · · · · · · · · · · · ·		my knowledge and belief	. If the	e Oklahoma Tax Commission may discuss this return
Taxpayer's Signature and Date		Spouse's Signature ar	na Date			with your tax preparer, place an 'X' here:
Occupation		Occupation			Prepa	arer's Signature and Date
Companion		Cooupation				

Notice

- Persons who have received TANF (Temporary Assistance for Needy Families) for any month in the year of 2019 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, 2019 to December 31, 2019.

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?

GO 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)

IOP 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 12/31/2019.
- You have a physical disability constituting handicap to employment (provide proof* as defined in the section be-

low)

Exceptions:





No (you do not qualify to file this form)

- 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, 2019, 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 <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 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



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

-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).

<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.

See	instructions for details on qualifications and requir	red enclosures.			
		A Unused Credit Carried Over from Prior Year(s)		<u>B</u> Credit Established During Current Tax Year	C Total Available Credit (A + B = C)
1a	Oklahoma Investment/New Jobs Credit (provide Form 506)	.00	1a	.00	.00
1b	Check the box to indicate the type of credit	Investment Cred	lit	New Jobs Cre	edit
2	Coal Credit	Not Applicable	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	3a	.00	.00
3b	Credit from Form 567-A, Part 4, line 4	.00	3b	.00	.00
4	Small Business Guaranty Fee Credit (for banks and credit unions filing Form 512) (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	.00	7	Not Applicable	.00
8	Credit for Qualified Rehabilitation Expenditures	.00	8	.00	.00
9a	Credit for Electricity Generated by Zero-Emission Facilities	.00	9a	.00	.00
9b	Check the box to indicate the renewable resource used to generate electricity			ng Water, Sun, or Geot	
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	Volunteer Firefighter Credit (provide FTAC's Form, see instructions on page 4)	Not Applicable	12	.00	.00

Other Credits Form



Nar	ne 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	<u>C</u> Total Available Credit (A + B = C)		
13	Credit for the Construction of Energy Efficient Homes	.00	13	.00	.00		
14	Credit for Railroad Modernization	.00	14	.00	.00		
15	Research and Development New Jobs Credit (provide Form 563)	.00	15	.00	.00		
16	Credit for Biomedical Research Contribution	.00	16	.00	.00		
17	Credit for Employees in the Aerospace Sector (provide Form 564)	.00	17	.00	.00		
18	Credits for Employers in the Aerospace Sector (provide Form 565)	Not Applicable	18	.00	.00		
19	Wire Transfer Fee Credit	.00	19	Not Applicable	.00		
20	Credit for Cancer Research Contribution	.00	20	.00	.00		
21	Oklahoma Capital Investment Board Tax Credit	Not Applicable	21	.00	.00		
22	Credit for Contributions to a Scholarship-Granting Organization	.00	22	.00	.00		
23	Credit for Contributions to an Educational Improvement Grant Organization	.00	23	.00	.00		
24	Credit for Venture Capital Investment (provide Form 518-A or 518-B)	.00	24	.00	.00		
25	Oklahoma Affordable Housing Tax Credit	.00	25	.00	.00		
26	Credit for Employees in the Vehicle Manufacturing Industry (provide Form 584)	Not Applicable	26	.00	.00		
27	Credits for Employers in the Vehicle Manufacturing Industry (provide Form 585)	Not Applicable	27	.00	.00		
28	Total (add lines 1a through 27)			28	.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

Name(s) as Shown on Return



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

561 g

Social Security Number

1. List qualifying Oklahoma capital gains and losses, not included on lines 2 through 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)	(Gain or Loss		(5) and (2)	
1	Type of property sold: e instructions)							
A1	. Description of Property:	B. Date C. Date Sold or Disposed (mm/dd/yy) (mm/dd/yy)		D. Proceeds (Sales Price)	E. Cost or Other Basis minus Adjustments to		F. Gain or (Loss) Combine Columns (D) and (E)	
	Oklahoma Location/Address Federal ID Number:	(See instructions)	(Gain or Loss			
A3.	Type of property sold:							
	e instructions)							
	. 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 minu Adjustments to	ıs	F. Gain or (Loss) Combine Columns (D) and (E)	
	. Oklahoma Location/Address Federal ID Number:	(See instructions)			Gain or Loss			
A3.	Type of property sold:							
	e instructions)							
2.	. Qualifying Oklahoma capital gain from installment sales reported on Federal Schedule D, line 11. (Provide a copy of Federal Form 6252) Type of property sold (See instructions)							
3.	Qualifying Oklahoma net capital ga	ain from sale of bu	usiness property r	eported on Federa	l Schedule D,	2		
	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)							
5.	Qualifying Oklahoma net capital ga or trusts reported on Federal Sche	ain or (loss) from p dule D, line 12. (C	partnerships, S co	orporations, estates	3			
	provide a copy of the Federal So		operty sold (See	instructions)		5		
6.	Add amounts in Column F on line			•		6		
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 See instructions and worksheet. (9		
10.	Oklahoma Capital Gain Deduction Schedule 511-A, line 12. (Do not expected the schedule 511-A) (Do not expected the schedul					10		

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			
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.						
Nam	Name of pass-through entity: FEIN:					
Description of property sold:						
Location of property:						
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, lir	ne 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")					
E	Net Long-Term Capital Gain (or loss) from Federal Schedule D, lin	e 15				
F	Add Out-of-State Capital Losses included in line E above +					
G	Subtract Out-of-State Capital Gains included in line E above -					
Н	Net Oklahoma Long-Term Capital Gains (if less than zero, enter "0")					
I	Oklahoma Net Capital Gain - Enter on the front of form on line 9 (combine lines H and D) (if less than zero, enter "0")					

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).

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;

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 head-quarters 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.

NOTE: If you are a member, either directly or indirectly, of an electing pass-through entity (PTE) the capital gain/loss from the PTE which is covered by the election pursuant to the provisions of the Pass-Through Entity Act of 2019 is not entered on this form to compute your Oklahoma Capital Gain Deduction. The gain/loss will be entered on the PTE's Oklahoma Capital Gain Deduction form, Form 561-PTE.

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.
- 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 Column A, 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 Columns B through E using the information from Federal Form 8949, Columns b through g or on Form 1099-B. In Column B, 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 Column F 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.