

# RESIDENT INCOME TAX RETURN

This form is for full-year residents only. Part-year and nonresidents, use Form 511NR.  
 The due date for this form is the 15th day of the fourth month after the close of the taxable year.



FORM **511** 2008

**Your Social Security Number**  **Check box if this taxpayer is deceased**

**Spouse's Social Security Number (joint return only)**  **Check box if this taxpayer is deceased**

**NAME AND ADDRESS PLEASE PRINT OR TYPE**

Your first name and middle initial  Last name

If a joint return, spouse's first name and middle initial  Last name

Mailing address (number and street, including apartment number or rural route)

City, State and Zip

**NOT REQUIRED TO FILE**

**Check this box if you do not have sufficient gross income to require you to file a Federal return.** (see instructions)

**FILING STATUS**

1  Single

2  Married filing joint return (even if only one had income)

3  Married filing separate  
 • If spouse is also filing, list SSN and name in box:

4  Head of household with qualifying person

5  Qualifying widow(er) with dependent child  
 • Please list the year spouse died in box at right:

**EXEMPTIONS**

	REGULAR	SPECIAL	BLIND
YOURSELF	+ see instructions	+ see instructions	+ see instructions
SPOUSE	+ see instructions	+ see instructions	+ see instructions
NUMBER OF DEPENDENT CHILDREN			
NUMBER OF OTHER DEPENDENTS			
ADD THE TOTALS FROM THE 4 SHADED BOXES.			
WRITE THE TOTAL IN THE BOX BELOW.			
<b>TOTAL</b> <input type="text"/>			

**Please Note:** If you may be claimed as a dependent on another return, enter "0" for your regular exemption.

**AGE 65 OR OVER?**  Yourself  Spouse (Please see instructions)

**PART ONE: TO ARRIVE AT OKLAHOMA ADJUSTED GROSS INCOME**

Round to Nearest Whole Dollar

If you are not required to file, see page 5 of instructions.  If line 7 is different than line 1, enclose a copy of your Federal return.	1	Federal adjusted gross income (from Federal 1040, 1040A, or 1040EZ) . . .	1	<input type="text"/>	00
	2	Oklahoma Subtractions (enclose Schedule 511-A) . . . . .	2	<input type="text"/>	00
	3	Line 1 minus line 2 . . . . .	3	<input type="text"/>	00
	4	Out-of-state income, except wages (enclose Federal schedule with description) . . .	4	<input type="text"/>	00
	5	Line 3 minus line 4 . . . . .	5	<input type="text"/>	00
	6	Oklahoma Additions (enclose Schedule 511-B) . . . . .	6	<input type="text"/>	00
	7	<b>Oklahoma adjusted gross income</b> (line 5 plus line 6) . . . . .	7	<input type="text"/>	00

**PART TWO: OKLAHOMA TAXABLE INCOME, TAX AND CREDITS**

Oklahoma Standard Deduction:	8	Oklahoma Adjustments (enclose Schedule 511-C) . . . . .	8	<input type="text"/>	00	
	9	Oklahoma income after adjustments (line 7 minus line 8) . . . . .	9	<input type="text"/>	00	
<b>STOP AND READ:</b> If line 4 is zero, complete lines 10-11. If line 4 is more than zero, see Schedule 511-D and do not complete lines 10-11.						
• Single or Married Filing Separate: \$3,250  • Married Filing Joint or Qualifying Widow(er): \$6,500  • Head of Household: \$4,875	10	Oklahoma standard deduction or Federal itemized deductions . . . . .	10	<input type="text"/>	00	
	11	Exemptions (\$1000 x total number of exemptions claimed above) . . . . .	11	<input type="text"/>	00	
	12	Total deductions and exemptions (add lines 10 and 11 or amount from Sch. 511-D, line 5) .	12	<input type="text"/>	00	
<b>Oklahoma Taxable Income</b> (line 9 minus line 12) . . . . . 13 <input type="text"/> 00						
Federal Itemized Deductions: Enclose copy of the Federal Schedule A.	14	Oklahoma Income Tax from Tax Table (see pages 20-31 of instructions) If using Farm Income Averaging, enter tax from Form 573, line 28 and enter a "1" in box. If paying the Health Savings Account additional 10% tax, add additional tax here and enter a "2" in box. <input type="checkbox"/>	14	<input type="text"/>	00	
	<b>STOP AND READ:</b> 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.					
	15	Oklahoma child care/child tax credit (see instructions) . . . . .	15	<input type="text"/>	00	
	16	Credit for taxes paid to another state (enclose Form 511TX) . . . . .	16	<input type="text"/>	00	
17	Credit for biomedical research contribution (enclose proof of contribution) . . .	17	<input type="text"/>	00		
18	Other credits (511CR). List 511CR line number claimed here <input type="text"/> . . . . .	18	<input type="text"/>	00		
19	<b>Income Tax</b> (line 14 minus lines 15-18) Do not enter less than zero . . . . .	19	<input type="text"/>	00		

DO NOT PAY THIS AMOUNT. PAYMENT IS FIGURED ON LINE 39.



**PART THREE: TAX, CREDITS AND PAYMENTS**

For use tax tables, see page 11 of instructions.	20	Total from line 19	20		00
	21	Use Tax. Check here if no use tax is due <input type="checkbox"/>	21		00
	22	Balance (add lines 20 and 21)	22		00
Enclose all W-2s, 1099s or other withholding statements.	23	Oklahoma withholding	23		00
	24	2008 estimated tax payments (qualified farmer <input type="checkbox"/> )	24		00
	25	2008 payment with extension	25		00
	26	Low Income Property Tax Credit (enclose Form 538-H)	26		00
See back of Form 538-S or packet for further information.	27	Sales Tax Relief Credit (enclose Form 538-S)	27		00
	28	Tornado Tax Credit (enclose Form 509 or 575)	28		00
<b>STOP AND READ:</b> If line 7 is equal to or more than line 1, complete line 29. If line 7 is smaller than line 1, complete Schedule 511-F. If you are not required to file, see special instructions on page 5 of packet.					
	29	Oklahoma Earned Income Credit (see instructions)	29		00
	30	<b>Total payments and credits</b> (add lines 23-29)	30		00

**PART FOUR: REFUND**

For further information regarding estimated tax, see page 5 of instructions.	31	If line 30 is more than line 22, subtract line 22 from line 30. This is your <b>overpayment</b>	31		00
	32	Amount of line 31 to be applied to 2009 estimated tax	32		00
Schedule 511-G provides you with the opportunity to make a financial gift from your refund to a variety of Oklahoma organizations. Please place the line number of the organization from Schedule 511-G in the oval below. If you give to more than one organization, put a "99" in the oval. Enclose Schedule 511-G. <input type="text"/>					
	33	Donations from your refund (total from Schedule 511-G)	33		00
	34	Total deductions from refund (add lines 32 and 33)	34		00
	35	Amount to be <b>refunded</b> to you (line 31 minus line 34)	35		00

**Want a Faster Refund?**

Elect to have your refund directly deposited into your checking or savings account. Only one refund can be deposited per account per tax season. For more information, see page 19 of instructions.

Deposit my refund in my:  checking account  savings account

Routing Number:

Account Number:

**PART FIVE: AMOUNT YOU OWE**

If you have an underpayment of estimated tax (line 37) & overpayment (line 31), see instructions.	36	If line 22 is more than line 30, subtract line 30 from line 22. This is your <b>tax due</b>	36		00
	37	Underpayment of estimated tax interest (annualized installment method <input type="checkbox"/> )	37		00
	38	For delinquent payment (add penalty of 5% plus interest at 1.25% per month)	38		00
	39	<b>Total tax, penalty and interest</b> (add lines 36-38)	39		00

Under penalty of perjury, I declare the information contained in this document, attachments and schedules, is true and correct to the best of my knowledge and belief.

Check this box if the Oklahoma Tax Commission may discuss this return with your tax preparer.

Taxpayer's signature	Date
Taxpayer's occupation	
Daytime Phone (optional)	

Spouse's signature	Date
Spouse's occupation	
Daytime Phone (optional)	

Paid Preparer's signature	Date
Paid Preparer's address and phone number	
Paid Preparer's I.D. Number	

**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.

Check this box if the taxpayer did not want this return filed electronically.