

1999 INDIVIDUAL FORM 511

This form must be filed on or before the 15th day of the fourth month after the close of the taxable year.

For the year January 1 - December 31, 1999, or other taxable year beginning _____, 1999 ending _____

STATE OF OKLAHOMA INCOME TAX RETURN

This form is for use by residents only. If you are a part-year or nonresident, please use Form 511NR. For further information, please see instructions.

Your Social Security Number →

Spouse's Social Security Number →

(joint return only)

PLEASE USE LABEL • PRINT OR TYPE

Print first name and initial (If joint return, give first name and initial of both) Last name

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

City, State and Zip

FILING STATUS • SAME AS FEDERAL

1 Single

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

3 Married filing separate. If spouse is also filing, give SSN and name here _____

4 Head of household with qualifying person

5 Qualifying widow(er) with dependent child (year spouse died 19____)

65 OR OVER? (See Instructions) Yourself Spouse

EXEMPTIONS

| | REGULAR | SPECIAL | BLIND |
|------------------------------|----------------------|----------------------|----------------------|
| YOURSELF | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| SPOUSE | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| NUMBER OF DEPENDENT CHILDREN | | | |
| NUMBER OF OTHER DEPENDENTS | | | |

ADD THE TOTALS FROM THE 4 SHADED BOXES

WRITE THE TOTAL IN THE BOX BELOW AND ALSO ON LINE 16.

PLEASE NOTE: If you may be claimed as a dependent on another return, enter "0" exemptions for yourself.

PART ONE: TO ARRIVE AT OKLAHOMA ADJUSTED GROSS INCOME PLEASE ROUND TO NEAREST DOLLAR

| | | | | | |
|--|---|----------------------|----------------------|----------------------|----|
| 1 | Federal adjusted gross income (from Federal 1040, 1040A, or 1040EZ) | 1 | <input type="text"/> | <input type="text"/> | 00 |
| Subtractions from Federal adjusted gross income (lines 2-6) | | | | | |
| 2 | Interest on U.S. Government obligations (enclose Federal Sch. B and details) 2 | <input type="text"/> | <input type="text"/> | 00 | |
| 3 | Social Security (see instructions) 3 | <input type="text"/> | <input type="text"/> | 00 | |
| 4 | Oklahoma government retirement or Federal retirement (see instructions) . . . 4 | <input type="text"/> | <input type="text"/> | 00 | |
| 5 | Other retirement income (see instructions for worksheet) 5 | <input type="text"/> | <input type="text"/> | 00 | |
| 6 | Other: Enter number in box for type of deduction (see instructions) <input type="text"/> 6 | <input type="text"/> | <input type="text"/> | 00 | |
| 7 | Total: Add lines 2, 3, 4, 5 and 6 7 | <input type="text"/> | <input type="text"/> | 00 | |
| 8 | Line 1 minus line 7. 8 | <input type="text"/> | <input type="text"/> | 00 | |
| Additions to Federal adjusted gross income (lines 11-13) | | | | | |
| 9 | Out-of-state income, except wages (describe and enclose Federal schedule) 9 | <input type="text"/> | <input type="text"/> | 00 | |
| 10 | Line 8 minus line 9 10 | <input type="text"/> | <input type="text"/> | 00 | |
| 11 | State and municipal bond interest (not specifically exempted) (describe and enclose schedule) 11 | <input type="text"/> | <input type="text"/> | 00 | |
| 12 | Out-of-state losses (describe) 12 | <input type="text"/> | <input type="text"/> | 00 | |
| 13 | Other additions (describe) 13 | <input type="text"/> | <input type="text"/> | 00 | |
| 14 | Oklahoma adjusted gross income (add lines 10, 11, 12 and 13). (If the amount on this line is different than line 1, please enclose a copy of your Federal return) 14 | <input type="text"/> | <input type="text"/> | 00 | |

PART TWO: DEDUCTIONS AND EXEMPTIONS

| | | | | |
|----|---|----------------------|----------------------|----|
| 15 | Deductions: Enter the Oklahoma standard deduction if you did not itemize on your Federal return. The Oklahoma standard deduction can be determined by following instructions on page 9. OR Enter the itemized deductions you were allowed on your Federal Schedule A. 15 | <input type="text"/> | <input type="text"/> | 00 |
| 16 | Exemptions: Enter the total number claimed above _____ x \$1,000.00 = 16 | <input type="text"/> | <input type="text"/> | 00 |
| 17 | Total: Add lines 15 and 16. 17 | <input type="text"/> | <input type="text"/> | 00 |
| 18 | Percentage allowable: Divide line 14 by line 8. If line 14 is equal to or larger than line 8, enter 100% 18 | <input type="text"/> | <input type="text"/> | % |
| 19 | Multiply line 17 by the percentage on line 18. Enter here and on line 38 19 | <input type="text"/> | <input type="text"/> | 00 |

PART THREE: FEDERAL INCOME TAX DEDUCTION

| | | | | |
|----|---|----------------------|----------------------|----|
| 20 | 1999 Federal income tax (amount paid, not the amount withheld) - see instructions 20 | <input type="text"/> | <input type="text"/> | 00 |
| 21 | Percentage allowable: Divide line 14 by line 8. If line 14 is equal to or larger than line 8, enter 100% 21 | <input type="text"/> | <input type="text"/> | % |
| 22 | Multiply line 20 by the percentage on line 21. Enter here and on line 41 22 | <input type="text"/> | <input type="text"/> | 00 |

PART FOUR: CREDIT FOR CHILD CARE

| | | | | |
|----|---|----------------------|----------------------|----|
| 23 | Federal child care credit. (see instructions and enclose copy of 2441 and page 2 of 1040 or schedule 2 and 1040A) 23 | <input type="text"/> | <input type="text"/> | 00 |
| 24 | Multiply line 23 by 20%. 24 | <input type="text"/> | <input type="text"/> | 00 |
| 25 | Percentage allowable: Divide line 14 by line 8. If line 14 is equal to or larger than line 8, enter 100% 25 | <input type="text"/> | <input type="text"/> | % |
| 26 | Oklahoma child care credit. Multiply line 24 by line 25 26 | <input type="text"/> | <input type="text"/> | 00 |

PART FIVE: ADJUSTMENTS NECESSARY TO ARRIVE AT OKLAHOMA TAXABLE INCOME

Table with 4 columns: Line number, Description, Amount, and Total. Includes items like Oklahoma Adjusted Gross Income, Partial military pay exclusion, and Oklahoma Taxable Income (METHOD 1 and 2).

ROUND TO THE NEAREST DOLLAR

PART SIX: TAX COMPUTATION • CREDITS • REFUND OR AMOUNT DUE

Table with 4 columns: Line number, Description, Amount, and Total. Includes items like Oklahoma Income Tax, Credits (child care, state tax, etc.), and Deductions from Refund.

DIRECT DEPOSIT OPTION: (Please see packet instructions on page 5)
Yes! Please deposit my refund in my [] checking account [] savings account (You will not receive notice of your deposit)
Routing Number: [] Account Number: []

Please check here if the OTC may discuss this return with your tax preparer []

Under penalty of perjury, I declare that the information contained in this document and any attachments are true and correct to the best of my knowledge and belief.
Taxpayer's signature, date, Spouse's signature, date, Paid Preparer's signature, I.D. Number, Taxpayer's occupation, Spouse's occupation, Paid Preparer's address and phone number.