

For the year January 1 - December 31, 2006, or other taxable year beginning _____, 2006 ending _____.

STATE OF OKLAHOMA INCOME TAX RETURN

Your Social Security Number • _____

Spouse's Social Security Number • _____
(joint return only)

PRINT OR TYPE	Your first name and middle initial _____ Last _____
	If a joint return, spouse's first name and middle initial _____ Last _____
	Home address (number and street, including apartment number or rural route) _____
	City, State and Zip _____

FILING STATUS

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
Please list year spouse died here: _____

RESIDENCY STATUS

Nonresident(s) State of Residence: _____

Part-Year Resident(s) From _____ to _____

Resident/Part-Year Resident/Nonresident
State of Residence: Husband _____ Wife _____

START HERE: To Arrive at Oklahoma Adjusted Gross Income.
Lines 1-19: In the Federal column, enter the amounts from your Federal Tax Return.
See the instructions to figure the amounts to report in the Oklahoma column.

1	Wages, salaries, tips, etc.
2	Taxable interest income
3	Dividend income
4	Taxable refunds (state income tax)
5	Alimony received
6	Business income or (loss) (Federal Schedule C)
7	Capital gains or losses (Federal Schedule D)
8	Other gains or losses (Federal Form 4797)
9	Taxable IRA distribution
10	Taxable pensions and annuities
11	Rental real estate, royalties, partnerships, etc.
12	Farm income (loss)
13	Unemployment compensation
14	Taxable Social Security benefits (also enter on line 2 of Sch. 511NR-B)
15	Other income (identify: _____)
16	Add lines 1 through 15
17	Total Federal adjustments to income (identify: _____)
18	Oklahoma source income (line 16 minus line 17)
19	Federal adjusted gross income (line 16 minus line 17)
20	Oklahoma additions: Schedule 511NR-A, line 7
21	Add lines (Federal 19 and 20) and then (Oklahoma 18 and 20)
22	Oklahoma subtractions: Schedule 511NR-B, line 14
23	Adjusted gross income: Okla. Source (line 21 minus line 22)
24	Adjusted gross income: All Sources (line 21 minus line 22) Also enter on line 25

NONRESIDENT OR PART-YEAR RESIDENT

NOT REQUIRED TO FILE...
Check this box if you do not have an Oklahoma filing requirement and are filing for refund of your Oklahoma withholding. (see instructions)

EXEMPTIONS	REGULAR	SPECIAL	BLIND	E	E	E	E	
	YOURSELF •	+ see instructions	+ •					
	SPOUSE •	+ see instructions	+ •					
	NUMBER OF DEPENDENT CHILDREN				E	E	E	E
	NUMBER OF OTHER DEPENDENTS				E	E	E	E
							TOTAL	

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

65 OR OVER?
(See instructions on page 7 of packet)

Yourself • _____ Spouse • _____

Please Round to Nearest Whole Dollar

FEDERAL AMOUNT		OKLAHOMA AMOUNT	
00	1	00	00
00	2	00	00
00	3	00	00
00	4	00	00
00	5	00	00
00	6	00	00
00	7	00	00
00	8	00	00
00	9	00	00
00	10	00	00
00	11	00	00
00	12	00	00
00	13	00	00
00	14	00	00
00	15	00	00
00	16	00	00
00	17	00	00
00	18	00	00
00	19	00	00
00	20	00	00
00	21	00	00
00	22	00	00
00	23	00	00
00	24	00	00

If filing an amended return, please place an "X" in the space provided next to the form number: "511NR X"



Oklahoma Standard Deduction:
• Single or Married Filing Separate: \$2,000
• Married Filing Joint, Head of Household, or Qualifying Widow(er): \$3,000

Table with 3 columns: Line number, Description, Amount. Lines 25-32. Includes 'Oklahoma Taxable Income' and 'Oklahoma Income Tax from Tax Table'.

If line 24 is equal to or larger than line 19, complete line 33. If line 24 is smaller than line 19, see Schedule 511NR-D.

Federal Itemized Deductions:
Enclose a copy of the Federal Schedule A.

Table with 3 columns: Line number, Description, Amount. Lines 33-52. Includes 'Oklahoma child care credit', 'Tax percentage', 'Oklahoma Income Tax', 'Total payments', and 'Amount to be refunded'.

If filing an amended return, complete worksheet on page 4 of Form 511NR.

For further information regarding estimated tax, see page 3 of instructions.

Direct Deposit? Have your refund directly deposited into your bank account for a faster refund. See page 22 of the packet.

Deposit my refund in my:
• [] checking account
• [] savings account
Routing Number: [] [] [] [] [] [] [] [] [] []
Account Number: []

Table with 3 columns: Line number, Description, Amount. Lines 53-57. Includes 'Total tax, penalty and interest'.

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

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

Spouse's signature, Date, Spouse's occupation

Paid Preparer's signature, Date, Paid Preparer's address and phone number

A COPY OF YOUR FEDERAL RETURN MUST BE ENCLOSED.

Paid Preparer's SSN, EIN or PTIN, Check this box if the Tax Commission may discuss this return with your tax preparer.

Oklahoma Tax Commission, P.O. 26800, Oklahoma City, OK 73126-0800



Name(s) shown on Form 511NR

Your Social Security Number

If you filled out any portion of Schedules 511NR-A through 511NR-F, enclose those schedules with Form 511NR.

Schedule 511NR-D

Child Care Credit

See instructions for detail on qualification and enclosures.

If you are allowed a credit for child care expenses on your Federal return, there shall be allowed to a resident individual, part-year resident individual, or nonresident military individual, a credit against the Oklahoma tax equal to 20% of the credit for child care expenses allowed under the Internal Revenue Code of the United States. The credit must be prorated on the ratio of Adjusted Gross Income: All Sources to Federal Adjusted Gross Income. Enclose a copy of Federal Form 2441 and page 2 of Form 1040 or Form 1040A, including Schedule 2.

Note: Do not use the Federal child tax credit when computing the Oklahoma credit. The Oklahoma child care credit is based on a percentage of the Federal child care credit only.

1	Federal child care credit (Do not enter Federal child tax credit)		00
2	Multiply line 1 by 20%		00
3	Divide the amount on line 24 of Form 511NR by the amount on line 19 of Form 511NR <div style="text-align: center;"> <input type="text"/> ÷ <input type="text"/> </div> Enter the percentage from the above calculation here (do not enter more than 100%) ..		%
4	Oklahoma child care credit		00
		(multiply line 2 by line 3, enter total here and on line 33 of Form 511NR)	

Schedule 511NR-E

Earned Income Credit

See instructions for detail on qualification and enclosures.

Residents and part-year residents are allowed a credit equal to 5% of the Earned Income Credit allowed on the Federal return. The credit must be prorated on the ratio of Oklahoma source AGI to Federal AGI. Enclose a copy of your Federal return. Nonresidents do not qualify.

1	Federal earned income credit		00
2	Multiply line 1 by 5%		00
3	Divide the amount on line 23 of Form 511NR by the amount on line 19 of Form 511NR <div style="text-align: center;"> <input type="text"/> ÷ <input type="text"/> </div> Enter the percentage from the above calculation here (do not enter more than 100%) ..		%
4	Oklahoma earned income credit		00
		(multiply line 2 by line 3, enter total here and on line 46 of Form 511NR)	

Worksheet for Amended Returns Only (Form 511NR, Page 2, Line 43)

When amending Form 511NR you must adjust Form 511NR, line 43 (Oklahoma Income Tax Withheld) by subtracting any previous overpayments or adding any tax previously paid. Use worksheet below.

1. Oklahoma income tax withheld		00
2. Amount paid with the original return plus additional paid after it was filed (Do not include underpayment penalty)		00
3. Add lines 1 and 2		00
4. Overpayment, if any, shown on original return or as previously adjusted by Oklahoma		00
5. Subtract line 4 from line 3. Enter here and on line 43 of the amended Form 511NR		00



Name(s) shown on Form 511NR _____

Your Social Security Number

Schedule 511NR-F Donations from Refund

This schedule allows you to make a donation from your refund to a variety of Oklahoma organizations. Information regarding each program, their mission, how funds are utilized, and their mailing address are shown below and on the back of this form (Schedule 511NR-F Information). If you are not receiving a refund, but would like to make a donation to one of these charities, Schedule 511NR-F Information lists the mailing address to mail your donation to the organization. If you are not receiving a refund and are wishing to donate to the Oklahoma Organ Donor Education Fund, please see line 54 of Form 511NR.

Please check the box associated with the dollar amount you are wishing 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 50 of Form 511NR, please list the line number of the charity to which you donated. If you donate to more than one charity, please write a "99" in the oval on line 50 of Form 511NR.

1	Oklahoma Wildlife Diversity Program	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$_____ . . . 1		00
2	Low Income Health Care Fund	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$_____ . . . 2		00
3	Veterans Affairs Capital Improvement Program.	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$_____ . . . 3		00
4	Oklahoma Breast and Cervical Cancer Fund	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$_____ . . . 4		00
5	Oklahoma City Bombing Memorial Fund	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$_____ . . . 5		00
6	Oklahoma Organ Donor Education Fund	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$_____ . . . 6		00
7	Okla. School for the Blind/Okla. School for the Deaf	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$_____ . . . 7		00
8	Tulsa Reconciliation Educ. & Scholarship Trust Fund	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$_____ . . . 8		00
9	Oklahoma Silver Haired Legislature Program	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$_____ . . . 9		00
10	Support of Oklahoma Common Schools	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$_____ . . . 10		00
11	Support of Oklahoma Road & Highway Maintenance	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$_____ . . . 11		00
12	Support of Oklahoma Medicaid Program	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$_____ . . . 12		00
13	County Fair Enhancement Fund	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$_____ . . . 13		00
14	Junior Livestock Auction Scholarship Fund	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$_____ . . . 14		00
15	Support of Programs for Volunteers to Act as Court Appointed Special Advocates for Abused or Neglected Children	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$_____ . . . 15		00
16	Oklahoma Pet Overpopulation Fund	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$_____ . . . 16		00
17	Support the Retirement of Capitol Dome Debt	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$_____ . . . 17		00
18	Support of the Oklahoma National Guard	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$_____ . . . 18		00
19	Total donations (add lines 1-18, enter total here and on line 50 of Form 511NR) . . . 19					00

Schedule 511NR-F: Information

- 1 - Oklahoma Wildlife Diversity Program**
The Oklahoma Wildlife Diversity Program is funded primarily by concerned Oklahomans. All donations provide for a variety of projects, including research on Texas horned lizards and other rare wildlife, wildlife observation activities, such as statewide educational workshops, informational brochures and posters, and management of a bat cave purchased with previous program donations. If you are not receiving a refund, you may still donate. Mail your contribution to: Wildlife Diversity Program, 1801 North Lincoln, Oklahoma City, OK 73105.
- 2 - Low Income Health Care Fund**
Oklahomans helping each other is what the Indigent (Low Income) Health Care Fund is all about. Donations made to the fund are used to help provide medical and dental care for needy children and families. Every dollar you donate goes directly for health care costs. If you are not receiving a refund, you may still donate. Mail your contribution to: Oklahoma Department of Human Services, Revenue Processing Unit, Re: Indigent Health Care Revolving Fund, P.O. Box 25352, Oklahoma City, OK 73125.
- 3 - Veterans Affairs Capital Improvement Program**
You may donate from your tax refund to help the Department of Veterans Affairs to purchase equipment and develop capital improvement projects and to acquire properties for expanding or improving existing projects. If you are not receiving a refund, you may still donate. Mail your contribution to: Department of Veterans Affairs, P.O. Box 53067, Oklahoma City, OK 73152.

Continued...