

FORM 511 2001

For the year January 1 - December 31, 2001, or other taxable year beginning _____, 2001 ending _____.

STATE OF OKLAHOMA INCOME TAX RETURN

Your Social Security Number →

Spouse's Social Security Number →
(joint return only)

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

NOT REQUIRED TO FILE...

Check this box if you do not have a Federal filing requirement and are filing for refund of your state withholding. (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, give SSN and name on line below:

4 Head of household with qualifying person

5 Qualifying widow(er) with dependent child
Please list year spouse died here: _____

EXEMPTIONS

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

ADD THE TOTALS FROM THE 4 SHADED BOXES.

WRITE THE TOTAL IN THE BOX BELOW.

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

65 OR OVER? (See Instructions) Yourself Spouse

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

1	Federal adjusted gross income (from Federal 1040, 1040A, or 1040EZ)	1	<input type="text"/>	<input type="text"/>	00
2	Subtractions from Federal adjusted gross income (Form 511 Schedule A, line 11) . . .	2	<input type="text"/>	<input type="text"/>	00
3	Line 1 minus line 2	3	<input type="text"/>	<input type="text"/>	00
4	Out-of-state income, except wages (describe and enclose Federal schedule)	4	<input type="text"/>	<input type="text"/>	00
5	Line 3 minus line 4	5	<input type="text"/>	<input type="text"/>	00
6	Additions to Federal adjusted gross income (Form 511 Schedule B, line 7)	6	<input type="text"/>	<input type="text"/>	00
7	Oklahoma adjusted gross income (line 5 plus line 6) <i>(If the amount on line 7 is different than line 1, please enclose a copy of your Federal return)</i>	7	<input type="text"/>	<input type="text"/>	00

PART TWO: ADJUSTMENTS TO ARRIVE AT OKLAHOMA TAXABLE INCOME

8	Adjustments to Oklahoma adjusted gross income (Form 511 Schedule C, line 12)	8	<input type="text"/>	<input type="text"/>	00
9	Oklahoma income after adjustments (line 7 minus line 8)	9	<input type="text"/>	<input type="text"/>	00
<i>If line 4 is zero, complete lines 10-11. If line 4 is greater than zero, see Form 511 Schedule D.</i>					
10	Oklahoma standard deduction or Federal itemized deductions ¹⁰ <input type="text"/>		<input type="text"/>	<input type="text"/>	00
11	Exemptions (\$1000 x number of exemptions claimed above) . ¹¹ <input type="text"/>		<input type="text"/>	<input type="text"/>	00
12	Total deductions and exemptions (add lines 10-11 or enter amount from Form 511 Sch. D) ¹²		<input type="text"/>	<input type="text"/>	00
13	Oklahoma Taxable Income: METHOD 1 (line 9 minus line 12) ¹³		<input type="text"/>	<input type="text"/>	00
14	Tax from Tax Table 1 ¹⁴ <input type="text"/>		<input type="text"/>	<input type="text"/>	00
<i>If line 7 is equal to or larger than line 1, complete line 15.</i>					
<i>If line 7 is smaller than line 1, see Form 511 Schedule E.</i>					
15	Federal income tax deduction (enter the amount paid not withheld or enter amount from Form 511 Sch. E) . . ¹⁵		<input type="text"/>	<input type="text"/>	00
16	Oklahoma Taxable Income: METHOD 2 (line 13 minus line 15) ¹⁶		<input type="text"/>	<input type="text"/>	00
17	Tax from Tax Table 2 ¹⁷ <input type="text"/>		<input type="text"/>	<input type="text"/>	00
18	Oklahoma Income Tax (lesser of line 14 or 17) (If using Farm Income Averaging, enter Form 573, line 42 & check here <input type="checkbox"/>) ¹⁸		<input type="text"/>	<input type="text"/>	00

Do not staple documentation to this form. If you need to attach items, please use a paper clip.

PART THREE: TAX, PAYMENTS AND CREDITS

19	Total from line 18	19		00
20	Oklahoma child care credit (see instructions)	20		00
21	Credit for taxes paid to another state (enclose Form 511TX)	21		00
22	Other credits (511CR) <i>Please list 511CR line number claimed here</i> <input type="text"/>	22		00
23	Balance (line 19 minus lines 20, 21 and 22)	23		00
24	Oklahoma withholding (enclose W-2's & 1099's with withholding)	24		00
25	2001 Oklahoma estimated tax payments . (qualified farmer <input type="checkbox"/>)	25		00
26	2001 payment with extension	26		00
27	Low Income Property Tax Credit (enclose Form 538-H)	27		00
28	Sales Tax Relief Credit (enclose Form 538-S, see instructions)	28		00
29	May 3, 1999 Tornado Tax Credit (enclose Form 510)	29		00
30	Total payments and credits (add lines 24-29)	30		00

PART FOUR: OVERPAID

31	Overpayment (if line 30 is greater than line 23) <i>subtract line 23 from line 30</i> OVERPAYMENT	31		00
32	Amount from line 31 to be credited to your 2002 estimated tax	32		00
33	Donations from your refund:			
	a. Oklahoma Wildlife Diversity Program <input type="checkbox"/> \$2 <input type="checkbox"/> \$5 <input type="checkbox"/> \$_____	33a		00
	b. Low Income Health Care Fund <input type="checkbox"/> \$2 <input type="checkbox"/> \$5 <input type="checkbox"/> \$_____	33b		00
	c. Veteran Affairs Capital Improvement Program <input type="checkbox"/> \$2 <input type="checkbox"/> \$5 <input type="checkbox"/> \$_____	33c		00
	d. Oklahoma Breast Cancer Program <input type="checkbox"/> \$2 <input type="checkbox"/> \$5 <input type="checkbox"/> \$_____	33d		00
	e. Oklahoma City Bombing Memorial Fund <input type="checkbox"/> \$2 <input type="checkbox"/> \$5 <input type="checkbox"/> \$_____	33e		00
	f. Oklahoma Organ Donor Education Fund <input type="checkbox"/> \$2 <input type="checkbox"/> \$5 <input type="checkbox"/> \$_____	33f		00
34	Amount to be refunded (line 31 minus lines 32 and 33 a-f) REFUND	34		00

PART FIVE: TAX DUE

35	Tax Due (if line 23 is greater than line 30) <i>subtract line 30 from line 23</i> TAX DUE	35		00
36	Donation: Oklahoma organ donor education fund <input type="checkbox"/> \$2 <input type="checkbox"/> \$5 <input type="checkbox"/> \$_____	36		00
37	Underpayment of estimated tax (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	Total tax, donation, penalty and interest (add lines 35-38) BALANCE DUE	39		00

DIRECT DEPOSIT OPTION:

For instructions, please see page 27 in your Individual Resident Income Tax Packet.

Yes! Please deposit my refund in my checking account savings account

Routing Number:

<input type="text"/>									
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Account Number:

<input type="text"/>																		
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Check the box above if the Oklahoma Tax Commission may discuss this return with your tax preparer.

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

Taxpayer's signature
Date
Taxpayer's occupation

Spouse's signature
Date
Spouse's occupation

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

Name(s) shown on Form 511 _____

Your Social Security Number

<input type="text"/>									
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FORM 511 SCHEDULE A

Subtractions from Federal Adjusted Gross Income

See instructions for detail on qualification and enclosures.

1	Interest on U.S. government obligations	1		00
2	Social Security benefits taxed on your Federal return	2		00
3	Oklahoma or Federal government retirement	3		00
4	Other retirement income	4		00
5	U.S. Railroad Retirement Board benefits	5		00
6	Oklahoma depletion	6		00
7	Oklahoma net operating loss	7		00
8	Exempt tribal income	8		00
9	Gains from the sale of exempt government obligations	9		00
10	Miscellaneous: Other subtractions (enter number in box for type of deduction) . <input type="text"/>	10		00
11	Total subtractions (add lines 1-10, enter total here and on line 2 of Form 511)	11		00

FORM 511 SCHEDULE B

Additions to Federal Adjusted Gross Income

See instructions for detail on qualification and enclosures.

1	State and municipal bond interest	1		00
2	Out-of-state losses (describe _____)	2		00
3	Lump sum distributions (not included in your Federal Adjusted Gross Income)	3		00
4	Federal net operating loss	4		00
5	Recapture of depletion claimed on a lease bonus	5		00
6	Losses from the sale of exempt government obligations or other additions (describe _____)	6		00
7	Total additions (add lines 1-6, enter total here and on line 6 of Form 511)	7		00

FORM 511 SCHEDULE C

Adjustments to Oklahoma Adjusted Gross Income

See instructions for detail on qualification and enclosures.

1	Partial military pay exclusion (not retirement)	1		00
2	Qualifying disability deduction	2		00
3	Political contributions (limited to \$100 single or \$200 joint)	3		00
4	Interest qualifying for exclusion (limited to \$100 single or \$200 joint)	4		00
5	Qualified medical savings account (not deducted on your Federal return)	5		00
6	Qualified adoption expense	6		00
7	Agricultural commodity processing facility exclusion	7		00
8	Accelerated Oklahoma depreciation for swine or poultry producers	8		00
9	Indian employment exclusion	9		00
10	Discharge of indebtedness for farmers	10		00
11	Oklahoma Police Corps Program scholarship or stipend	11		00
12	Total adjustments (add lines 1-11, enter total here and on line 8 of Form 511)	12		00

Name(s) shown on Form 511 _____

Your Social Security Number

FORM 511 SCHEDULE D

Deductions and Exemptions Computation Worksheet

If you have income from out-of-state, 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.

1	Oklahoma standard deduction or Federal itemized deductions claimed	1	<input type="text"/>	00
2	Exemptions (\$1,000 x number of exemptions claimed at top of Form 511)	2	<input type="text"/>	00
3	Total (add lines 1 and 2)	3	<input type="text"/>	00
4	Divide the amount on line 7 of Form 511 by the amount on line 3 of Form 511 <input type="text"/> ÷ <input type="text"/>			
	Enter the percentage from the above calculation here	4	<input type="text"/>	%
5	Total allowable deductions and exemptions (multiply line 3 by percentage on line 4, enter total here and on line 12 of Form 511. <i>Leave lines 10 and 11 of Form 511 blank</i>)	5	<input type="text"/>	00

FORM 511 SCHEDULE E

Federal Income Tax Deduction Computation Worksheet

Federal income taxes are deductible only to the extent they relate to income subject to taxation in Oklahoma. Federal income tax must be prorated on the ratio of Oklahoma Adjusted Gross Income to the Federal Adjusted Gross Income.

1	2001 Federal income tax (amount paid, not amount withheld).	1	<input type="text"/>	00
2	Divide the amount on line 7 of Form 511 by the amount on line 1 of Form 511 <input type="text"/> ÷ <input type="text"/>			
	Enter the percentage from the above calculation here	2	<input type="text"/>	%
3	Allowable Federal income tax deduction (multiply line 1 by percentage on line 2, enter total here and on line 15 of Form 511)	3	<input type="text"/>	00

FORM 511 SCHEDULE F

Child Care Credit Computation Worksheet

If you are allowed a credit for child care expenses on your Federal return, you are allowed a credit against your Oklahoma tax equal to 20% of the credit for child care expenses allowed by the IRS code. The credit must be prorated on the ratio of Oklahoma AGI to Federal AGI. 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 child care credit. The Oklahoma child care credit is based on a percentage of the Federal child care credit only.

1	Federal child care credit	1	<input type="text"/>	00
2	Multiply line 1 by 20%	2	<input type="text"/>	00
3	Divide the amount on line 7 of Form 511 by the amount on line 1 of Form 511 <input type="text"/> ÷ <input type="text"/>			
	Enter the percentage from the above calculation here	3	<input type="text"/>	%
4	Oklahoma child care credit (multiply line 2 by line 3, enter total here and on line 20 of Form 511)	4	<input type="text"/>	00