



OKLAHOMA RESIDENT INCOME TAX RETURN

Your Social Security Number Place an 'X' in this box if this taxpayer is deceased

Spouse's Social Security Number (joint return only) Place an 'X' in this box if this taxpayer is deceased

AMENDED RETURN! Place an 'X' in this box if this is an amended 511. See Schedule 511-H.

NAME AND ADDRESS PLEASE PRINT OR TYPE

Your first name, middle initial and last name

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

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

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, list name and SSN in the boxes: Name: SSN:

4 Head of household with qualifying person

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

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

NOT REQUIRED TO FILE

Place an 'X' in this box if you do not have sufficient gross income to require you to file a Federal return. (see instructions)

* NOTE: If claiming Special Exemption, see instructions on page 7 of 511 Packet.

	REGULAR	*SPECIAL	BLIND		
EXEMPTIONS	YOURSELF	+	+	=	ADD THE TOTALS FROM THE 4 BOXES. WRITE THE TOTAL IN THE BOX BELOW. TOTAL <input type="text"/> NOTE: IF YOU MAY BE CLAIMED AS A DEPENDENT ON ANOTHER RETURN, ENTER "0" FOR YOUR REGULAR EXEMPTION.
	SPOUSE	+	+	=	
NUMBER OF DEPENDENT CHILDREN				=	
NUMBER OF OTHER DEPENDENTS				=	

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 the 511 Packet. 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"/>	<input type="text"/>
	2 Oklahoma Subtractions (enclose Schedule 511-A) 2	<input type="text"/>	<input type="text"/>
	3 Line 1 minus line 2 3	<input type="text"/>	<input type="text"/>
	4 Out-of-state income, except wages. Describe (4a) (Enclose Federal schedule with detailed description; see instructions) 4b	<input type="text"/>	<input type="text"/>
	5 Line 3 minus line 4b 5	<input type="text"/>	<input type="text"/>
	6 Oklahoma Additions (enclose Schedule 511-B) 6	<input type="text"/>	<input type="text"/>
	7 Oklahoma adjusted gross income (line 5 plus line 6) 7	<input type="text"/>	<input type="text"/>

PART TWO: OKLAHOMA TAXABLE INCOME, TAX AND CREDITS

Oklahoma Standard Deduction: • Single or Married Filing Separate: \$6,300 • Married Filing Joint or Qualifying Widow(er): \$12,600 • Head of Household: \$9,250 Itemized Deductions: Enclose copy of the Federal Schedule A.	8 Oklahoma Adjustments (enclose Schedule 511-C) 8	<input type="text"/>	<input type="text"/>	
	9 Oklahoma income after adjustments (line 7 minus line 8) 9	<input type="text"/>	<input type="text"/>	
	STOP AND READ: If line 4b is zero, complete lines 10-11. If line 4b is more than zero, see Schedule 511-D and do not complete lines 10-11.			
	10 Oklahoma standard deduction or Federal itemized deductions 10	<input type="text"/>	<input type="text"/>	<input type="text"/>
	11 Exemptions (\$1,000 x total number of exemptions claimed above) 11	<input type="text"/>	<input type="text"/>	
	12 Total deductions and exemptions (add lines 10 and 11 or amount from Sch. 511-D, line 5) . 12	<input type="text"/>	<input type="text"/>	
	13 Oklahoma Taxable Income (line 9 minus line 12) 13	<input type="text"/>	<input type="text"/>	
	14 Oklahoma Income Tax from Tax Table (see pages 20-31 of instructions) If using Farm Income Averaging, enter tax from Form 573, line 22 and enter a "1" in box. <input type="checkbox"/> If paying the Health Savings Account additional 10% tax, add additional tax here and enter a "2" in box. <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	
STOP AND READ: 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"/>	<input type="text"/>	
	16 Credit for taxes paid to another state (enclose Form 511TX) 16	<input type="text"/>	<input type="text"/>	
	17 Form 511CR - Other Credits Form. List 511CR line number claimed here.. <input type="text"/> 17	<input type="text"/>	<input type="text"/>	
	18 Income Tax (line 14 minus lines 15-17) Do not enter less than zero 18 DO NOT PAY THIS AMOUNT. PAYMENT IS FIGURED ON LINE 43.	<input type="text"/>	<input type="text"/>	



2015 Form 511 - Resident Income Tax Return - Page 2

Name(s) shown on Form 511:

Your Social Security Number:

PART THREE: TAX, CREDITS AND PAYMENTS

Table with 3 columns: Line number, Description, and Amount. Includes lines 19-33 for tax and credits.

PART FOUR: REFUND

Table with 3 columns: Line number, Description, and Amount. Includes lines 34-38 for refund calculations.

Direct Deposit Note: Verify your account and routing numbers are correct. If your direct deposit fails to process or you do not choose direct deposit, you will receive a debit card.

Form for direct deposit information: Is this refund going to or through an account that is located outside of the United States? Deposit my refund in my: checking account, savings account.

PART FIVE: AMOUNT YOU OWE

Table with 3 columns: Line number, Description, and Amount. Includes lines 39-43 for tax due and underpayment.

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

Place an 'X' in this box if the Oklahoma Tax Commission may discuss this return with your tax preparer.

Form for Taxpayer's signature, Date, occupation, and Daytime Phone.

Form for Spouse's signature, Date, occupation, and Daytime Phone.

Form for Paid Preparer's signature, Date, address and phone 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

Paid Preparer's PTIN

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

NOTE: Enclose this page **ONLY** if you have an amount shown on a schedule.



Name(s) shown on Form 511:

Your Social Security Number:

SCHEDULE 511-A

Oklahoma Subtractions

See instructions for details on qualifications and required enclosures.

1	Interest on U.S. government obligations	1	<input type="text"/>	00
2	Social Security benefits taxed on your Federal Form 1040 or 1040A	2	<input type="text"/>	00
3	Federal civil service retirement in lieu of social security	3	<input type="text"/>	00
	└ Retirement Claim Number: Taxpayer <input type="text"/> Spouse <input type="text"/>			
4	Military Retirement (see instructions for limitation)	4	<input type="text"/>	00
5	Oklahoma government or Federal civil service retirement (see instructions for limitation) ...	5	<input type="text"/>	00
6	Other retirement income	6	<input type="text"/>	00
7	U.S. Railroad Retirement Board benefits	7	<input type="text"/>	00
8	Oklahoma depletion	8	<input type="text"/>	00
9	Oklahoma net operating loss	Loss Year(s) <input type="text"/>	<input type="text"/>	00
10	Exempt tribal income	10	<input type="text"/>	00
11	Gains from the sale of exempt government obligations	11	<input type="text"/>	00
12	Oklahoma Capital Gain Deduction (enclose Form 561)	12	<input type="text"/>	00
13	Miscellaneous: Other subtractions (enter number in box for type of deduction) . <input type="text"/>	13	<input type="text"/>	00
14	Total subtractions (add lines 1-13, enter total here and on line 2 of Form 511)	14	<input type="text"/>	00

SCHEDULE 511-B

Oklahoma Additions

See instructions for details on qualifications and required enclosures.

1	State and municipal bond interest	1	<input type="text"/>	00
2	Out-of-state losses (describe _____) Enter as a positive number .	2	<input type="text"/>	00
3	Lump sum distributions (not included in your Federal Adjusted Gross Income)	3	<input type="text"/>	00
4	Federal net operating loss - Enter as a positive number	4	<input type="text"/>	00
5	Recapture of depletion claimed on a lease bonus or add back of excess Federal depletion	5	<input type="text"/>	00
6	Recapture of Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account(s) ..	6	<input type="text"/>	00
7	Miscellaneous: Other additions (enter number in box for type of addition)	7	<input type="text"/>	00
8	Total additions (add lines 1-7, enter total here and on line 6 of Form 511)	8	<input type="text"/>	00

SCHEDULE 511-C

Oklahoma Adjustments

See instructions for details on qualifications and required enclosures.

1	Military pay exclusion - Active Duty, Reserve and National Guard (not retirement income) ...	1	<input type="text"/>	00
2	Qualifying disability deduction	2	<input type="text"/>	00
3	Qualified adoption expense	3	<input type="text"/>	00
4	Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account(s) ..	4	<input type="text"/>	00
5	Deduction for providing foster care	5	<input type="text"/>	00
6	Miscellaneous: Other adjustments (enter number in box for type of deduction) <input type="text"/>	6	<input type="text"/>	00
7	Total adjustments (add lines 1-6, enter total here and on line 8 of Form 511)	7	<input type="text"/>	00



NOTE: Enclose this page **ONLY** if you have an amount shown on a schedule.

Name(s) shown on Form 511:

Your Social Security Number:

SCHEDULE 511-D	Deductions and Exemptions See instructions for details on qualifications and required enclosures.
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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 do not have out-of-state income on Form 511, line 4, do not use this schedule. Instead complete Form 511, lines 10-11.

1	Oklahoma standard deduction or Federal itemized deductions claim	1		00
2	Exemptions (\$1,000 x number of exemptions claimed at top of Form 511)	2		00
3	Total (add lines 1 and 2)	3		00
4	Divide the amount on line 7 of Form 511 by the amount on line 3 of Form 511 <div style="display: flex; align-items: center; justify-content: center; gap: 20px;"> <input style="width: 100px; height: 20px;" type="text"/> ÷ <input style="width: 100px; height: 20px;" type="text"/> </div>			
	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 and 11 of Form 511 blank)	5		00

SCHEDULE 511-E	Child Care/Child Tax Credit See instructions for details on qualifications and required enclosures.
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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.

The credit must be prorated based on the ratio of Oklahoma Adjusted Gross Income to Federal Adjusted Gross Income.

If your Federal Adjusted Gross Income is greater than \$100,000, no credit is allowed.

Enclose a copy of your Federal return and, if applicable, the Federal child care credit schedule.

1	Enter your Federal child care credit	1		00
2	Multiply line 1 by 20%	2		00
3	Enter your Federal child tax credit (total of child tax credit & additional child tax credit)	3		00
4	Multiply line 3 by 5%	4		00
5	Enter the larger of line 2 or line 4	5		00
6	Divide the amount on line 7 of Form 511 by the amount on line 1 of Form 511 <div style="display: flex; align-items: center; justify-content: center; gap: 20px;"> <input style="width: 100px; height: 20px;" type="text"/> ÷ <input style="width: 100px; height: 20px;" type="text"/> </div>			
	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		00

SCHEDULE 511-F	Earned Income Credit See instructions for details on qualifications and required enclosures.
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You are allowed a credit equal to 5% of the Earned Income Credit allowed on your Federal return. The credit must be prorated on the ratio of Oklahoma Adjusted Gross Income to Federal Adjusted Gross Income. Enclose a copy of your Federal return. If you are not required to file, see "Not Required to File" on page 5 of the 511 Packet for instructions.

1	Federal earned income credit	1		00
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 <div style="display: flex; align-items: center; justify-content: center; gap: 20px;"> <input style="width: 100px; height: 20px;" type="text"/> ÷ <input style="width: 100px; height: 20px;" type="text"/> </div>			
	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 28 of Form 511)	4		00

NOTE: Enclose this page **ONLY** if you have an amount shown on a schedule or are filing an amended return.



Name(s) shown on Form 511:

Your Social Security Number:

SCHEDULE 511-G Donations from Refund (Original return only)

This schedule allows you to make a donation from your refund to a variety of Oklahoma organizations. Information regarding each program, its mission, how funds are utilized, and mailing addresses are shown in Schedule 511-G Information. If you are not receiving a refund, but would like to make a donation to one of these organizations, Schedule 511-G Information lists the mailing address to mail your donation to the organization. If you are not receiving a refund and wish to donate to the Public School Classroom Support Fund, please see line 40 of Form 511.

Place an 'X' in the box associated with the dollar amount you wish 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 36 of Form 511, please list the line number of the organization to which you donated. If you donate to more than one organization, please write a "99" in the box at line 36 of Form 511.

1	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"/> \$... 1		00
2	Support of the Oklahoma National Guard	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$... 2		00
3	Support of Programs for Regional Food Banks in Oklahoma	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$... 3		00
4	Support of Domestic Violence and Sexual Assault Services	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$... 4		00
5	Support of Volunteer Fire Departments	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$... 5		00
6	Oklahoma Lupus Revolving Fund	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$... 6		00
7	Oklahoma Sports Eye Safety Program.....	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$... 7		00
8	Historic Greenwood District Music Festival Fund ..	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$... 8		00
9	Public School Classroom Support Fund.....	<input type="checkbox"/> \$2	<input type="checkbox"/> \$5	<input type="checkbox"/> \$... 9		00
10	Total donations (add lines 1-9, enter total here and on line 36 of Form 511)				10		00

Schedule 511-H: Amended Return Information

Did you file an amended Federal return? Yes No

If Yes, enclose a copy of the IRS Form 1040X or 1045 AND a copy of the "Statement of Adjustment", IRS check or deposit slip. IRS documents submitted after filing this Oklahoma amended return may delay processing.

Explain the changes to income, deductions, and/or credits below. Enter the line reference number for which you are reporting a change and give the reason. If more space is needed, enclose a separate schedule.

Information for Schedule 511-G

1- Support for Programs for Volunteers to Act as Court Appointed Special Advocates for Abused or Neglected Children

You may donate from your tax refund to support programs for volunteers to act as Court Appointed Special Advocates for abused or neglected children. Donations will be placed in the Income Tax Checkoff Revolving Fund for Court Appointed Special Advocates. Monies will be expended by the Office of the Attorney General for the purpose of providing grants to the Oklahoma CASA Association. If you are not receiving a refund, you may still donate. Mail your contribution to: Oklahoma CASA Association, Inc., P.O. Box 54946, Oklahoma City, OK 73154.

2- Support of the Oklahoma National Guard

You have the opportunity to donate from your tax refund for the benefit of providing financial relief to qualified members of the Oklahoma National Guard and their families. Donations will be placed in the Income Tax Checkoff Revolving Fund for the Support of the Oklahoma National Guard Relief Program. Monies, to assist Oklahoma National Guard members and their families with approved hardship expenses, will be expended by the Military Department. If you are not receiving a refund, you may still donate. Please mail your contribution to: Operation Homefront Task Force, 3501 Military Circle, Oklahoma City, OK 73111-4398.

Information for Schedule 511-G - continued**3- Support of Programs for Regional Food Banks in Oklahoma**

You may donate from your tax refund for the benefit of the Regional Food Bank of Oklahoma and the Community Food Bank of Eastern Oklahoma (Oklahoma Food Banks). The Oklahoma Food Banks are the largest hunger-relief organizations in the state - distributing food to charitable and faith-based feeding programs throughout all 77 counties in Oklahoma. Your donation will be used to help provide food to the more than 500,000 Oklahomans at risk of hunger on a daily basis. If you are not receiving a refund, you may still donate by mailing your contribution to: Oklahoma Department of Human Services, Revenue Processing Unit, Re: Programs for OK Food Banks, P.O. Box 248893, Oklahoma City, OK 73124.

4- Support of Domestic Violence and Sexual Assault Services

You may donate from your tax refund for the benefit of domestic violence and sexual assault services in Oklahoma that have been certified by the Attorney General. Your donation will be used to provide grants to domestic violence and sexual assault service providers for the purpose of providing domestic violence and sexual assault services in Oklahoma. The term "services" includes but is not limited to programs, shelters or a combination thereof. If you are not receiving a refund, you may still donate. Mail your contribution to: Attorney General, Domestic Violence and Sexual Assault Services Fund, 313 NE 21st Street, Oklahoma City, OK 73105.

5- Support of Volunteer Fire Departments

You may donate from your tax refund for the benefit of volunteer fire departments in Oklahoma. Your donation will be used to provide grants to volunteer fire departments in this state for the purpose of purchasing bunker gear, wildland gear and other protective clothing. If you are not receiving a refund, you may still donate. Mail your contribution to: Oklahoma State Fire Marshal, Attn: Volunteer Fire Department Fund, 2401 NW 23rd Street, Suite 4, Oklahoma City, OK 73107.

6- Oklahoma Lupus Revolving Fund

You may donate from your refund for the benefit of the Oklahoma Lupus Revolving Fund. Monies from the fund will be used by the State Department of Health to provide grants to the Oklahoma Medical Research Foundation for the purpose of funding research into treating and curing lupus in this state. If you are not receiving a refund, you may still donate. Mail your contribution to: State Department of Health, Lupus Revolving Fund, P.O. Box 268823, Oklahoma City, OK 73152-8823.

7- Oklahoma Sports Eye Safety Program

You may donate from your refund for the benefit of the Oklahoma Sports Eye Safety Program. Your donation will be used by the State Department of Health to establish a sports eye safety grant program for the purchase and distribution of sports eye safety programs and materials to Oklahoma classrooms and sports eye safety protective wear to children age 18 and under. Monies will also be used to explore opportunities to utilize nonprofit organizations to provide such safety information or equipment. If you are not receiving a refund, you may still donate. Mail your contribution to: State Department of Health, Sports Eye Safety Fund, P.O. Box 268823, Oklahoma City, OK 73152-8823.

8 - Historic Greenwood District Music Festival Fund

With part of your tax refund you can support music festivals in the Historic Greenwood District of Tulsa. Your donation will be used by the Oklahoma Historical Society to assist with music education, public concerts, and a celebration of Tulsa's and Oklahoma's musical heritage. You may also mail your contributions to: Greenwood District Music Festival Fund, Oklahoma Historical Society, 800 Nazih Zuhdi Dr., Oklahoma City, OK 73105.

9 - Public School Classroom Support Fund

Donations to the Public School Classroom Support Revolving Fund will be used by the State Board of Education to provide one or more grants annually to public school classroom teachers. Grants will be used by the classroom teacher for supplies, materials, or equipment for the class or classes taught by the teacher. Grant applications will be considered on a statewide competitive basis. You may also mail a donation to: Oklahoma State Board of Education, Public School Classroom Support Fund, Office of the Comptroller, 2500 North Lincoln Boulevard, Room 415, Oklahoma City, OK 73105-4599.



State of Oklahoma CLAIM FOR CREDIT/REFUND OF SALES TAX

Taxpayer Social Security Number	If died in 2015 or 2016, enter date of death: →
Spouse's Social Security Number	If died in 2015 or 2016, enter date of death: →

Instructions on page 2. Please read carefully as an incomplete form may delay your refund.

FORM **538-S** 2015

Taxpayer first name, middle initial and last name
Spouse's first name, middle initial and last name (if a joint return)
Mailing address (number and street, including apartment number, or rural route)
City, State and ZIP

PART 1: TAXPAYER INFORMATION

Physical address in 2015 (if different than shown in mailing address section)

Place an 'X' if you or your spouse have a physical disability constituting a substantial handicap to employment (submit proof)

Place an 'X' if you or your spouse are 65 years of age or over

Oklahoma resident for the entire year? yes no

PART 2: DEPENDENT Note: Do not enter the taxpayer or spouse as a dependent. **EXEMPTION INFORMATION**

1. Dependents (first name, middle initial, last name) If you have additional dependents, please attach schedule.	See Instructions			5. Yearly Income
	2. Age	3. Social Security Number	4. Relationship	

QUALIFIED EXEMPTIONS...

A. Yourself

B. Spouse

C. Number of your dependent children...

D. Number of other dependents

E. Total exemptions claimed (add A-D)....

PART 3: GROSS INCOME: Enter taxable and nontaxable gross income and assistance received by ALL members of your household in the year 2015.

- See "Total gross household income" definition on page 2 for examples of income.
- Enter total wages, salaries, fees, commissions, bonuses, and tips (including **nontaxable** income from your W-2s)
 - Enter total interest and dividend income received
 - Total of all dependents' income (from Part 2, column 5)
 - Social Security payments (total including Medicare)
 - Railroad Retirement benefits
 - Other pensions, annuities and IRAs
 - Alimony
 - Unemployment benefits
 - Earned Income Credit (EIC) received in 2015.....
 - Nontaxable sources of income (specify)
 - Enter **gross** (positive) income from rentals, royalties, partnerships, estates & trusts, and gains from the sale or exchange of property (taxable & nontaxable) (enclose Federal return including schedules).....
 - Enter **gross** (positive) income from business and farm (enclose Federal return including schedules)
 - Other income-including income of others living in your household (specify)
 - Total gross household income** (Add lines 1-13)
- If line 14 is over income limits shown in steps 2 and 3 on back of this form, no credit is allowed.

Yearly Income	
You may not enter negative amounts.	
1	00
2	00
3	00
4	00
5	00
6	00
7	00
8	00
9	00
10	00
You may not enter negative amounts.	
11	00
12	00
13	00
14	00

PART 4: SALES TAX CREDIT COMPUTATION (For households with gross income below allowable limits, see steps 2 and 3 on back of form.)

15. Total qualified exemptions claimed in Box E above x \$40 (credit claimed) **15** **00**

DIRECT DEPOSIT OPTION: For those NOT filing a Form 511. See page 2 for Refund Information. If you are filing a Form 511, carry the credit to Form 511, line 26.

Is this refund going to or through an account that is located outside of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No	Deposit my refund in my: <input type="checkbox"/> checking account <input type="checkbox"/> savings account	Routing Number: <input type="text"/>
		Account Number: <input type="text"/>

Under penalty of perjury, I declare the information contained in this document and any attachments is true and correct to the best of my knowledge and belief. If the Oklahoma Tax Commission may discuss this return with your tax preparer, place an 'X' here:

Taxpayer's Signature and Date	Spouse's Signature and Date	Preparer's Signature and Date
Occupation	Occupation	

NOTICE

- Persons who have received TANF (Temporary Assistance for Needy Families) for any month in the year of 2015 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, 2015 to December 31, 2015.

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?



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)



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 12/31/2015.
- You have a physical disability constituting handicap to employment (provide proof* as defined in the section below)



Yes (File Form 538-S)



No (you do not qualify to file this form)

Exceptions:

- 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, 2015, 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, you 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 or have a foreign address on your income tax return, your refund will be mailed to the address shown on your return. If you have an address with an APO, FPO or DPO, you are not considered to have a foreign address; your refund is eligible for direct deposit.

*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), worker's 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 enclose this signed form. Your return claiming the sales tax credit must be filed no later than **April 18th**. (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 **June 30**. 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 enclose 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: 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. Enclose a copy of the extension.



State of Oklahoma OTHER CREDITS FORM

FORM **511CR** 2015

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

Name as shown on return:	Social Security Number:
	-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 or Credit for Qualified Ethanol Facilities).

Attention members of pass-through entities: 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 required enclosures.

	A Unused Credit Carried Over from Prior Year(s)		B Credit Established During Current Tax Year		C Total Available Credit (A + B = C)
1 Oklahoma Investment/New Jobs Credit (enclose Form 506).....	00	1	00		00
2 Coal Credit.....	00	2	00		00
3 Credit for Investment in a Clean-Burning Motor Vehicle Fuel Property (enclose Form 567-A) Enter the number of Form(s) 567-A enclosed with this return for 3a and 3b	Number of Form(s) 567-A <input style="width: 100px; height: 20px;" type="text"/>				
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 Credit for Investment in Qualified Electric Motor Vehicle Property (placed in service before July 1, 2010) ...	00	4	Not Applicable		00
5 Small Business Capital Credit (enclose Form 527-A)	00	5	Not Applicable		00
6 Oklahoma Agricultural Producers Credit (enclose Form 520).....	00	6	Not Applicable		00
7 Small Business Guaranty Fee Credit (enclose Form 529).....	00	7	00		00
8 Credit for Employers Providing Child Care Programs	00	8	Not Applicable		00
9 Credit for Entities in the Business of Providing Child Care Services.....	00	9	00		00
10 Credit for Commercial Space Industries.....	00	10	Not Applicable		00
11 Credit for Tourism Development or Qualified Media Production Facility	00	11	Not Applicable		00
12 Oklahoma Local Development and Enterprise Zone Incentive Leverage Act Credit.....	00	12	Not Applicable		00
13 Credit for Qualified Rehabilitation Expenditures	00	13	00		00
14 Rural Small Business Capital Credit (enclose Form 526-A).....	00	14	Not Applicable		00



OTHER CREDITS FORM

Name as shown on return:	Social Security/Federal Employer Identification Number:
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	A		B		C
	Unused Credit Carried Over from Prior Year(s)		Credit Established During Current Tax Year		Total Available Credit (A + B = C)
15 Credit for Electricity Generated by Zero-Emission Facilities	00	15	00		00
16 Credit for Financial Institutions Making Loans under the Rural Economic Development Loan Act.....	00	16	00		00
17 Credit for Manufacturers of Small Wind Turbines.....	00	17	00		00
18 Credit for Qualified Ethanol Facilities	Not Applicable	18	00		00
19 Poultry Litter Credit.....	00	19	Not Applicable		00
20 Volunteer Firefighter Credit (enclose COFT's Form, see instructions on page 5)	Not Applicable	20	00		00
21 Credit for Qualified Biodiesel Facilities	Not Applicable	21	00		00
22 Credit for Breeders of Specially Trained Canines.....	00	22	Not Applicable		00
23 Credit for Modification Expenses Paid for an Injured Employee.....	Not Applicable	23	00		00
24 Dry Fire Hydrant Credit	00	24	Not Applicable		00
25 Credit for the Construction of Energy Efficient Homes	00	25	00		00
26 Credit for Railroad Modernization.....	00	26	00		00
27 Research and Development New Jobs Credit (enclose Form 563).....	00	27	00		00
28 Credit for Stafford Loan Origination Fee (for banks & credit unions filing Form 512).....	00	28	Not Applicable		00
29 Credit for Biomedical Research Contribution	00	29	00		00
30 Credit for Employees in the Aerospace Sector (enclose Form 564).....	00	30	00		00
31 Credits for Employers in the Aerospace Sector (enclose Form 565).....	Not Applicable	31	00		00
32 Wire Transfer Fee Credit	00	32	00		00
33 Credit for Manufacturers of Electric Vehicles.....	00	33	Not Applicable		00
34 Credit for Cancer Research Contribution	00	34	00		00
35 Oklahoma Capital Investment Board Tax Credit.....	Not Applicable	35	00		00
36 Credit for Contributions to a Scholarship-Granting Organization	00	36	00		00
37 Credit for Contributions to an Educational Improvement Grant Organization	00	37	00		00
38 Credit for Venture Capital Investment (enclose Form 518-A or 518-B).....	00	38	00		00
39 Total (add lines 1 through 38)		39			00

Enter on the applicable line of income tax return and enter the number in the box for the type of credit. If more than one credit is claimed, enter "99" in the box.