

Oklahoma Resident Income Tax Return

Form 511
2022



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-I. →

Name and Address - Please Print or Type

Your First Name	Middle Initial	Last Name	If a Joint Return, Spouse's First Name	Middle Initial	Last Name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Mailing Address (Number and street, including apartment number, rural route or PO Box)			City	State	ZIP or Postal Code	Country
<input type="text"/>			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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
<input type="text"/>	<input type="text"/>

4 Head of household with qualifying person

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

*** Note:** If claiming **Special Exemption**, see instructions on page 9 of 511 Packet.

	Regular	* Special	Blind	
Exemptions	Yourself	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Spouse	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number of dependents				<input type="text"/>
Add the Totals from boxes (a), (b) and (c). Enter the TOTAL here:				<input type="text"/>

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

Age 65 or Older? (Please see instructions) Yourself Spouse

PART ONE: TO ARRIVE AT OKLAHOMA ADJUSTED GROSS INCOME

		Round to Nearest Whole Dollar	
1	Federal adjusted gross income (from Federal 1040 or 1040-SR).....	1	00
2	Oklahoma Subtractions (provide Schedule 511-A).....	2	00
3	Line 1 minus line 2.....	3	00
4	Out-of-state income, except wages. Describe (4a) (Provide Federal schedule with detailed description; see instructions).....	4b	00
5	Line 3 minus line 4b.....	5	00
6	Oklahoma Additions (provide Schedule 511-B).....	6	00
7	Oklahoma adjusted gross income (line 5 plus line 6)..... (If line 7 is different than line 1, provide a copy of your Federal return.)	7	00

PART TWO: OKLAHOMA TAXABLE INCOME, TAX AND CREDITS

8	Oklahoma Adjustments (provide Schedule 511-C).....	8	00
9	Oklahoma income after adjustments (line 7 minus line 8).....	9	00

STOP AND READ: If line 4b is zero, complete lines 10-11. If line 4b is more than zero, see Schedule 511-E and do not complete lines 10-11.



Name(s) Shown on Form 511:

Your Social Security Number:

PART TWO: OKLAHOMA TAXABLE INCOME, TAX AND CREDITS continued

10	Oklahoma itemized deductions (from Schedule 511-D, line 11) or Oklahoma standard deduction (Single or Married Filing Separate: \$6,350 • Married Filing Joint or Qualifying Widow(er): \$12,700 • Head of Household: \$9,350).....	10	00
11	Exemptions: Enter the total number of exemptions claimed on page 1..... <input type="text"/> X \$1,000.....	11	00
12	Total deductions and exemptions (add lines 10 and 11 or amount from Sch. 511-E, line 5).....	12	00
13	Oklahoma Taxable Income (line 9 minus line 12)	13	00
14	(a) Oklahoma Income Tax from Tax Table (see pages 28-39 of instructions) or if using Farm Income Averaging, enter tax from Form 573, line 22 and enter a "1" in box on line 14	14a	00
	(b) If paying the Health Savings Account additional 10% tax, add additional tax here and enter a "2" in box on line 14. If recapturing the Oklahoma Affordable Housing Tax Credit, add recaptured credit here and enter a "3" in box on line 14. If making an Oklahoma installment payment pursuant to IRC Section 965(h) and 68 OS Sec. 2368(K), add the installment payment here and enter a "4" in the box on line 14	14b	00
	Oklahoma Income Tax (line 14a plus line 14b)	14	00

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 Schedules 511-F and 511-G.

15	Oklahoma child care/child tax credit (see instructions).....	15	00
16	Credit for taxes paid to another state (provide Form 511TX).....	16	00
17	Form 511CR - Other Credits Form. List 511CR line number claimed here:..... <input type="text"/>	17	00
18	Income Tax (line 14 minus lines 15-17) Do not enter less than zero	18	00

DO NOT PAY THIS AMOUNT. PAYMENT IS FIGURED ON LINE 42.

PART THREE: TAX, CREDITS AND PAYMENTS

19	Use tax due on Internet, mail order, or other out-of-state purchases.....	19	00
	(For use tax table, see page 14 of the Packet) If you certify that no use tax is due, place an 'X' here: <input type="checkbox"/>		
20	Balance (add lines 18 and 19)	20	00
21	Oklahoma withholding (provide all W-2s, 1099s or other withholding statements) ..	21	00
22	2022 estimated tax payments (qualified farmer <input type="checkbox"/>)	22	00
23	2022 payment with extension	23	00
24	Low Income Property Tax Credit (provide Form 538-H).....	24	00
25	Sales Tax Relief Credit (provide Form 538-S).....	25	00
26	Natural Disaster Tax Credit (provide Form 576).....	26	00
27	Credit from Form 578	27	00
28	Oklahoma earned income credit (see instructions).....	28	00
29	Amount paid with original return plus additional paid after it was filed (amended return only).....	29	00



Name(s) Shown on Form 511:

Your Social Security Number:

PART THREE: TAX, CREDITS AND PAYMENTS continued

30	Payments and credits (add lines 21-29 from page 2).....	30	00
31	Overpayment, if any, as shown on original return and/or prior amended return(s) or as previously adjusted by Oklahoma (amended return only).....	31	00
32	Total payments and credits (line 30 minus 31).....	32	00

PART FOUR: REFUND

33	If line 32 is more than line 20, subtract line 20 from line 32. This is your overpayment.....	33	00
34	Amount of line 33 to be applied to 2023 estimated tax (original return only) (For further information regarding estimated tax, see page 5 of the 511 Packet.)	34	00

Schedule 511-H 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-H in the box below. If you give to more than one organization, put a "99" in the box. Provide Schedule 511-H.....

35	Donations from your refund (total from Schedule 511-H).....	35	00
36	Total deductions from refund (add lines 34 and 35).....	36	00
37	Amount to be refunded to you (line 33 minus line 36).....	37	00

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**. See the 511 Packet for direct deposit and debit card information.

Is this refund going to or through an account that is located outside of the United States? Yes No

Deposit my refund in my:

Checking Account Routing Number: _____

Savings Account Account Number: _____

PART FIVE: AMOUNT YOU OWE

38	If line 20 is more than line 32, subtract line 32 from line 20. This is your tax due.....	38	00
39	Donation: Public School Classroom Support Fund (original return only).....	39	00
40	Underpayment of estimated tax interest (annualized installment method) .. (If you have an underpayment of estimated tax (line 40) & overpayment (line 33), see instructions.)	40	00
41	For delinquent payment add penalty of 5% \$ _____ plus interest of 1.25% per month \$ _____	41	00
42	Total tax, donation, penalty and interest (add lines 38-41).....	42	00

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.....

Taxpayer's Signature	Date	Spouse's Signature	Date	Paid Preparer's Signature	Date
Taxpayer's Occupation		Spouse's Occupation		Paid Preparer's Address and Phone Number	
Daytime Phone (optional)		Daytime Phone (optional)		Paid Preparer's PTIN	

Do not staple documentation to this form. To attach items, please use a paper clip.
Mailing Address for this form: PO 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.



Note: Provide 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 on pages 16-19.

1	Interest on U.S. government obligations.....	1	<input type="text"/>	00
2	Social Security benefits taxed on your Federal Form 1040 or 1040-SR.....	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.....	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 (see instructions for limitation).....	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 (provide schedules)..... Loss Year(s) <input type="text"/>	9	<input type="text"/>	00
10	Exempt tribal income (see instructions for qualifications).....	10	<input type="text"/>	00
11	Gains from the sale of exempt government obligations.....	11	<input type="text"/>	00
12	Oklahoma Capital Gain Deduction (provide Form 561).....	12	<input type="text"/>	00
13	Income Tax Refund (Federal Form 1040 or 1040-SR, Schedule 1, line 1).....	13	<input type="text"/>	00
14	Oklahoma income distributed by an electing PTE.....	14	<input type="text"/>	00
15	Miscellaneous: Other subtractions (enter number in box for type of deduction)..... <input type="text"/>	15	<input type="text"/>	00
16	Total subtractions (add lines 1-15, enter total here and on line 2 of Form 511).....	16	<input type="text"/>	00

Schedule 511-B: Oklahoma Additions See instructions on pages 20-21.

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	Oklahoma loss distributed by an electing PTE.....	7	<input type="text"/>	00
8	Miscellaneous: Other additions (enter number in box for type of addition)..... <input type="text"/>	8	<input type="text"/>	00
9	Total additions (add lines 1-8, enter total here and on line 6 of Form 511).....	9	<input type="text"/>	00



Note: Provide this page ONLY if you have an amount shown on a schedule.

Name(s) Shown on Form 511:

Your Social Security Number:

Schedule 511-C: Oklahoma Adjustments See instructions on pages 21-24.

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

Schedule 511-D: Oklahoma Itemized Deductions See instructions on page 24.

If you claimed itemized deductions on your Federal return, you must claim Oklahoma Itemized Deductions.

1	Federal itemized deductions from Federal Sch. A, line 17	1		00
2	State and local sales or income taxes from Federal Sch. A, line 5a (If Federal Sch A, line 5e is limited, enter that portion of Federal Sch A, line 5a included in line 5e)....	2		00
3	Line 1 minus line 2	3		00
4	Medical and Dental expenses from Federal Sch. A, line 4	4		00
5	Gifts to Charity from Federal Sch. A, line 14	5		00
6	Line 3 minus lines 4 and 5	6		00
7	Is line 6 more than \$17,000? <input type="checkbox"/> YES. Your itemized deductions are limited. Complete lines 9-11. <input type="checkbox"/> NO. Your itemized deductions are not limited. Skip lines 9 and 10. Go to line 11.			
8	Maximum amount allowed for itemized deductions. (exception, lines 9 and 10)	8	17,000	00
9	Medical and Dental expenses from Federal Sch. A, line 4	9		00
10	Gifts to Charity from Federal Sch. A, line 14	10		00
11	Oklahoma Itemized Deductions If you responded YES on line 7: Add lines 8, 9 and 10 If you responded NO on line 7: enter the amount from line 3	11		00

Enter your Oklahoma Itemized Deductions on line 10 of Form 511 unless you have income from out-of-state on line 4 of Form 511. If you have an amount on line 4 of Form 511, complete Schedule 511-E "Deductions and Exemptions" to determine the amount to enter on line 12 of Form 511.



Note: Provide this page ONLY if you have an amount shown on a schedule.

Name(s) Shown on Form 511:

Your Social Security Number:

Schedule 511-E: Deductions and Exemptions See instructions on pages 24-25.

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 claimed itemized deductions on your federal return, complete Schedule 511-D before completing this schedule.

1	Oklahoma itemized deductions (Schedule 511-D, line 11) or Oklahoma standard deduction.....	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;"> <div style="border: 1px solid black; width: 150px; height: 25px; margin-right: 10px;"></div> <div style="font-size: 24px; margin: 0 10px;">÷</div> <div style="border: 1px solid black; width: 150px; height: 25px; margin-left: 10px;"></div> </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 - 11 of Form 511 blank.).....	5		00

Schedule 511-F: Child Care/Child Tax Credit See instructions on page 25.

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.

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.

Provide 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;"> <div style="border: 1px solid black; width: 150px; height: 25px; margin-right: 10px;"></div> <div style="font-size: 24px; margin: 0 10px;">÷</div> <div style="border: 1px solid black; width: 150px; height: 25px; margin-left: 10px;"></div> </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



Note: Provide this page ONLY if you have an amount shown on a schedule.

Name(s) Shown on Form 511:

Your Social Security Number:

Schedule 511-G: Earned Income Credit See instructions on page 25.

You are allowed a credit equal to 5% of the federal earned income credit calculated using the same requirements for calculating the earned income tax credit for federal income tax purposes in effect for the 2020 income tax year. The credit must be prorated on the ratio of Oklahoma Adjusted Gross Income to Federal Adjusted Gross Income. **Provide** a copy of your Federal return.

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;"> <div style="border: 1px solid black; width: 150px; height: 20px; margin-right: 10px;"></div> <div style="font-size: 24px; margin-right: 10px;">÷</div> <div style="border: 1px solid black; width: 150px; height: 20px; margin-left: 10px;"></div> </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

Schedule 511-H: 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-H Information. If you are not receiving a refund, but would like to make a donation to one of these organizations, Schedule 511-H Information lists the mailing address to mail your donation to the organization. If you are not receiving a refund and wish to donate to Public School Classroom Support Fund, see line 39 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 35 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 35 of Form 511.

See Packet 511, pages 25 and 26 for Schedule 511-H Information.

1	Support of Programs for Volunteers to Act as Court Appointed Special Advocates for Abused or Neglected Children.....	\$2	\$5	\$	1		00
2	Y.M.C.A. Youth and Government Program	\$2	\$5	\$	2		00
3	Support Wildlife Diversity Fund	\$2	\$5	\$	3		00
4	Support of Programs for Regional Food Banks in Oklahoma	\$2	\$5	\$	4		00
5	Public School Classroom Support Fund.....	\$2	\$5	\$	5		00
6	Oklahoma Pet Overpopulation Fund	\$2	\$5	\$	6		00
7	Support the Oklahoma AIDS Care Fund	\$2	\$5	\$	7		00
8	Support Oklahoma Silver Haired Legislature and Alumni Association Program	\$2	\$5	\$	8		00
9	Total donations (add lines 1-8, enter total here and on line 35 of Form 511).....				9		00

