

Oklahoma Resident Fiduciary Return of Income

FORM 513 IS FOR RESIDENTS ONLY. NONRESIDENTS USE FORM 513-NR.

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, 2024, or other taxable year beginning <input type="text"/> ending <input type="text"/>		IMPORTANT!	
2024		Was a Fiduciary Income Tax Return filed for the previous year? Yes <input type="checkbox"/> No <input type="checkbox"/>	

Name of Estate or Trust	Federal Employer Identification Number	Date Entity Created
<input type="text"/>	<input type="text"/>	<input type="text"/>

Address of Fiduciary (Number and street)	Name of Fiduciary	Title of Fiduciary
<input type="text"/>	<input type="text"/>	<input type="text"/>

City	State or Province	Country	ZIP or Foreign Postal Code:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Place an 'X' in all applicable boxes:

<input type="checkbox"/> Decedent's Estate	<input type="checkbox"/> Grantor Type Trust	<input type="checkbox"/> Pooled Income Fund
<input type="checkbox"/> Simple Trust	<input type="checkbox"/> Complex Trust	<input type="checkbox"/> Bankruptcy Estate
<input type="checkbox"/> ESBT	<input type="checkbox"/> Charitable Trust	
<input type="checkbox"/> Other (describe): <input type="text"/>	Number of Beneficiaries: <input type="text"/>	

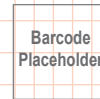
Place an 'X' if: (1) Initial Return (2) Final Return (3) Amended Return (See Schedule 513-X on page 5)

PART 1 Important: Provide a copy of your Federal return. Also provide a schedule for Oklahoma amounts when different from Federal.

INCOME (PROVIDE NECESSARY SCHEDULE(S) FOR LINES 2-10)

1	Interest income (except government obligations).....
2	Interest on obligations of the United States
3	State and municipal interest
4	Dividends.....
5	Business income or (loss)
6	Capital gain or (loss)
7	Rents, royalties, partnerships, other estates and trusts, etc
8	Farm income or (loss)
9	Ordinary gain or (loss).....
10	Other income (state nature of income).....
11	Total income (add lines 1 through 10)

Column A		Column B	
As reported on Federal return		Total applicable to Oklahoma	
<input type="text"/>	00	1	<input type="text"/>
<input type="text"/>	00	2	<input type="text"/>
<input type="text"/>		3	00
<input type="text"/>	00	4	00
<input type="text"/>	00	5	00
<input type="text"/>	00	6	00
<input type="text"/>	00	7	00
<input type="text"/>	00	8	00
<input type="text"/>	00	9	00
<input type="text"/>	00	10	00
<input type="text"/>	00	11	00



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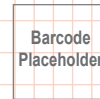
PART 1 Important: Provide a copy of your Federal return. Also provide a schedule for Oklahoma amounts when different from Federal.

DEDUCTIONS

12	Interest (provide schedule).....
13	Taxes (provide schedule)
14	Fiduciary fees (provide waiver for estates)
15	Charitable deduction
16	Attorney, accountant, and return preparer fees.....
17	Oklahoma capital gain deduction (provide Form 561-F)
18	Other deductions (provide schedule)
19	Income distribution deduction (use Oklahoma Schedule K-1; see instructions).....
20	Federal estate tax deduction (provide schedule)
21	Exemption
22	Total deductions (add lines 12 through 21).....
23	Taxable income of fiduciary (subtract line 22 from line 11).....

	Column A		Column B
	As reported on Federal return		Total applicable to Oklahoma
00	12		00
00	13		00
00	14		00
00	15		00
00	16		00
	17		00
00	18		00
00	19		00
00	20		00
00	21		00
00	22		00
00	23		00

24	Tax on amount on line 23, Column B (from tax table - see 513 Packet) If an ESBT or Charitable Trust, see the instructions and enter "1" in the box. If recapturing the Oklahoma Affordable Housing Tax Credit, add the recaptured credit here and enter a "2" in the box. 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 "3" in the box.....		24		00
25	Credits: Enter number in box for type of credit. Provide Form 511-CR. (See instructions)		25		00
26	Balance of tax due (subtract line 25 from line 24, but not less than zero).....		26		00
27	2024 Oklahoma estimated tax payments (i.e. Form(s) OW-8-ESC and prior year overpayment carryforward)	27		00	
28	Amount paid with extension request.....	28		00	
29	Oklahoma withholding (provide Form 1099, 500-B or other withholding statement).....	29		00	
30	Refundable Credit from Form 578	30		00	
31	Amount paid with original return and amount paid after it was filed (amended return only)	31		00	
32	Any refunds or overpayment applied (amended return only)	32 () 00	
33	Total of lines 27 through 32	33		00	



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Amount from line 33 on page 2 00

34	If line 33 is larger than line 26, enter amount overpaid (line 33 minus line 26).....	34	00
35	Amount of line 34 to be credited to 2025 estimated tax (original return only)	35	00
36	Amount of line 34 to be refunded to you (line 34 minus line 35).....	Refund 36	00

Want a Faster Refund? →

Elect to have your refund directly deposited into your checking or savings account.

For Direct Deposit information, see page 18 of the 513 Packet.

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 Savings Account

Routing Number:

Account Number:

37	If line 26 is larger than line 33, enter tax due (line 26 minus line 33)	Tax Due 37	00
38	Underpayment of estimated tax interest.....Annualized <input type="checkbox"/>	38	00
39	For delinquent payment, add penalty of 5%.....\$ _____ plus interest at 1.25% per month\$ _____	39	00
40	Total tax, penalty and interest (add lines 37, 38 and 39).....	Balance Due 40	00

If you have asked for an extension from the IRS, place an 'X' here and provide a copy with this return

If the Tax Commission may discuss this return with your tax preparer, place an 'X' here

Make check payable to the Oklahoma Tax Commission

Under penalties of perjury, I declare I have examined this return, including accompanying statements, and to the best of my knowledge and belief it is true, correct and complete. If prepared by person other than the taxpayer, this declaration is based on all information of which preparer has any knowledge.

Signature of Fiduciary		Date		Signature of Preparer		Date	
Printed Name of Fiduciary		Fiduciary Email Address		Printed Name of Preparer		Preparer Email Address	
Title of Fiduciary		Phone Number		Phone Number		Preparer's PTIN	

Mailing address for this form: Oklahoma Tax Commission, 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.

Form 513 - page 4 Oklahoma Schedule K-1	Part 2: Beneficiary's Share of Income and Deductions	2024
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For calendar year 2024 or fiscal year beginning _____, 2024 and ending _____, _____.	<input type="checkbox"/> Amended K-1 <input type="checkbox"/> Final K-1 <input type="checkbox"/> Nonresident
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Name of Estate or Trust	
Beneficiary's FEIN/SSN	Estate's or Trust's Federal Employer Identification Number
Beneficiary's Name, Address and ZIP	Fiduciary's Name, Address and ZIP

	FEDERAL	OKLAHOMA
INCOME		
1 Interest..... 1		
2 Dividends..... 2		
3 Short-term capital gain (or loss) 3		
4 Long-term capital gain (or loss) 4		
5 Other taxable income:		
a. Annuities, royalties and other nonbusiness income 5a		
b. Trade or business, rental real estate and other business income 5b		
6 State and municipal interest 6		
7 U.S. interest..... 7		

DEDUCTIONS		
8 a. Depreciation, depletion, amortization attributable to line 5a 8a		
b. Depreciation, depletion, amortization attributable to line 5b 8b		
9 Expenses allocable to Federally-exempt income 9		
10 Expenses allocable to Oklahoma-exempt income..... 10		
11 Deductions in the final year of trust or decedent's estate:		
a. Excess deductions on termination 11a		
b. Net operating loss carryover 11b		
12 Withholding..... 12		
13 Other:		
a. _____ 13a		
b. _____ 13b		
c. _____ 13c		
d. _____ 13d		
e. _____ 13e		
f. _____ 13f		
g. _____ 13g		

