# Form 511NR 2018

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## OKLAHOMA NONRESIDENT/ PART-YEAR INCOME TAX RETURN

Your	Social Security Number	Place an 'X' in this box	AMENDED RETURN!					
	se's Social Security Number eturn only)	Place an 'X' in this box if this taxpayer is deceased ▶	Place an 'X' in this box if this is an amended 511NR. See Schedule 511NR-H.					
AND ADDRESS	Your first name, middle initial and  If a joint return, spouse's first nam  Mailing address (number and stre	e, middle initial and last nam		Not	Droup	ED TO FILE		
NAME AN	City, State and ZIP		,	Place	an 'X' in ne from (	this box if you are a no Oklahoma sources is les is)	s th	an \$1,000.
FILING STATUS	<ul> <li>Married filing sep</li> <li>If spouse is also filing, name and SSN in the</li> <li>Head of household</li> </ul>	hoxes: SSN: Name: SSN: Note that the state of the state o	erson t child	EXEMPTIONS	Yourself	REGULAR *SPECIAL BL + +  NUMBER OF DEPENDE	NTS	ADD THE TOTALS FROM THE 3 BOXES. WRITE THE TOTAL IN THE BOX BELOW. TOTAL
RESIDENCY STATUS	Part-Year Resident Resident/Part-Year	ate of Residence: t(s) From Resident/Nonresid Yourself	to dent	Age	"0" IN THE	ER? (Please see instructions)	AR E	Yourself Spouse
Col	MPLETE SCHEDULE 51	1NR-1 "INCOME	ALLOCATION FO	l OR No	NRFSII	Please Round to No		R RESIDENTS" to arrive at
	homa Source Income (line 1) a					DERAL AMOUNT	]	OKLAHOMA AMOUNT
2 3 4 5 6	Oklahoma source income Federal adjusted gross in Oklahoma additions: Scheo Add lines (Federal 2 and 3) Oklahoma subtractions: Sch Adjusted gross income: Okl Adjusted gross income: All	come (Schedule 511 dule 511NR-A, line 7 and then (Oklahoma nedule 511NR-B, line a. Source (line 4 mi	INR-1, line 18) a 1 and 3) e 16 nus line 5)			00 00 00 00	3 4 5 6	00   00   00   00
8 9 10 11	Adjusted gross income: A Oklahoma Adjustments (S Income after adjustments Oklahoma itemized deduc or Oklahoma standard of	chedule 511NR-C, li (line 8 minus line 9) . tions (Schedule 511I	ne 7) NR-D, line 11)				9	00 00 00
12 13 14	Married Filing Joint or Questions: Enter the total Total deductions and exemolation of Collahoma Taxable Income Collahoma Income Tax from the Collahoma Income Tax from the Collahoma Income Tax from the Collahoma Income Tax	Il number of exempti nptions (add lines 11 ne: (line 10 minus lin	ons claimed above and 12)e 13)		X \$1,0	000	. 12 . 13	00 00 00 00
	and enter a "1" in box. If pay tax here and enter a "2" in b	ring the Health Saving	s Account additional	10% ta	x, add ad	ditional	15	00
STO	P AND READ: If line 7 is equal							
16 17	Oklahoma child care/ch Subtract line 16 from lin							00

В	arco	de
Plac	ceho	lde

#### 2018 Form 511NR - Nonresident/Part-Year Income Tax Return - Page 2

Nam on F	e(s) shown orm 511NR:		Your Social Security Number	er:
18	Amount from line 17 on page 1		18	00
10	Toursenanteses Old 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
19	Tax percentage: Oklahoma Amount (from line 6) a)  - Federal Amount (from line 7) b)		19	lo.
20	Oklahoma Income Tax. Multiply line 18 by line 19		19	%
	If recapturing the Oklahoma Affordable Housing Tax Credit, add recaptured credit here and enter a "1" in b an Oklahoma installment payment pursuant to IRC Section 965(h) and 68 O.S. Sec. 2368(K),	ox. If	f making	
	an Oklahoma installment payment pursuant to IHC Section 965(h) and 68 O.S. Sec. 2368(k), add the installment payment here and enter a "2" in the box)	Г	20	00
21	Oklahoma earned income credit (Sch. 511NR-F, line 4)			00
22	Credit for taxes paid to another state (provide Form 511TX) nonresidents do not			00
23	Form 511CR - Other Credits Form - List 511CR line number claimed here:	]	23	00
24	Line 20 minus lines 21, 22 and 23(Do not enter less that	n ze	ero) 24	00
25	Use tax due on Internet, mail order, or other out-of-state purchases while living in Ok			
Ш	If you certify that no use tax is due, place an 'X' here:  Balance (add lines 24 and 25)			00
26	Balance (add lines 24 and 25)			00
27	Oklahoma withholding (provide W-2s, 1099s or withholding statement) 27		00	
28	2018 Oklahoma estimated tax payments			
	If you are a qualified farmer, place an 'X' here:		00	
29 30	Credits from Forma) 577b) 57830		00	
31	Amount paid with original return plus additional paid after it was filed			
"	(amended return only)31		00	
32	Payments and credits (add lines 27-31)		1 1	00
33	Overpayment, if any, as shown on original return and/or prior amended return(s)			
	previously adjusted by Oklahoma (amended return only)			00
34	Total payments and credits (line 32 minus line 33)			00
35	If line 34 is more than line 26, subtract line 26 from line 34. This is your overpay	me	<b>nt</b> 35	00
36	Amount of line 35 to be applied to 2019 estimated tax		00	
Sche	(original return only) (see page 4 of 511NR Packet for further information)36edule 511NR-G provides you with the opportunity to make a financial gift from your refund to a variety of	Okla		
orga	nizations. Please place the line number of the organization from Schedule 511NR-G in the box below. If	you (	give to	
$\overline{}$	than one organization, put a "99" in the box. Provide Schedule 511NR-G.			
37	Donations from your refund (total from Schedule 511NR-G)37			la a
38	Total deductions from refund (add lines 36 and 37)			00
39	Amount to be <b>refunded</b> (line 35 minus line 38)	•••••	39	00
Di	irect Deposit Note: Is this refund going to or through an account that is located outside	de of	the United 9	States?
	y your account and routing numbers are Deposit my refund in my: Checking Account			
ı corre	ect. If your direct deposit fails to process		a 1 go 7	
	u do not choose direct deposit, you will ve a debit card. See the 511NR Packet lead to the card. See the 51NR Packet lead to the card information.			
(lor di	irect deposit and debit card information.			
40	If line 26 is more than line 34, subtract line 34 from line 26. This is your tax due		40	00
41	Donation: Support the Oklahoma General Revenue Fund (original return only)			00
42	Underpayment of estimated tax interest (annualized installment method )			00
43	For delinquent payment add penalty of 5%\$\$			
Ш	plus interest of 1.25% per month\$\$		43	00
44	Total tax, donation, penalty and interest (add lines 40-43)		44	00
Under	penalty of perjury, I declare the information contained in this document, and all  Place an 'X' in this box if the Oklahoma Tax Co	ommis	sion	
	ments and schedules, is true and correct to the best of my knowledge and belief. may discuss this return with your tax prepare	r		
Тахра	yer's signature Date Spouse's signature Date Paid Pr	repare	r's signature	Date
Тахра	ayer's occupation Spouse's occupation Paid Pr	repare	r's address and	I phone number
Daytir	me Phone Number (optional)  A COPY OF FEDERAL RETURN			
		repare	er's PTIN	

2018 Form 511NR - Nonresident/Part-Year Income Tax Return - Page 3 NOTE: Provide this page with your return.

Name(s) shown on Form 511NR:	Your Social Security Number:

## SCHEDULE 511NR-1

## **Income Allocation for Nonresidents and Part-Year Residents**

Lines 1-18: 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.

		FEDERAL AMOUNT	_	OKLAHOMA AMOUNT
1	Wages, salaries, tips, etc	00	1	00
2	Taxable interest income	00	2	00
3	Dividend income	00	3	00
4	Taxable IRA pensions and annuities	00	4	00
5	Taxable Social Security benefits (also enter on line 2 of Sch. 511NR-B)	00	5	00
6	Taxable refunds (state income tax)	00	6	00
7	Alimony received	00	7	00
8	Business income or (loss) (Federal Schedule C)	00	8	00
9	Capital gains or losses (Federal Schedule D)	00	9	00
10	Other gains or losses (Federal Form 4797)	00	10	00
11	Rental real estate, royalties, partnerships, etc	00	11	00
12	Farm income or (loss)	00	12	00
13	Unemployment compensation	00	13	00
14	Other income (identify:)	00	14	00
15	Add lines 1 through 14	00	15	00
16	Total Federal adjustments to income (identify:)	00	16	00
17	Oklahoma source income (line 15 minus line 16) Enter here and on page 1, line 1	ļee	17	00
18	Federal adjusted gross income (line 15 minus line 16) Enter here and on page 1, line 2	00	18	

S	CHEDULE 511NR-A Oklahoma Ad	ditions See instructions qualification		ctions for details on ons and required documents.	
		FEDERAL /	AMOUNT		OKLAHOMA AMOUNT
1	State and municipal bond interest		00	1	00
2	Lump sum distributions (not included in your Federal AGI)		00	2	00
3	Federal net operating loss		00	3	00
4	Recapture depletion claimed on a lease bonus or add back of excess Federal depletion		00	4	00
5	Recapture of contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account(s)		00	5	00
6	Miscellaneous: Other additions		00	li	00
7	Total additions		00	7	00

2018 Form 511NR - Nonresident/Part-Year Income Tax Return - Page 4 NOTE: Provide this page <u>ONLY</u> if you have an amount shown on a schedule.

Name(s) shown on Form 511NR:	Your Social Security Number:
	 1

S	снеD∪Lе 511NR-В ∥ <b>Oklahoma Sub</b>	otractions See instractions qualifica	ruction	ons for details on as and required documents.
		FEDERAL AMOUNT		OKLAHOMA AMOUNT
1	Interest on U.S. government obligations	00	1	00
2	Taxable Social Security (from Schedule 511NR-1, line 5)	00	2	00
3	Federal civil service retirement in lieu of social security	00	3	00
	- Retirement Claim Number: SPOUSE NUMBER SPOUSE NUMBER			
4	Military Retirement (see instructions for limitation)	00	4	00
5	Oklahoma government or Federal civil service retirement	00	5	00
6	Other retirement income	00	6	00
7	U.S. Railroad Retirement Board Benefits	00	7	00
8	Additional depletion	00	8	00
9	Oklahoma net operating loss (Loss Year[s] ) (Provide Schedules)	00	9	00
10	Exempt tribal income (see instructions for qualifications)	00	10	00
11	Gains from the sale of exempt government obligations	00	11	00
12	Nonresident military wages (provide W-2)	00	12	
13	Oklahoma Capital Gain Deduction (Provide Form 561NR)	00	13	00
14	Income Tax Refund (Federal Form 1040, Schedule 1, line 10)	00	14	00
15	Miscellaneous: Other subtractions	00	15	00
16	Total subtractions	00	İΓ	00
S	CHEDULE 511NR-C Oklahoma Adj	ustments See instruction	ructi ation	ions for details on a sand required documents.
1	Military pay exclusion - Active Duty, Reserve and National Gua			00
2	Qualifying disability deduction (residents and part-year residen	nts only)	2	00
3	Qualified adoption expense		3	00
4	Contributions to Oklahoma 529 College Savings Plan and Oklaho	nomaDream 529 Account(s)	4	00
5	Deductions for providing foster care		5	00
6	Miscellaneous: Other adjustments (enter number in box for the tyբ	/pe of deduction ))	6	00
7	Total Adjustments (add lines 1-6, enter total here and on line	9 of Form 511NR)	7	00

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	8 Form 511NR - Nonresident/Part-Year Income Tax Return - Page 5 FE: Provide this page <u>ONLY</u> if you have an amount shown on a schedule.	
Nam on F	re(s) shown Form 511NR:  Your Sc Security	ocial y Number:
S	CHEDULE 511NR-D Oklahoma Itemized Deduction	ns
If yo	ou claimed itemized deductions on your Federal return, you must claim Oklahoma Itemize	d Deductions.
1	Federal itemized deductions from Federal Sch. A, line 17 1	
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)	
3	Line 1 minus line 2	00
4	Medical and Dental expenses from Federal Sch. A, line 4 4	
5	Gifts to Charity from Federal Sch. A, line 14 5	
6	Line 3 minus lines 4 and 56	00
7	Is line 6 more than \$17,000?	·
	YES. Your itemized deductions are limited. Complete lines 9-11.	
	NO. Your itemized deductions are not limited. Skip lines 9 & 10. Go to line 11.	
8	Maximum amount allowed for itemized deductions. (exception, lines 9 & 10) 8	17,000 00
9	Medical and Dental expenses from Federal Sch. A, line 4	00
10	Gifts to Charity from Federal Sch. A, line 14	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	00
Ent	ter your Oklahoma Itemized Deductions on line 11 of Form 511NR.	
	CHEDULE 511NR-E Child Care/Child Tax Credit	ee instructions for details on qualifications nd required documents.
If yo	our Federal Adjusted Gross Income is \$100,000 or less and you are allowed either a credit for child of credit on your Federal return, then as a resident, part-year resident or nonresident military, you are allowed tax. Your Oklahoma credit is the <b>greater</b> of:  • 20% of the credit for child care expenses allowed by the IRS Code. Your allowed Federal credit of your Federal tax reported on your Federal return, <b>OR</b>	care expenses or the child allowed a credit against your cannot exceed the amount of
	<ul> <li>5% of the child tax credit allowed by the IRS Code. This includes both the nonrefundable child tax additional child tax credit.</li> </ul>	x credit and the refundable
Fed	credit must be prorated based on the ratio of Adjusted Gross Income: All sources to Federal Adjust eral Adjusted Gross Income is greater than \$100,000, no credit is allowed. Provide a copy of your Federal child care credit schedule.	
1	Enter your Federal child <u>care</u> credit	
3	Multiply line 1 by 20%	
	(total of child tax credit & additional child tax credit)3	
5	Multiply line 3 by 5%	100

Divide the amount on line 7 of Form 511NR by the amount on line 2 of Form 511NR

Multiply line 5 by line 6. This is your Oklahoma child care/child tax credit.

Enter the percentage from the above calculation here (do not enter more than 100%) ....... 6

Enter total here and on line 16 of Form 511NR.....

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#### 2018 Form 511NR - Nonresident/Part-Year Income Tax Return - Page 6

NOTE: Provide this page <u>ONLY</u> if you have an amount shown on a schedule or are filing an amended return.

Name(s) shown on Form 511NR:				Your Social Security Number:	
SCHEDULE 511NR-F	Earned In	come	Credi	See instructions for and required docume	details on qualifications ents.
Residents and part-year residents are allow The credit must be prorated on the ratio of C		Federal AG	I. Provide a c		
Federal earned income credit	511NR by the amount	on line 2 of	Form 511NF	2 3 3	00 00 % 00
SCHEDULE 511NR-G	Donations	s from	Refur	1d (Original retu	ırn only)
This schedule allows you to make a donation gram, its mission, how funds are utilized and Packet. If you are not receiving a refund but lists the mailing address to mail your donation Oklahoma General Revenue Fund, see line Place an 'X' in the box associated with the dot Then carry that figure over into the column a number of the organization to which you don Form 511NR.	mailing addresses are would like to make a do n to the organization. If 41 of Form 511NR. bllar amount you wish to the right. When you cated. If you donate to m	shown in Sch nation to one you are not r have deductery your figure	nedule 511NF of these org receiving a re- ted from your re back to line	R-G Information on pa anizations, Schedule fund and wish to donated refund and donated 37 of Form 511NR,	age 24 of the 511NR 511NR-G Information ate to Support the to that organization. please list the line
1 Support of Programs for Voluntee as Court Appointed Special Advoctor Abused or Neglected Children. 2 Y.M.C.A. Youth and Government Indigent Veteran Burial Program 4 Support the Oklahoma General R 5 Oklahoma Emergency Responder Program	ates			, <u> </u>	00 00 00 00 00 00 00
SCHEDULE 511NR-H	Amended	Retu	n Info	rmation	
Did you file an amended Federal return?  If Yes, provide a copy of the IRS Form 1040 Adjustment", IRS check or deposit slip. IRS Explain the changes to income, deductions, and give the reason. If more space is neede	documents submitted a and/or credits below. E	fter filing this	Oklahoma a	mended return may o	delay processing.