		Form 511NR Barcod
JKL/	ahoma Nonresident/	2018 Praceiron
	-YEAR INCOME TAX RETURN	
/our Soc	ial Security Number Place an 'X' in this box RETURN!	
	if this taxpayer is deceased -> Place an 'X' in this	
	Social Security Number box if this is an	
joint return	Place an 'X' in this box amended 511NR. If this taxpayer See Schedule	
	is deceased ► 511NR-H. ►	
- r		
ш	Your first name, middle initial and last name	
RESS R TYPE	If a joint return, spouse's first name, middle initial and last name	
Address It or Typ		
	Mailing address (number and street, including apartment number, rural route or PO Box)	NOT REQUIRED TO FILE
E A SE F		
NAME A	City, State and ZIP	Place an 'X' in this box if you are a nonresident whose gross income from Oklahoma sources is less than \$1,000.
		(see instructions)
1	Single	* NOTE: If claiming Special Exemption, see instructions on page 8 of 511NR Packet.
SUT 3	Married filing joint return (even if only one had income) Married filing separate	REGULAR *SPECIAL BLIND
STATUS	If spouse is also filing, list     Name:	Yourself + + ADD THE TOTALS
9	name and SSN in the boxes: SSN:	WRITE THE TOTAL
9NIJI 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 YOU MAY BE CLAIMED AS A DEPENDENT ON ANOTHER RETURN, ENTER
- <u>م</u> [	Nonresident(s) State of Residence:	"O" IN THE TOTAL BOX FOR YOUR REGULAR EXEMPTION.
STATUS	Part-Year Resident(s) From to	
ΰΩ IL	Resident/Part-Year Resident/Nonresident State of Residence: Yourself Spouse	AGE 65 OR OVER? (Please see instructions)
		Please Round to Nearest Whole Dollar
Coup	ETE COUEDULE ETTND 1 "INCOME ALLOCATION E	OR NONRESIDENTS AND PART-YEAR RESIDENTS" to arrive a
	LETE SCHEDULE STITING T INCOME ALLOCATION F a Source Income (line 1) and Federal adjusted gross income (line 2).	
		FEDERAL AMOUNT OKLAHOMA AMOUN
	ahoma source income (Schedule 511NR-1, line 17)	
	aral adjusted groce income (Schodule 511ND 1 line 19)	
2 Fed	eral adjusted gross income (Schedule 511NR-1, line 18)	
2 Fed 3 Okla	ahoma additions: Schedule 511NR-A, line 7	
<ol> <li>Fed</li> <li>Okla</li> <li>Add</li> </ol>	ahoma additions: Schedule 511NR-A, line 7 lines (Federal 2 and 3) and then (Oklahoma 1 and 3)	
2 Fed 3 Okla 4 Add 5 Okla	ahoma additions: Schedule 511NR-A, line 7 lines (Federal 2 and 3) and then (Oklahoma 1 and 3) ahoma subtractions: Schedule 511NR-B, line 16	00     3     00        00     4     00        000     5     00
2 Fed 3 Okla 4 Add 5 Okla 6 Adju	ahoma additions: Schedule 511NR-A, line 7 lines (Federal 2 and 3) and then (Oklahoma 1 and 3) ahoma subtractions: Schedule 511NR-B, line 16 Isted gross income: <b>Okla. Source</b> (line 4 minus line 5)	00     3     00        00     4     00        00     5     00        6     00
2 Fed 3 Okla 4 Add 5 Okla 6 Adju	ahoma additions: Schedule 511NR-A, line 7 lines (Federal 2 and 3) and then (Oklahoma 1 and 3) ahoma subtractions: Schedule 511NR-B, line 16	00     3     00        00     4     00        00     5     00        6     00
<ol> <li>Fed</li> <li>Okla</li> <li>Add</li> <li>Okla</li> <li>Okla</li> <li>Okla</li> <li>Adju</li> <li>Adju</li> <li>Adju</li> <li>Adju</li> </ol>	ahoma additions: Schedule 511NR-A, line 7 lines (Federal 2 and 3) and then (Oklahoma 1 and 3) ahoma subtractions: Schedule 511NR-B, line 16 usted gross income: <b>Okla. Source</b> (line 4 minus line 5) usted gross income: <b>All Sources</b> (line 4 minus line 5) Also enter on justed gross income: <b>All Sources</b> (from line 7)	00     3     00        00     4     00        00     5     00        6     00       line 8     00     7
<ul> <li>2</li> <li>Fed</li> <li>3</li> <li>Okla</li> <li>4</li> <li>Add</li> <li>5</li> <li>Okla</li> <li>6</li> <li>Adju</li> <li>7</li> <li>Adju</li> <li>7</li> <li>Adju</li> <li>8</li> <li>Ad</li> <li>9</li> <li>Ok</li> </ul>	ahoma additions: Schedule 511NR-A, line 7 lines (Federal 2 and 3) and then (Oklahoma 1 and 3) ahoma subtractions: Schedule 511NR-B, line 16 usted gross income: <b>Okla. Source</b> (line 4 minus line 5) usted gross income: <b>All Sources</b> (line 4 minus line 5) Also enter on justed gross income: <b>All Sources</b> (from line 7) lahoma Adjustments (Schedule 511NR-C, line 7)	
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2         Fed           3         Okla           4         Addd           5         Okla           6         Adju           7         Adju           8         Adju           9         Ok           10         Inc           11         Ok           12         Ex           13         To           14         Ok           15         Ok	Ahoma additions: Schedule 511NR-A, line 7 lines (Federal 2 and 3) and then (Oklahoma 1 and 3) ahoma subtractions: Schedule 511NR-B, line 16 usted gross income: <b>Okla. Source</b> (line 4 minus line 5) usted gross income: <b>All Sources</b> (line 4 minus line 5) Also enter on justed gross income: <b>All Sources</b> (from line 7) lahoma Adjustments (Schedule 511NR-C, line 7) lahoma itemized deductions (Schedule 511NR-D, line 11) or Oklahoma standard deduction (Single or Married Filing Separa Married Filing Joint or Qualifying Widow(er): \$12,700 · Head of Ho emptions: Enter the total number of exemptions claimed above tal deductions and exemptions (add lines 11 and 12)	00       3       00       4       00         00       4       00       5       00         00       5       00       6       00         1ine 8       000       7       6       00
2         Fed           3         Okla           4         Addd           5         Okla           6         Adju           7         Adju           8         Add           9         Ok           10         Inc           11         Ok           12         Ex           13         To           14         Ok           15         Ok           15         Ok           15         To           15         Ok	Ahoma additions: Schedule 511NR-A, line 7 lines (Federal 2 and 3) and then (Oklahoma 1 and 3) ahoma subtractions: Schedule 511NR-B, line 16 usted gross income: <b>Okla. Source</b> (line 4 minus line 5) Also enter on justed gross income: <b>All Sources</b> (line 4 minus line 5) Also enter on justed gross income: <b>All Sources</b> (from line 7) lahoma Adjustments (Schedule 511NR-C, line 7) lahoma Adjustments (line 8 minus line 9) lahoma itemized deductions (Schedule 511NR-D, line 11) or Oklahoma standard deduction ( <b>Single or Married Filing Separa</b> <b>Married Filing Joint or Qualifying Widow(er): \$12,700 · Head of Ho</b> emptions: Enter the total number of exemptions claimed above tal deductions and exemptions (add lines 11 and 12) clahoma Income Tax from Tax Table (If using Farm Income Aver d enter a "1" in box. If paying the Health Savings Account additional here and enter a "2" in box	00       3       00       4       00         00       4       00       5       00         00       5       00       6       00         1ine 8       000       7       10       10         ate: \$6,350 •       10       10       00       10         ate: \$6,350 •       11       00       10       00         ate: \$6,350 •       11       00       10       00         ate: \$6,350 •       11       00       00       10         10       10       10       00       00       00       00         ate: \$6,350 •       11       00
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2         Fed           3         Okla           4         Addd           5         Okla           6         Adju           7         Adju           8         Add           9         Ok           10         Inc           11         Ok           12         Ex           13         To           14         Ok           15         Ok           15         Ok           15         Ok           16         Ok	Ahoma additions: Schedule 511NR-A, line 7 lines (Federal 2 and 3) and then (Oklahoma 1 and 3) ahoma subtractions: Schedule 511NR-B, line 16 usted gross income: <b>Okla. Source</b> (line 4 minus line 5) Also enter on justed gross income: <b>All Sources</b> (line 4 minus line 5) Also enter on justed gross income: <b>All Sources</b> (from line 7) lahoma Adjustments (Schedule 511NR-C, line 7) lahoma Adjustments (line 8 minus line 9) lahoma itemized deductions (Schedule 511NR-D, line 11) or Oklahoma standard deduction ( <b>Single or Married Filing Separa</b> <b>Married Filing Joint or Qualifying Widow(er): \$12,700 · Head of Ho</b> emptions: Enter the total number of exemptions claimed above tal deductions and exemptions (add lines 11 and 12) clahoma Income Tax from Tax Table (If using Farm Income Aver d enter a "1" in box. If paying the Health Savings Account additional here and enter a "2" in box	00       3       00       4       00         00       4       00       5       00         00       5       00       7       6         10       00       7       7       7         ate: \$6,350 •       00       7       7       7         ate: \$6,350 •       00       7       7       7         ate: \$6,350 •       00       10       00       7         10       10       00       10       00       10         10       10       10       10       00       10       00         10       10       10       10       10       00       00       10       00
2         Fed           3         Okla           4         Addd           5         Okla           6         Adju           7         Adju           8         Add           9         Ok           10         Inc           11         Ok           12         Ex           13         To           14         Ok           15         Ok           15         Ok           15         Ok           16         Ok	Ahoma additions: Schedule 511NR-A, line 7 lines (Federal 2 and 3) and then (Oklahoma 1 and 3) ahoma subtractions: Schedule 511NR-B, line 16 usted gross income: Okla. Source (line 4 minus line 5) Also enter on justed gross income: All Sources (line 4 minus line 5) Also enter on justed gross income: All Sources (from line 7) lahoma Adjustments (Schedule 511NR-C, line 7) lahoma Adjustments (line 8 minus line 9) lahoma itemized deductions (Schedule 511NR-D, line 11) or Oklahoma standard deduction (Single or Married Filing Separa Married Filing Joint or Qualifying Widow(er): \$12,700 · Head of Ho emptions: Enter the total number of exemptions claimed above tal deductions and exemptions (add lines 11 and 12) clahoma Income Tax from Tax Table (If using Farm Income Aver d enter a "1" in box. If paying the Health Savings Account additional here and enter a "2" in box ID READ: If line 7 is equal to or larger than line 2, complete line 17. If lin klahoma child care/child tax credit (see instructions)	00       3       00       4       00         00       4       00       5       00         00       5       00       7       6         10       00       7       7       7         ate: \$6,350 •       00       7       7       7         ate: \$6,350 •       00       7       7       7         ate: \$6,350 •       00       10       00       7         10       10       00       10       00       10         10       10       10       10       00       10       00         10       10       10       10       10       00       00       10       00

1 2 3 4 5 6 7 8 9 10 1 2 3 4 5 6 7 8 9 20 1 2 3 4 5 6 7 8 9 20 1 2 3 4 5 6 7 8 9 20 1 2 3 4 5 6 7 8 9 30 1 2 3 4 5 6 7 8 9 40 1 2 3 4 5 6 7 8 9 50 1 2 3 4 5 6 7 8 9 60 1 2 3 4 5 6 7 8 9 70 1 2 3 4 5 6 7 8 9 80 1 2 3 4 5

2													:
3												Barcode	:
4											PI	aceholder	
5	2018	Form 511NR - Nonr	esident/Part-Ye	ar Income Tax	Retu	ırn - Paç	je 2						
6	Nam	e(s) shown							Your Soc	ial			
7	on Fo	orm 511NR:							Security	Number:			
8	18	Amount from line	17 on page 1							18		00	1
9													
1 0	19	Tax percentage:	Oklahoma Amou	Int (from line 6)	•		Amount (from lin	ne 7)					1
1			a)		•	b)				19		%	
2	20	Oklahoma Income	Tax. Multiply li	ne 18 by line 19	9								
3		If recapturing the Okla an Oklahoma installr	homa Affordable Ho	using Tax Credit, a	dd reca	aptured ci	edit here and ente	ter a "1	" in box. If makir	g			
1		add the installment p	payment here and	enter a "2" in the t	oox)	,5(ii) and	00 0.0. 000. 20	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,, 	20		00	
5	21	Oklahoma earned								.21		00	
6	22	Credit for taxes pa	id to another s	tate (provide F	Form	511TX	) nonresidents	ts do	not qualify	. 22		00	
7	23	Form 511CR - Oth										00	
3	24	Line 20 minus line										00	
9	25	Use tax due on Inte											
2 0								-				00	2
1	26	If you certify t Balance (add lines	24 and 25)							.26		00	
2	27	Oklahoma withhole								00			
3	28	2018 Oklahoma es	•										
1		If you are a	qualified farme	er, place an 'X'	here	e:				00			
5	29	If you are a 2018 payment with	extension	,			29			00			
5	30	Credits from Form		a) 577	ł	b) 5	78 30			00			
7	31	Amount paid with											
3	51	(amended return o	only)		μαιυ		31			00			
- 	32	Payments and cre								.32		00	
30	33	Overpayment, if ar								. 52			3
	33	previously adjuste								33		00	
2	34	Total payments a										00	
3	35	If line 34 is more th										00	
, 1	36	Amount of line 35						0.00	payment				
5		(original return o	nly) (see page 4	of 511NR Packet	for fui	rther info	rmation) 36			00			
5		dule 511NR-G provides y											
		izations. Please place th					1NR-G in the box	x belo	w. If you give to				
7		than one organization, p								00			
	37 38	Donations from yo											
9 4 0		Total deductions fr										00	4
1	39	Amount to be refu	nded (line 35 r	minus line 38).		••••			•••••••••••••••••	.39		00	-
		rect Deposit Note:		a value de value da v									
2				s refund going to o			ccount that is loc hecking Acco				Yes	No	
3	corre	your account and routing n ct. If your direct deposit fails	to process	osit my refund i	n my		•			s Account			
-	or yo	u do not choose direct depos ve a debit card. See the 511N		ing Number:			Account Numbe	er:					
5		rect deposit and debit card in											
§		If line OC is mare th					This is your !						
7	40	If line 26 is more th										00	
3	41	Donation: Support										00	
	42	Underpayment of e							)	. 42		00	-
5 0	43	For delinquent pa							+ + + + + + + + + + + + + + + + + + +				5
	╎┝╧┥	plus interest of 1.2							+ + + + + + + + + + + + + + + + + + +	43		00	
2	44	Total tax, donation	n, penalty and i	nterest (add lir	nes 4	40-43) .			•••••••••••••••••	.44		00	
3	Under	penalty of perjury, I declare the i	nformation contained in	this document and all		Place an	'X' in this box if the Ok	klahoma	Tax Commission				
1		nents and schedules, is true and					uss this return with you						
5			D-1-				Data		Doid Dec.				
3	Taxpa	ver's signature	Date	Spouse's signature	*		Date		Paid Preparer's signa	lure	Date		
7													
3	Тахра	yer's occupation		Spouse's occupation	on				Paid Preparer's addre	ss and phone numb	ber		
9													
6 0	Daytin	ne Phone Number (optional)		A COPY	OF F	FEDERA	L RETURN	╷┌╟					6
				MU	ST B		/IDED.		Paid Preparer's PTIN				
2		Ple	ase remit to: Ok										
3			The Oklahoma Tax C	ommission is not requ	uired to	give actua	I notice to taxpayers	s of cha	anges in any state ta	x law.			
4													
5													
3234	5678	9 10 1 2 3 4 5 6 7 8 9 2	0123456789	9301234567	8 9 40	1234	5 6 7 8 9 50 1 2 3	345	678960123	4 5 6 7 8 9 70	1 2 3 4 5 6	7 8 9 80 1 2	34

1 2 3 4 5 6 7 8 9 10 1 2 3 4 5 6 7 8 9 20 1 2 3 4 5 6 7 8 9 20 1 2 3 4 5 6 7 8 9 20 1 2 3 4 5 6 7 8 9 30 1 2 3 4 5 6 7 8 9 40 1 2 3 4 5 6 7 8 9 50 1 2 3 4 5 6 7 8 9 60 1 2 3 4 5 6 7 8 9 70 1 2 3 4 5 6 7 8 9 80 1 2 3 4 5

2010	9 Form F11ND Nonrocident/Dort					Placel	code holder
	8 Form 511NR - Nonresident/Part-` FE: Provide this page with your re		••				
Nam	ne(s) shown				Social		
	Form 511NR:				urity Nun		
S	CHEDULE 511NR-1	Income Alloca	tion for	Nonre	esio	dents and	
		Part-Year Resi					
	es 1-18: In the Federal column amounts to report in the Oklal		our Federal ta	ax return. S	ee the	e instructions to figu	ire
			FEDERAL A	MOUNT		OKLAHOMA AMOUNT	
1	Wages, salaries, tips, etc			00	1		00
2	Taxable interest income			00			00
3	Dividend income			00			00
4							
	Taxable IRA pensions and annui			00			00
5	Taxable Social Security benefits			00			00
6	Taxable refunds (state income ta			00			00
7	Alimony received			00			00
8	Business income or (loss) (Fede			00			00
9	Capital gains or losses (Federal	Schedule D)		00	9		00
10	Other gains or losses (Federal F	orm 4797)		00	10		00
11	Rental real estate, royalties, part	nerships, 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				00	15		00
16	Total Federal adjustments to inco						
17	(identify:			00	16		00
	Enter here and on page 1, line				17		00
18	Federal adjusted gross income	e (line 15 minus line 16)		00	18		
	Enter here and on page 1, line				10		
S	CHEDULE 511NR-A	Oklahoma Ado	litions			for details on d required documents.	
			FEDERAL A			OKLAHOMA AMOUNT	
1	State and municipal bond interes	st		00			00
2	Lump sum distributions (not include			00	1 -		00
3	Federal net operating loss			00	3		00
4	Recapture depletion claimed on add back of excess Federal depl			00	4		00
5	Recapture of contributions to Ok	lahoma 529 College					
6	Savings Plan and OklahomaDre Miscellaneous: Other additions			00	5		00
	(enter number in box for the ty	/pe of addition )		00	6		00
7	Total additions			00			
	J (aud lines 1-0, enter total nere an			100			00

1 2 3 4 5 6 7 8 9 10 1 2 3 4 5 6 7 8 9 20 1 2 3 4 5 6 7 8 9 20 1 2 3 4 5 6 7 8 9 20 1 2 3 4 5 6 7 8 9 30 1 2 3 4 5 6 7 8 9 40 1 2 3 4 5 6 7 8 9 50 1 2 3 4 5 6 7 8 9 60 1 2 3 4 5 6 7 8 9 70 1 2 3 4 5 6 7 8 9 80 1 2 3 4 5

201	8 Form 511NR - Nonresident/Part-Year Income Tax Return - Page 4						Barcode Placeholder
	E: Provide this page <u>ONLY</u> if you have an amount shown on a schedule.						
Nam on F	ie(s) shown orm 511NR:			Social rity Num	ıber:		
S	CHEDULE 511NR-B Oklahoma Subtractio	ons See	inst	ructio	ons for deta	ils on	umente
			inco		OKLAHON		
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 TAXPAYER NUMBER SPOUSE NUMBER Claim 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] )		00	9			00
10	Exempt tribal income (see instructions for qualifications)		00	10			00
11	Gains from the sale of exempt government obligations		00				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         (enter number in box for the type of deduction )		00	15			00
16	Total subtractions		00				00
C	(add lines 1-15, enter total here and on line 5 of Form 511NR)				ons for deta	ils on	
					and require	ed docı	
1	Military pay exclusion - Active Duty, Reserve and National Guard (not retirer Qualifying disability deduction (residents and part-year residents only)						00
3	Qualified adoption expense						00
4	Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 52						00
5	Deductions for providing foster care		1				00
6	Miscellaneous: Other adjustments (enter number in box for the type of deduction	)		.6			00
7	Total Adjustments (add lines 1-6, enter total here and on line 9 of Form 51	1NR)		.7			00

	rm 511NR - Nonresident/Part-Year Income Tax Return - Page 5 Provide this page <u>ONLY</u> if you have an amount shown on a schedule.		Barcode Placeholder
Name(s) on Form s	shown	Your Social Security Number:	
SCH	IEDULE 511NR-D Oklahoma Itemized De	ductions	
lf you c	laimed itemized deductions on your Federal return, you must claim Oklaho	oma Itemized Deducti	ons.
1 Fe	deral itemized deductions from Federal Sch. A, line 17 1	00	
(lf	ate and local sales or income taxes from Federal Sch. A, line 5a Federal Sch A, line 5e is limited, enter that portion of Federal Sch A,	00	
	e 1 minus line 2		00
4 Me	edical and Dental expenses from Federal Sch. A, line 4 4	00	
	ts to Charity from Federal Sch. A, line 14	00	
	e 3 minus lines 4 and 5		00
	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 lin	ne 11.	
8 Ma	aximum amount allowed for itemized deductions. (exception, lines 9 & 10)		17,000 00
	edical and Dental expenses from Federal Sch. A, line 4		00
	Its to Charity from Federal Sch. A, line 14		00
	alahoma 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
Enter v	our Oklahoma Itemized Deductions on line 11 of Form 511NR.		
			s for details on qualifications
	IEDULE 511NR-E Child Care/Child Tax C		
	ederal Adjusted Gross Income is \$100,000 or less and you are allowed either a cr it on your Federal return, then as a resident, part-year resident or nonresident milit		
	na tax. Your Oklahoma credit is the <b>greater</b> of: 0% of the credit for child care expenses allowed by the IRS Code. Your allowed Fe	ederal credit cannot exce	ed the amount of
	our Federal tax reported on your Federal return, OR		
	% of the child tax credit allowed by the IRS Code. This includes both the nonrefund dditional child tax credit.	dable child tax credit and	d the refundable
	ditional child tax credit. Jit must be prorated based on the ratio of Adjusted Gross Income: All sources to Fi	ederal Adjusted Gross I	ncome. If your
	Adjusted Gross Income is greater than \$100,000, no credit is allowed. Provide a c eral child care credit schedule.	opy of your Federal retu	rn and, if applicable,
	nter your Federal child <u>care</u> credit	00	
2 M	ultiply line 1 by 20%2	00	
	nter your Federal child <b>tax</b> credit		
	otal of child tax credit & additional child tax credit)3 Ultiply line 3 by 5%4	00	
	nter the larger of line 2 or line 4		00
4 M			100
4 Mi 5 Er	vide the amount on line 7 of Form 511NR by the amount on line 2 of Form		
4 Mi 5 Er	vide the amount on line 7 of Form 511NR by the amount on line 2 of Form		
4 Mi 5 Er 6 Di	vide the amount on line 7 of Form 511NR by the amount on line 2 of Form		%
4 Mi 5 Er 6 Di 7 Er Mi	vide the amount on line 7 of Form 511NR by the amount on line 2 of Form	00%) 6	%
4 Mi 5 Er 6 Di 7 Er Mi	vide the amount on line 7 of Form 511NR by the amount on line 2 of Form	00%) 6	

		Barcode
2	2018 Form 511NR - Nonresident/Part-Year Income Tax Return - Page 6	
N	NOTE: Provide this page ONLY if you have an amount shown on a schedule or are filing an amende	d return.
	Name(s) shown on Form 511NR: Security Nur	nhar
		ions for details on qualifications
	SCHEDULE JIINK-F Edited Income Cleuit and required	I documents.
	Residents and part-year residents are allowed a credit equal to 5% of the Earned Income Credit allowed or The credit must be prorated on the ratio of Oklahoma source AGI to Federal AGI. Provide a copy of your Fe	
	Nonresidents do not qualify.	
	1 Federal earned income credit1	00
	2 Multiply line 1 by 5%2	00
	3 Divide the amount on line 6 of Form 511NR by the amount on line 2 of Form 511NR	
	Enter the percentage from the above calculation here (do not enter more than 100%)	%
	4 Oklahoma earned income credit	
	(multiply line 2 by line 3, enter total here and on line 21 of Form 511NR)	00
	SCHEDULE 511NR-G Donations from Refund (Origin	
	This schedule allows you to make a donation from your refund to a variety of Oklahoma organizations. Infor	
	gram, its mission, how funds are utilized and mailing addresses are shown in Schedule 511NR-G Informatio Packet. If you are not receiving a refund but would like to make a donation to one of these organizations, Sc	
lis	lists the mailing address to mail your donation to the organization. If you are not receiving a refund and wish	
	Oklahoma General Revenue Fund, see line 41 of Form 511NR.	
	Place an 'X' in the box associated with the dollar amount you wish to have deducted from your refund and d Then carry that figure over into the column at the right. When you carry your figure back to line 37 of Form 5	
	number of the organization to which you donated. If you donate to more than one organization, please write	
	Form 511NR.	
[	1         Support of Programs for Volunteers to Act	
	as Court Appointed Special Advocates for Abused or Neglected Children \$2 \$5 \$1	00
	for Abused or Neglected Children         \$2         \$5         \$        1           2         Y.M.C.A. Youth and Government Program         \$2         \$5         \$        2	00
┢	3     Indigent Veteran Burial Program     \$2     \$5     \$    2	00
	4 Support the Oklahoma General Revenue Fund \$2 \$5 \$4	00
	5 Oklahoma Emergency Responders Assistance	
	Program	00
	6 Support of Folds of Honor Scholarship Program \$2 \$5 \$6	00
	7 Support Wildlife Diversity Fund \$2 \$5 \$. \$	00
	8 <b>Total donations</b> (add lines 1-7, enter total here and on line 37 of Form 511NR)	00
┢		
	SCHEDULE 511NR-H Amended Return Informatio	n
Ľ		
D	Did you file an amended Federal return? Yes No	
	If Yes, provide a copy of the IRS Form 1040X or 1045 AND proof of IRS acceptance, such as a copy of the	IRS "Statement of
lf	Adjustment", IRS check or deposit slip. IRS documents submitted after filing this Oklahoma amended retur	
	Explain the changes to income, deductions, and/or credits below. Enter the line reference number for which	you are reporting a change
A	and give the reason. If more space is needed, provide a separate schedule.	
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