3			Barcode Placeholder	3
5	2019 Form 511NR - Nonresident/Part-Year Income Tax Return - Page 2			5
6 7	Name(s) shown on Form 511NR:	Your Social Security Number:		6
8	18 Amount from line 17 on page 1	18	.00	8
9 1 0	19 Tax percentage: Oklahoma Amount (from line 6) • Federal Amount (from line 7 • b)		%	1 0
1	20 Oklahoma Income Tax. Multiply line 18 by line 19		70	1
2	If recapturing the Oklahoma Affordable Housing Tax Credit, add recaptured credit here and enter a an Oklahoma installment payment pursuant to IRC Section 965(h) and 68 O.S. Sec. 2368(K),			2
3	add the installment payment here and enter a "2" in the box)		.00	3
4	21 Oklahoma earned income credit (Sch. 511NR-F, line 4)	21	.00	4
5	22 Credit for taxes paid to another state (provide Form 511TX) nonresidents do not qu	ıalify22	.00	5
6		23	.00	6
7	24 Line 20 minus lines 21, 22 and 23 (Do not enter le	ess than zero) 24	.00	7
8	25 Use tax due on Internet, mail order, or other out-of-state purchases while living in C	Oklahoma25		8
9	If you certify that no use tax is due, place an 'X' here:		.00	9
2 0	26 Balance (add lines 24 and 25)	26	.00	2 0
1	27 Oklahoma withholding (provide W-2s, 1099s or withholding statement)27	.00		1
2	28 2019 Oklahoma estimated tax payments			2
3	If you are a qualified farmer, place an 'X' here:	.00		3
4	29 2019 payment with extension	.00		4
5	30 Credits from Form	.00		5
6	31 Amount paid with original return plus additional paid after it was filed			6
7	(amended return only)31	.00		7
8	32 Payments and credits (add lines 27-31)		.00	8
9	33 Overpayment, if any, as shown on original return and/or prior amended return(s) or		.00	9
3 0	previously adjusted by Oklahoma (amended return only)		.00	3 0
1	34 Total payments and credits (line 32 minus line 33)		.00	1
2	35 If line 34 is more than line 26, subtract line 26 from line 34. This is your overpayme		.00	2
3	36 Amount of line 35 to be applied to 2020 estimated tax (original return only)		.00	3
4	(see page 4 of 511NR Packet for further information)	.00		4
5	Schedule 511NR-G provides you with the opportunity to make a financial gift from your refund to a variety of Oklaho			5
6	Place the line number of the organization from Schedule 511NR-G in the box. If you give to			6
7	more than one organization, put a "99" in the box. Provide Schedule 511NR-G	00		7
0	37 Donations from your refund (total from Schedule 511NR-G)37	.00	00	Ω
0	38 Total deductions from refund (add lines 36 and 37)		.00	9
9	39 Amount to be refunded (line 35 minus line 38)	39	.00	
4 0	Direct Deposit Note: Is this refund going to or through an account that is locate			4 0
1			Yes No	1
2	Verify your account and routing numbers are correct. If your direct deposit fails to process	t Savings Account		2
3	or you do not choose direct deposit, you will receive a debit card. See the 511NR Packet for			3
4	direct deposit and debit card information.			4
5				5
6	40 If line 26 is more than line 34, subtract line 34 from line 26. This is your tax due		.00	6
7	a) Donation: Support the Oklahoma General Revenue Fund (original return only)		.00	7
8	b) Donation: Public School Classroom Support Fund (original return only)		.00	8
9	42 Underpayment of estimated tax interest (annualized installment method)		.00	9
5 0	43 For delinquent payment add penalty of 5%			5 0
1	plus interest of 1.25% per month\$	43	.00	1
2	44 Total tax, donation, penalty and interest (add lines 40-43)	44	.00	2
3	Under penalty of perjury, I declare the information contained in this document,			3
4	and all attachments and schedules, is true and correct to the best of my Place an 'X' in this box if the Oklahoma may discuss this return with your tax pr			4
5	knowledge and belief.			5
6	Taxpayer's signature Date Spouse's signature Date	Paid Preparer's signature	Date	6
7				7
8	Taxpayer's occupation Spouse's occupation	Paid Preparer's address and phone number		8
9				9
6 0	Daytime Phone Number (optional) A COPY OF FEDERAL RETURN	<u>' </u>		6 0
1	MUST BE PROVIDED.	Paid Preparer's PTIN		1
2	Please remit to: Oklahoma Tax Commission, P.O. Box 26800, Oklahoma Tax Commiss	oma City, OK 73126-0800		2
3	The Oklahoma Tax Commission is not required to give actual notice to taxpayers of c			3
4				4
5				5
6224	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 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	156789601234567897013	2 2 4 5 6 7 9 0 90 1	2341

2019	Form 511NR - Nonresident/Part-Year Income Tax Return - Page	3		Barcode Placeholder			
	E: Provide this page with your return.						
Nam on F	e(s) shown orm 511NR:	Your Social Security Number:					
S	chedule 511NR-1: Income Allocation Part-Year Residen		nts	and			
Lines 1-19: 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 distribution	.00	4	.00			
5	Taxable pensions and annuities	.00	5	.00			
6	Taxable Social Security benefits (also enter on line 2 of Sch. 511NR-B)	.00	6	.00			
7	Capital gains or losses (Federal Schedule D)	.00	7	.00			
8	Taxable refunds (state income tax)	.00		.00			
9	Alimony received						
		.00		.00			
10	Business income or (loss) (Federal Schedule C)	.00	10	.00			
11	Other gains or losses (Federal Form 4797)	.00.	11	.00			
12	Rental real estate, royalties, partnerships, etc	.00	12	.00			
13	Farm income or (loss)	.00	13	.00			
14	Unemployment compensation	.00	14	.00			
15	Other income						
	(identify:)	.00	15	.00			
16	Add lines 1 through 15	.00	16	.00			
17	Total Federal adjustments to income						
	(identify:)	.00.	17	.00			
18	Oklahoma source income (line 16 minus line 17) Enter here and on page 1, line 1		.18	.00			
19	• • • • • • • • • • • • • • • • • • • •						
	Enter here and on page 1, line 2	.00.	19				
S	chedule 511NR-A: Oklahoma Additio	ns See instructions for	deta	ails on qualifications 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		.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						
6	Savings Plan and OklahomaDream 529 Account(s) Oklahoma loss distributed by an electing PTE	.00.		.00.			
7	Miscellaneous: Other additions			.00			
	(enter number in box for the type of addition)	.00	7	.00			
8	Total additions (add lines 1-7, enter total here and on line 3 of Form 511NR)	.00	8	.00			
	Lada in 30 1 7, Sittor total field and Offine 3 011 01111 31 1111)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	U	.00			

2010	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.					
	e(s) shown orm 511NR:	Your Social Security Nui	nber:			
Schedule 511NR-B: Oklahoma Subtractions See instructions for details on qualifications and required documents.						
		and required docural Amount	Oklahoma Amount			
1	Interest on U.S. government obligations	.00 1	.00			
2	Taxable Social Security (from Schedule 511NR-1, line 6)	.00 2	.00			
3	Federal civil service retirement in lieu of social security	.00 3	00			
	- Retirement Taxpayer Number Spouse Number	.00	.00			
	Claim Number:			2		
4	Military Retirement (see instructions for limitation)	.00 4	.00			
5	Oklahoma government or Federal civil service retirement	00 5	00			
	Chianoma government of 1 odd-da ovii oo voo tellionionen minimum	.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	3		
9	Oklahoma net operating loss (Loss Year[s]	.00	.00			
	(Provide Schedules)	.00.	.00			
10	Exempt tribal income (see instructions for qualifications)	.00 10	.00			
11	Gains from the sale of exempt government obligations	.00 11	.00			
			.00			
12	Nonresident military wages (provide W-2)	.00 12		1		
13	Oklahoma Capital Gain Deduction (Provide Form 561NR)	.00 13	.00	4		
14	Income Tax Refund (Federal Form 1040 or 1040-SR,					
	Schedule 1, line 1)	.00 14	.00			
15	Oklahoma income distributed by an electing PTE	.00 15	.00			
16	Miscellaneous: Other subtractions (enter number in box for the type of deduction)	.00 16	.00			
17	Total subtractions.		20			
	(add lines 1-16, enter total here and on line 5 of Form 511NR)	.00 17	.00			
S	chedule 511NR-C: Oklahoma Adjustments	See instructions fo and required docur	r details on qualifications nents.	5		
1	Military pay exclusion - Active Duty, Reserve and National Guard (not retirement	ent) 1	.00			
2	Qualifying disability deduction (residents and part-year residents only)	2	.00			
3	Qualified adoption expense	3	.00			
4	Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 52		.00			
5	Deductions for providing foster care		.00			
			.30			
6	Miscellaneous: Other adjustments (enter number in box for the type of deduc-	tion) 6	.00	6		
7	Total Adjustments (add lines 1-6, enter total here and on line 9 of Form 511N	JR) 7	.00			

3 4			Barcode Placeholder	3
5	2019 Form 511NR - Nonresident/Part-Year Income Tax Return - Page 5 NOTE: Provide this page ONLY if you have an amount shown on a schedule.			
7	Name(s) shown on Form 511NR:	Your Social Security Number:		7
9	Schedule 511NR-D: Oklahoma Itemized Deduc	rtions		9
1 0	Concade of man B. Oktanoma Remizea Bead)tions		1 (
2	If you claimed itemized deductions on your Federal return, you must claim Okla	homa Itemized Deduction	ne	2
3	in you diamed itemized deductions on your reactal return, you must diam only	Homa Remized Deddottor	10.	3
4	1 Federal itemized deductions from Federal Sch. A, line 17	.00		4
5 6	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)	00		6
7 8		.00		8
9	3 Line 1 minus line 2	3	.00	9
2 0	4 Medical and Dental expenses from Federal Sch. A, line 44	.00		2 (
1	5 Gifts to Charity from Federal Sch. A, line 145	.00		1
3			00	2
4			.00	
5	7 Is line 6 more than \$17,000?			5
6	YES. Your itemized deductions are limited. Complete lines 9-11.			6
7	NO. Your itemized deductions are not limited. Skip lines 9 & 10. Go to line 11.			7
8	Q. Mayimum amount allowed for itemined deductions (avention lines 0.9.10)		17,000,00	8
9 3 0	8 Maximum amount allowed for itemized deductions. (exception, lines 9 & 10)		17,000 .00	3 (
1	9 Medical and Dental expenses from Federal Sch. A, line 4		.00	1
2	10 Gifts to Charity from Federal Sch. A, line 14	10	.00	2
3	11 Oklahoma Itemized Deductions			3
4	If you responded YES on line 7: Add lines 8, 9 and 10			4
5				5
6 7	If you responded NO on line 7: enter the amount from line 3	11	.00	7
8	Enter your Oklahoma Itemized Deductions on line 11 of Form 511NR.			8
9		See instructions for de	tails on	9
4 0	Schedule 511NR-E: Child Care/Child Tax Credi	qualifications and requ		4 (
1	If your Federal Adjusted Gross Income is \$100,000 or less and you are allowed either a			1
3	tax credit on your Federal return, then as a resident, part-year resident or nonresident m	ilitary, you are allowed a cred	dit against your	3
4	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 excee	d the amount of	4
5	your Federal tax reported on your Federal return, OR			Ę
6	• 5% of the child tax credit allowed by the IRS Code. This includes both the nonref	undable child tax credit and	the refundable	6
7	additional child tax credit.	Fodoval Adjusted Cross Inc	ana If valve	7
9	The credit must be prorated based on the ratio of Adjusted Gross Income: All sources to Federal Adjusted Gross Income is greater than \$100,000, no credit is allowed. Provide a			3
5 0	the Federal child care credit schedule.			5 (
1	1 Enter your Federal child <u>care</u> credit1	.00		1
2	2 Multiply line 1 by 20%2	.00		2
3	3 Enter your Federal child tax credit			3
4	(total of child tax credit & additional child tax credit)	.00		4
5 6	4 Multiply line 3 by 5%	.00	.00	6
7	6 Divide the amount on line 7 of Form 511NR by the amount on line 2 of Form 511NR		.00	7
8				8
9				(
6 0	Enter the percentage from the above calculation here (do not enter more than 100%)	6	%	6 (
1	7 Multiply line 5 by line 6. This is your Oklahoma child care/child tax credit.		00	2
3	Enter total here and on line 16 of Form 511NR	7	.00	3
4				4
5				Ę

6 2 3 4 5 6 7 8 9 10 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 30 1 2 3 4 5 6 7 8 9 30 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 6 7 8 8 9 80 1 2 3 4 5 6 7 8 8 9 80 1 2 3 4 5 6 7 8 8 9 80 1 2

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2019 Form 511NR - Nonresident/Part-Year Income Tax R		J				
NOTE: Provide this page ONLY if you have an amount sh	own on a	a schedul	e or are filin	g an amended return.		
Name(s) shown on Form 511NR:				Your Social Security Number:		
Schedule 511NR-F: Earned Inc	ome	Cred		structions for details on quequired documents.	alifications	1
Residents and part-year residents are allowed a credit equal					return.	
The credit must be prorated on the ratio of Oklahoma source		ederal AG not qual		copy of your Federal return.		
Federal earned income credit				1	.00	
2 Multiply line 1 by 5%				2	.00	
3 Divide the amount on line 6 of Form 511NR by the amount	nt on line 2	of Form 5	11NR			
<u> </u>						
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, e			100 /0)		70	2
on line 21 of Form 511NR)4						
Schedule 511NR-G: Donations	from	ı Refu	ınd (Or	iginal return on	ly)	
This schedule allows you to make a donation from your refun	nd to a va	riety of Ok	lahoma orga	nizations Information regardi	ng each pro-	
gram, its mission, how funds are utilized and mailing address	ses are sh	nown in Sc	hedule 511N	R-G Information on page 25	of the 511NR	
Packet. If you are not receiving a refund but would like to ma tion lists the mailing address to mail your donation to the org	ake a dona	ation to on	e of these or	ganizations, Schedule 511NF	R-G Informa-	
the Oklahoma General Revenue Fund or Public School Class	sroom Fur	nd, see line	e 41a or 41b	of Form 511NR.	e to Support	
Place an 'X' in the box associated with the dollar amount you	u wish to	have dedu	icted from yo	our refund and donated to tha	t organization.	
Then carry that figure over into the column at the right. When number of the organization to which you donated. If you donated.	n you carr nate to mo	y your figu ore than or	ire back to lir ne organizatio	ne 37 of Form 511NR, please on please write a "99" in the h	list the line	3
of Form 511NR.	iato to inc	no tridir or	io organizatio	in, piodoo wiito di oo iii tiio t	30X at 11110 07	
1 Support of Programs for Volunteers to Act						
as Court Appointed Special Advocates						
for Abused or Neglected Children	\$2	\$5	\$	1	.00	
2 Indigent Veteran Burial Program	\$2 \$2	\$5 \$5	\$ \$	2	.00	
	Φ2	φυ	Φ	3	.00	
4 Oklahoma Emergency Responders Assistance Program	\$2	\$5	\$	4	.00	
5 Support of Folds of Honor Scholarship Program	\$2	\$5	\$	5	.00	
6 Support Wildlife Diversity Fund	\$2	\$5	\$	6	.00	4
7 Support of Programs for Regional Food Banks						
in Oklahoma	\$2	\$5	\$	7	.00	
8 Public School Classroom Support Fund	\$2	\$5	\$	8	.00	
9 Oklahoma Pet Overpopulation Fund	\$2 \$2	\$5 \$5	\$ \$	9	.00	
TO Support the Orianoma Aids Care Fund	φ4	φυ	Φ		.00	
11 Total donations (add lines 1-10, enter total here and or	n line 37	of Form 5	11NR)	11	.00	
Schedule 511NR-H: Amended	Retu	rn Inf	ormati	on		
						5
	No					
If Yes, provide a copy of the IRS Form 1040X or 1045 AND p						
Adjustment," IRS check or deposit slip. IRS documents sub						
Explain the changes to income, deductions, and/or credits be				umber for which you are repo	orting a	
change and give the reason. If more space is needed, provide	ue a sepa	ırat e SCNEC	Jule.			
						6
						6