



Oklahoma Nonresident/Part-Year Income Tax Return

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-NR. See Schedule 511-NR-H.

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

Mailing Address (Number and street, including apartment number, rural route or PO Box) City State ZIP or Postal Code Country

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:
name and SSN in the boxes: SSN:

4 Head of household with qualifying person

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

Residency Status

Nonresident(s) State of Residence:

Part-Year Resident(s) From to

Resident/Part-Year Resident/Nonresident
State of Residence: Yourself Spouse

* Note: If claiming Special Exemption, see instructions on page 10 of 511NR Packet.

Exemptions	Regular	* Special	Blind	=	<input type="text"/>	(a)
	Yourselves	+				
	Spouse	+			=	<input type="text"/>
Number of dependents				=	<input type="text"/>	(c)
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

Dependents - If more than four dependents, see instructions and place an 'X' here:

1. First Name	2. Last Name	3. Social Security Number	4. Date of Birth	5. Relationship to You

Not Required to File - Place an 'X' in this box if you are a nonresident whose gross income from Oklahoma sources is less than \$1,000. (see instructions)

Complete Schedule 511-NR-1 "Income Allocation for Nonresidents and Part-Year Residents" to arrive at Oklahoma Source Income (line 1) and Federal adjusted gross income (line 2). Round to nearest whole dollar.

	Federal Amount	Oklahoma Amount
1 Oklahoma source income (Schedule 511-NR-1, line 18)		<input type="text"/> 00
2 Federal adjusted gross income (Schedule 511-NR-1, line 19)	<input type="text"/> 00	
3 Oklahoma additions (Schedule 511-NR-A, line 8)	<input type="text"/> 00	<input type="text"/> 00
4 Add lines (Federal 2 and 3) and then (Oklahoma 1 and 3)	<input type="text"/> 00	<input type="text"/> 00
5 Oklahoma subtractions (Schedule 511-NR-B, line 17)	<input type="text"/> 00	<input type="text"/> 00
6 Adjusted gross income: Oklahoma Source (line 4 minus line 5)		<input type="text"/> 00
7 Adjusted gross income: All Sources (line 4 minus line 5) Also enter on line 8	<input type="text"/> 00	
8 Adjusted gross income: All Sources (from line 7)		<input type="text"/> 00
9 Oklahoma Adjustments (Schedule 511-NR-C, line 6)		<input type="text"/> 00
10 Income after adjustments (line 8 minus line 9)		<input type="text"/> 00



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Name(s) Shown on Form 511NR:

Your Social Security Number:

Amount from line 10 on page 1

11 Oklahoma itemized deductions (Schedule 511-NR-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) .. 11

12 Exemptions: Enter the total number of exemptions claimed on page 1 X \$1,000..... 12

13 Total deductions and exemptions (add lines 11 and 12) 13

14 **Oklahoma Taxable Income:** (line 10 minus line 13)..... 14

15 (a) Oklahoma Income Tax from Tax Table or if using Farm Income Averaging, enter tax from Form 573, line 22 and enter a "1" in box on line 15... 15a 00

(b) If paying the Health Savings Account additional 10% tax, add additional tax here and enter a "2" in box on line 15..... 15b 00

Oklahoma Income Tax (line 15a plus line 15b) 15

STOP AND READ: If line 7 is equal to or larger than line 2, complete line 16. If line 7 is smaller than line 2, see Schedule 511-NR-E.

16 Oklahoma child care/child tax credit (see instructions) 16

17 Subtract line 16 from line 15 (This is your tax base) (**Do not enter less than zero**)..... 17

		00
11		00
12		00
13		00
14		00
15a		00
15b		00
15		00
16		00
17		00

18 Tax percentage: $\frac{\text{Oklahoma Amount (from line 6)}}{\text{Federal Amount (from line 7)}}$ 18

19 **Oklahoma Income Tax.** Multiply line 17 by line 18. If recapturing the Oklahoma Affordable Housing Tax Credit, add recaptured credit here and enter a "1" in 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 "2" in the box)..... 19

20 Credit for taxes paid to another state (**provide Form 511-TX**) nonresidents do not qualify 20

21 Form 511-CR - Other Credits Form - List 511-CR line number claimed here: 21

22 Line 19 minus lines 20 and 21 (**Do not enter less than zero**) 22

23 Use tax due on Internet, mail order, or other out-of-state purchases while living in Oklahoma. If you certify that no use tax is due, place an 'X' here: 23

24 Balance (add lines 22 and 23)..... 24

25 Oklahoma withholding (**provide W-2s, 1099s or withholding statement**) .. 25 00

26 2023 Oklahoma estimated tax payments. If you are a qualified farmer, place an 'X' here: 26 00

27 2023 payment with extension..... 27 00

28 Credit from Form 578 28 00

29 Oklahoma earned income credit (Sch. 511-NR-F, line 4)..... 29 00

30 Amount paid with original return plus additional paid after it was filed (amended return only)..... 30 00

31 **Payments and credits** (add lines 25-30) 31 00

18		%
19		00
20		00
21		00
22		00
23		00
24		00
25		00
26		00
27		00
28		00
29		00
30		00
31		00



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Name(s) Shown on Form 511NR:

Your Social Security Number:

Amount from line 31 on page 2

Table with 2 columns: Line number and Amount. Rows 32-35. Row 35 amount is 00.

Schedule 511-NR-G provides you with the opportunity to make a financial gift from your refund to a variety of Oklahoma organizations. Place the line number of the organization from Schedule 511-NR-G in the box. If you give to more than one organization, put a "99" in the box. Provide Schedule 511-NR-G ...

Table with 2 columns: Line number and Amount. Rows 36-38. Row 36 amount is 00, row 37 is 00, row 38 is 00.

Refund Note: For Direct Deposit, verify your account and routing numbers are correct. If your direct deposit fails to process you will receive a debit card. You can also choose to receive either a debit card or a paper check by placing an 'X' in the appropriate box below. Note: A minimum refund of \$10.00 is required to receive a paper check. If you request a paper check for an amount less than \$10.00, a debit card will be issued. If no options are selected, you will receive a debit card. See the 511-NR Packet for direct deposit, debit card and paper check information.

Send my refund as a:

- Debit Card
Paper Check

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

Direct Deposit my refund in my:

Form with fields for Checking Account, Savings Account, Routing Number, and Account Number.

Table with 2 columns: Line number and Amount. Rows 39-42. Row 39 amount is 00, row 40 is 00, row 41 is 00, row 42 is 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.

Form for Taxpayer's Signature, Date, Occupation, and Daytime Phone Number.

Form for Spouse's Signature, Date, and Occupation.

Form for Paid Preparer's Signature, Date, Address and Phone Number, and PTIN.

A COPY OF FEDERAL RETURN MUST BE PROVIDED.

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.