

3			Bar	code	3
4			Place	eholder	4
5	2024 Form 511-NR - Nonreside	ent/Part-Year Income Tax Return - Page 3			5
6 7	Name(s) Shown on Form 511NR:		Your Social Security Number:		7
8					8
9					9
1 0		Amount from	line 32 on page 2	00	1 0
2		iginal return and/or prior amended return(s) or as previourn only)		00	2
3	adjusted by Okianoma (amended let			00	3
4	34 Total payments and credits (line 32	? minus line 33)	34	00	4
5					5
6 7		ct line 24 from line 34. This is your overpayment	35	00	7
8	36 Amount of line 35 to be applied to 202	25 estimated tax (original return only) urther information)	00		8
9					9
2 0	Place the line number of the organization from Sch		ma organizations.		2 0
2	give to more than one organization, put a "99" in the	ne box. Provide Schedule 511-NR-G			2
3	37 Donations from your refund (total from	m Schedule 511NR-G)	00		3
4					4
5	38 Total deductions from refund (add lin	es 36 and 37)	38	00	5
6 7	39 Amount to be refunded (line 35 minu	us line 38)	20		7
8	39 Amount to be returned (line 33 minut	is line 30)		00	8
					Q
9					J
3 0	Refund Note: For Direct Deposit, ve	rify your account and routing numbers are correct. If you	ur direct deposit fails to process you will	receive a debit	3 0
3 0	card. You can also choose to receive eith	er a debit card or a paper check by placing an 'X' in the	e appropriate box below. Note: A minimu	um refund of	3 0
3 0	card. You can also choose to receive eith \$10.00 is required to receive a paper che	rify your account and routing numbers are correct. If youer a debit card or a paper check by placing an 'X' in the ck. If you request a paper check for an amount less that the the the the the the the the the th	e appropriate box below. Note: A minimu an \$10.00, a debit card will be issued. If	um refund of	3 0
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3 0 1 2 3 4 5	card. You can also choose to receive eith \$10.00 is required to receive a paper che selected, you will receive a debit card. So Send my refund as a:	ner a debit card or a paper check by placing an 'X' in the ck. If you request a paper check for an amount less that the ethe 511-NR Packet for direct deposit, debit card and ls this refund going to or through an account that is local Direct Deposit my refund in my: Checking Account Routing Number:	e appropriate box below. Note : A minimulan \$10.00, a debit card will be issued. If paper check information.	um refund of no options are	1 2 3 4 5
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	2024 Form 511-NR - Nonresident/Part-Year Income Tax Reti	urn - Pa	ge 4		Barcode Placeholder	
No	Note: Provide this page with your return.		Vour	Social		
on	me(s) Shown Form 511NR:			rity Numb	per:	
	chedule 511-NR-1: Income Allocation for Non e instructions on pages 10-12.	resid	ents and Part-Year	Res	idents	
	es 1-19: In the Federal column, enter the amounts from you report in the Oklahoma column.	r Feder	al tax return. See the inst	tructio	ons to figure the amo	
						7111
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. 511-NR-B)		00	6		00
7	Capital gains or losses (Federal Schedule D)		00	7		00
,				,		00
8	Taxable refunds (state income tax)		00	8		00
9	Alimony received (divorce/separation agreement date:)	00	9		00
10	Business income or (loss) (Federal Schedule C)		00	10		00
11	Other gains or losses (Federal Form 4797)			11		
			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
45						
15	Other income (identify:)	00	15		00
16	Add lines 1 through 15			16		
10			00	10		00
17	Total Federal adjustments to income (identify:)	00	17		00
			00			00
18	Oklahoma source income (line 16 minus line 17) Enter here and on page 1, line 1			18		00
19	, , ,			40		
	Enter here and on page 1, line 2		00	19		
H						+

	2024 Form 511-NR - Nonresident/Part-Year Income Tax Return - F	Page 5		Barcode Placeholder	
	Note: Provide this page ONLY if you have an amount shown of				
Nam on F	e(s) Shown orm 511NR:		Social rity Numb	er:	
	hedule 511-NR-A: Oklahoma Additions instructions on pages 19-21.	Federal Amount		Oklahoma Amount	1
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	2
6	Oklahoma loss distributed by an electing PTE	00	6	00	
7	Oklahoma Bonus Depreciation Add-back	00	7	00	
8	Miscellaneous: Other additions	00	/	00	
0	(enter number in box for the type of addition)	00	8	00	
9	Total additions	00	•	00	
	(add lines 1-8, enter total here and on line 3 of Form 511-NR)	00	9	00	
	hedule 511-NR-B: Oklahoma Subtractions instructions on pages 21-25.	Federal Amount		Oklahoma Amount	3
1	Interest on U.S. government obligations	00	1	00	
2	Taxable Social Security (from Schedule 511-NR-1, line 6)	00	2	00	
3	Federal civil service retirement in lieu of social security	00	3	00	
	Taxpayer Number Spouse Number				
	- Retirement Claim Number:				
4	Military Retirement	00	4	00	4
		00	•	00	
5	Oklahoma government or Federal civil service retirement	00	5	00	
6	Other retirement income	00	6	00	
			Ü		
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	O	00	
	(provide Schedules)	00	9	00	5
40		00	40	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 561-NR)	00	13	00	
14	Income Tax Refund (Federal Form 1040 or 1040-SR, Schedule 1, line 1)	00	14	00	6

	2024 Form 511-NR - Nonresident/Part-Year Income Tax Return - Page 6 Note: Provide this page ONLY if you have an amount shown on a schedule.		Barcode Placeholder
Nam on F	ne(s) Shown orm 511NR:	Your Social Security Number	er:
Sc	hedule 511-NR-B: Oklahoma Subtractions (Continued) Federal Am	ount	Oklahoma Amount
15	Oklahoma income distributed by an electing PTE	00 15	00
16	Oklahoma Bonus Depreciation Deduction	00 16	00
17	Oklahoma Deduction for Qualified Equity Investment in an Eligible Oklahoma Venture Capital Company (provide Form 582-I)	00 17	00
18	Miscellaneous: Other subtractions (enter number in box for the type of deduction	00 18	00
19	Total subtractions (add lines 1-18, enter total here and on line 5 of Form 511-NR)	00 19	00
Sc	chedule 511-NR-C: Oklahoma Adjustments See instructions on pages	25-28.	
1	Military pay exclusion - Active Duty, Reserve and National Guard (not retirement)	1	00
2	Qualifying disability deduction (residents and part-year residents only)	2	00
3	Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account(s)	3	00
4	Deductions for providing foster care	4	00
5	Parental Choice Tax Credit for Private School	5	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 511-NR)	7	00
	chedule 511-NR-D: Oklahoma Itemized Deductions See instructions u claimed itemized deductions on your Federal return, you must claim Oklahoma Itemized I		
1	Federal itemized deductions from Federal Sch. A, line 17	00	
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	
3	Line 1 minus line 2	3	00
4	Medical and Dental expenses from Federal Sch. A, line 4	00	
5	Gifts to Charity from Federal Sch. A, line 14 5	00	
6	Line 3 minus lines 4 and 5	6	00
7	Is line 6 more than \$17,000?		
8	YES. Your itemized deductions are limited. Complete lines 9-11. NO. Your itemized deductions are not limited. Skip lines 9 and 10. Go to line 11. Maximum amount allowed for itemized deductions. (Exception, lines 9 and 10)	8	47,000,00
			17,000 00
9	Medical and Dental expenses from Federal Sch. A, line 4	9	00

4		2024 Form 511-NR - Nonresident/Part-Year Income Tax Return - Page 7	Placeholder
5 6		Note: Provide this page ONLY if you have an amount shown on a schedule.	
7	Nam on F	ne(s) Shown Form 511NR: Your Social Security Number:	
8			
9 1 0	Sc	chedule 511-NR-D: Oklahoma Itemized Deductions (continued)	1
1			
2	10	Gifts to Charity from Federal Sch. A, line 14	00
3	11	Oklahoma Itemized Deductions	
4		If you responded YES on line 7: Add lines 8, 9 and 10.	
5		If you responded NO on line 7: Enter the amount from line 3	00
6 7	Ente	er your Oklahoma Itemized Deductions on line 11 of Form 511-NR.	
8	Sc	chedule 511-NR-E: Child Care/Child Tax Credit See instructions on page 28.	
9	If vo	our Federal Adjusted Gross Income is \$100,000 or less and you are allowed either a credit for child care expenses	or the child
2 0	tax	credit on your Federal return, then as a resident, part-year resident or nonresident military, you are allowed a credi	
1	Okla	ahoma tax. Your Oklahoma credit is the greater of:	
2		20% of the credit for child care expenses allowed by the IRS Code.	
3		OR 5% of the child tay credit allowed by the IBS Code. This includes both the personable child tay credit and the	o rofundablo
4 5		 5% of the child tax credit allowed by the IRS Code. This includes both the nonrefundable child tax credit and the additional child tax credit. 	, returnable
6	The	credit must be prorated based on the ratio of Adjusted Gross Income: All sources to Federal Adjusted Gross Incor	ne. If your
7		eral Adjusted Gross Income is greater than \$100,000, no credit is allowed. Provide a copy of your Federal return	and, if applicable,
8	the	Federal child care credit schedule.	
9	1	Enter your Federal child <u>care</u> credit	
3 0			3
1	2	Multiply line 1 by 20%	
2	3	Enter your Federal child tax credit	
3 4		(total of child tax credit & additional child tax credit)	
5	4	Multiply line 3 by 5%	
6			
7	5	Enter the larger of line 2 or line 4	00
8	6	Divide the amount on line 7 of Form 511-NR by the amount on line 2 of Form 511-NR	
9			
4 0			4
1		Enter the percentage from the above calculation here (do not enter more than 100%)	%
3	7	Multiply line 5 by line 6. This is your Oklahoma child care/child tax credit.	
4	1	Enter total here and on line 16 of Form 511-NR	00
5			00
6	Sc	chedule 511-NR-F: Earned Income Credit See instructions on page 28.	
7	Res	idents and part-year residents are allowed a credit equal to 5% of the federal earned income credit calculated usin	ng the same
8	requ	uirements for calculating the earned income tax credit for federal income tax purposes in effect for the 2020 income	
9	Pro	vide a copy of your Federal return and OTC Form 511-EIC.	
5 0		Nonresidents do not qualify.	5
2	1	Federal earned income credit (from OTC Form 511-EIC)	00
3	2	Multiply line 1 by 5%	00
4	3	Divide the amount on line 6 of Form 511-NR by the amount on line 2 of Form 511-NR	
5			
6			
7		Enter the percentage from the above calculation here (do not enter more than 100%)	%
8			
9 6 0	4	Oklahoma earned income credit (multiply line 2 by line 3, enter total here and	00 6
1		on line 29 of Form 511-NR)	00 6
2			
3			
4			

 $1 \ 2 \ 3 \ 4 \ 5 \ 6 \ 7 \ 8 \ 9 \ 10 \ 1 \ 2 \ 3 \ 4 \ 5 \ 6 \ 7 \ 8 \ 9 \ 20 \ 1 \ 2 \ 3 \ 4 \ 5 \ 6 \ 7 \ 8 \ 9 \ 30 \ 1 \ 2 \ 3 \ 4 \ 5 \ 6 \ 7 \ 8 \ 9 \ 40 \ 1 \ 2 \ 3 \ 4 \ 5 \ 6 \ 7 \ 8 \ 9 \ 50 \ 1 \ 2 \ 3 \ 6 \ 7 \ 8 \ 9 \ 50 \ 1 \ 2 \ 3 \ 6 \ 7 \ 8 \ 9 \ 50 \ 1 \ 2 \ 3$

2 3				Barcode 3
4				Placeholder 4
5	2024 Form 511-NR - Nonresident/Part-Year Income Tax Return - Pa	9	Amounded Detrum	5
6	Note: Provide this page if you have an amount shown on a schedu	ie or are ming an		6
7	Name(s) Shown on Form 511NR:		Your Social Security Number:	7
8				8
9	Schedule 511-NR-G: Donations from Refund (Origin	al Return Or	1ly) See instructions on	page 29.
1 0		f Oklahama angar		1 0
1	This schedule allows you to make a donation from your refund to a variety o program, its mission, how funds are utilized and mailing addresses are show			age 20 of the
2	511-NR Packet. If you are not receiving a refund but would like to make a do			dule 511 NP C
3	Information lists the mailing address to mail your donation to the organizatio			3
4	Place an 'X' in the box associated with the dollar amount you wish to have d	leducted from you	ir refund and donated to	hat organization 5
5 6	Then carry that figure over into the column at the right. When you carry your			
7	number of the organization to which you donated. If you donate to more than			
8	of Form 511-NR.			8
9				9
2 0	1 Support of Programs for Volunteers to Act as Court Appointed Special Advocates			2 0
1	for Abused or Neglected Children\$2 \$5	\$	1	00 1
2				2
3	2 Y.M.C.A. Youth and Government Program\$2 \$5	\$	2	00
4				4
5	3 Support Wildlife Diversity Fund	\$	3	00 5
6				6
7				7
8	4 Total donations (add lines 1-3, enter total here and on line 37 of Form 511-NR	₹)	4	8 00
9 3 0				3 0
1				1
2	Schedule 511-NR-H: Amended Return Information Se	o instructions on n	200 20	2
3	Schedule 311-NK-II. Amended Return information se	e instructions on p	Jage 29.	3
4	Did you file an amended Federal return? Yes No			4
5				5
6	If Yes, provide a copy of the IRS Form 1040X or 1045 AND proof of IRS ac			
7	Adjustment," IRS check or deposit slip. IRS documents submitted after filing	g this Oklahoma a	amended return may dela	ay processing. 7
8	Explain the changes to income, deductions, and/or credits below. Enter the	line reference nu	mber for which you are r	eporting a change
9	and give the reason. If more space is needed, provide a separate schedule		imber for writerr you are i	
4 0				4 0
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5 0				5 0
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4				4
5 6				
7				7
8				8
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6 0				6 0
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2				2
3				3
4				4
5				5
6 2 3 4	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	7 8 9 50 1 2 3 4 5 6	7 8 9 60 1 2 3 4 5 6 7 8 9 7	0 1 2 3 4 5 6 7 8 9 80 1 2 3 4 6