

Amended Return (Not Supported)

OREGON

2013

Form
40

INDIVIDUAL INCOME TAX RETURN

Full-Year Residents Only

Fiscal year ending

For office use only

K F P J

Last name		First name		Initial	Social Security No. (SSN)	Date of birth (mm/dd/yyyy)
Spouse's/RDP's last name if joint return		Spouse's/RDP's first name and initial if joint return		Deceased (Not Supported)	Spouse's/RDP's SSN if joint return	Date of birth (mm/dd/yyyy)
Current mailing address					Telephone number	
City		State	ZIP code	Country	If you filed a return last year, and your name or address is different, check here	
Filing Status 1 Single 2a Married filing jointly 2b Registered domestic partners (RDP) filing jointly 3a Married filing separately: Spouse's name Spouse's SSN 3b Registered domestic partner filing separately: Partner's name Partner's SSN 4 Head of household: Person who qualifies you 5 Qualifying widow(er) with dependent child				Exemptions 6a YourselfRegular Severely disabled6a 6b Spouse/RDP ...Regular Severely disabledb • Enter all dependents 6c All dependents First names c 6d Disabled children only First names d (see instructions) Total • 6e		
Check all that apply →		7a You were: • 65 or older • Blind Spouse/RDP was: • 65 or older • Blind		7b • You filed an extension	7c • You have federal Form 8886	7d • Someone else can claim you as a dependent

8 Federal adjusted gross income. Federal Form 1040, line 37; 1040A, line 21; 1040EZ, line 4; 1040NR, line 36; or 1040NR-EZ, line 10. See instructions, page 13

Round to the nearest dollar

8 .00

ADDITIONS

9 Interest and dividends on state and local government bonds outside of Oregon...	• 9	.00
10 Other additions. Identify: •10x •10y\$ Schedule included 10z •10		.00
11 Total additions. Add lines 9 and 10	• 11	.00
12 Income after additions. Add lines 8 and 11	• 12	.00

SUBTRACTIONS

Include proof of withholding (W-2s, 1099s), payment, and payment voucher

13 2013 federal tax liability (\$0\$6,250; see instructions for the correct amount)	• 13	.00
14 Social Security included on federal Form 1040, line 20b; or Form 1040A, line 14b...	• 14	.00
15 Oregon income tax refund included in federal income	• 15	.00
16 Interest from U.S. government, such as Series EE, HH, and I bonds	• 16	.00
17 Federal pension income. See instructions, page 15. 17a % 17b %	• 17	.00
18 Other subtractions. Identify: •18x •18y\$ Schedule included 18z •18		.00
19 Total subtractions. Add lines 13 through 18	• 19	.00
20 Income after subtractions. Line 12 minus line 19	• 20	.00

DEDUCTIONS

If you are claiming itemized deductions, fill in lines 21 and 23–25. If you are claiming the standard deduction, fill in line 26 only.

21 Itemized deductions from federal Schedule A, line 29	• 21	.00
22		0
23 Total Oregon itemized deductions. Add lines 21 and 22	• 23	.00
24 State income tax claimed as an itemized deduction	• 24	.00
25 Net Oregon itemized deductions. Line 23 minus line 24	• 25	.00
OR		
26 Standard deduction from page 19	• 26	.00
27 Total deductions. Line 25 or line 26, whichever is larger	• 27	.00
28 Oregon taxable income. Line 20 minus line 27. If line 27 is more than line 20, enter -0-	• 28	.00

Either line 25 or 26

TAX

29 Tax. See instructions, page 19. Enter tax here	• 29	.00
Check if tax is from: 29a Tax tables or charts or •29b <input type="checkbox"/> Form FIA-40 or •29c Worksheet FCG		
30 Interest on certain installment sales	• 30	.00
31 Total tax before credits. Add lines 29 and 30	• 31	.00

OREGON TAX BEFORE CREDITS

	32 Total tax before credits from front of form, line 31.....	32	.00
NONREFUNDABLE CREDITS	33 Exemption credit. If the amount on line 8 is less than \$100,000, multiply your		
	total exemptions on line 6e by \$188. Otherwise, see instructions on page 20	33	.00
	34 Retirement income credit. See instructions, page 20	34	.00
	35 Child and dependent care credit. See instructions, page 21	35	.00
	36 Credit for the elderly or the disabled. See instructions, page 21	36	.00
	37 Political contribution credit. See limits, page 21	37	.00
Include proof	38 Credit for income taxes paid to another state. State: ●38y Schedule included 38z ●38	38	.00
	39 Other credits. Identify: ●39x ●39y \$ Schedule included 39z ●39	39	.00
	40 Total non-refundable credits. Add lines 33 through 39.....	40	.00
	41 Net income tax. Line 32 minus line 40. If line 40 is more than line 32, enter -0-	41	.00
PAYMENTS AND REFUNDABLE CREDITS	42 Oregon income tax withheld. Include Form(s) W-2 and 1099		
	43 Estimated tax payments for 2013 and payments made with your extension	43	.00
	●43a Wolf depredation ●43b Claim of right		
Include Schedule WFC if you claim this credit	44 Earned income credit. See instructions, page 23	44	.00
	45 Working family child care credit from WFC, line 18	45	.00
	46 Mobile home park closure credit. Include Schedule MPC.....	46	.00
	47 Total payments and refundable credits. Add lines 42 through 46.....	47	.00
	48 Overpayment If line 41 is less than line 47, you overpaid. Line 47 minus line 41 OVERPAYMENT →	48	.00
	49 Tax to pay If line 41 is more than line 47, you have tax to pay. Line 41 minus line 47 TAX TO PAY →	49	.00
	50 Penalty and interest for filing or paying late. See instructions, page 23	50	.00
	51 Interest on underpayment of estimated tax. Include Form 10 and check box ●51	51	.00
	Exception # from Form 10, line 1 ●51a Check box if you annualized ●51b		
	52 Total penalty and interest due. Add lines 50 and 51	52	.00
	53 Amount you owe Line 49 plus line 52 AMOUNT YOU OWE →	53	.00
	54 Refund Is line 48 more than line 52? If so, line 48 minus line 52 REFUND →	54	.00
	55 Estimated tax Fill in the part of line 54 you want applied to 2014 estimated tax ...	55	.00
CHARITABLE CHECKOFF DONATIONS, PAGE 26 <i>I want to donate part of my tax refund to the following fund(s)</i>	American Diabetes Assoc. ●56	.00	
	SMART ●58	.00	
	The Nature Conservancy ●60	.00	
	Oregon Humane Society ●62	.00	
	Doernbecher Children's Hosp. ●64	.00	
	Charity code ●66a ●66b	.00	
	Oregon Coast Aquarium ●57	.00	
	SOLV ●59	.00	
	St. Vincent DePaul Soc. of OR ●61	.00	
	The Salvation Army ●63	.00	
Oregon Veteran's Home ●65	.00		
Charity code ●67a ●67b	.00		
See instructions	68 Political party \$3 checkoff. Party code: ●68a You ●68b Spouse/RDP.....	68	.00
	69 Total Oregon 529 College Savings Plan deposits. See instructions, page 26	69	.00
	70 Total. Add lines 55 through 69. Total can't be more than your refund on line 54.....	70	.00
	71 NET REFUND Line 54 minus line 70. This is your net refund NET REFUND →	71	.00

DIRECT DEPOSIT	72 For direct deposit of your refund, see instructions, page 27.	● Type of account:	Checking or Savings	
	● Routing No. <input type="text"/>	● Account No. <input type="text"/>		
	Will this refund go to an account outside the United States? ● Yes			

Important: Include a copy of your federal Form 1040, 1040A, 1040EZ, 1040NR, or 1040NR-EZ.			
Under penalty for false swearing, I declare that the information in this return is true, correct, and complete.			
Your signature	Date	Signature of preparer other than taxpayer	● Preparer license no.
X		X	
Spouse's/RDP's signature (if filing jointly, BOTH must sign)	Date	Address	Telephone no.
X			
If you owe, make your check or money order payable to the Oregon Department of Revenue. Write your daytime telephone number and 2013 Oregon Form 40 on your check or money order. Include your payment, along with the payment voucher on page 23, with this return.			
TAX-TO-PAY returns to Mail Oregon Department of Revenue PO Box 14555 Salem OR 97309-0940		REFUND and NO-TAX-DUE returns to Mail REFUND returns and NO-TAX-DUE PO Box 14700 Salem OR 97309-0930	