



2017 Income Tax Return

Oregon Return

Thank you for using
FreeTaxUSA.com to prepare your
2017 income tax return.

You can view the status of your e-filed tax return by
signing in to your account at www.freetaxusa.com.

2018 tax preparation on FreeTaxUSA.com will be
available starting in January of 2019.

We look forward to preparing your 2018 tax return.

2017 Form OR-40

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Office use only

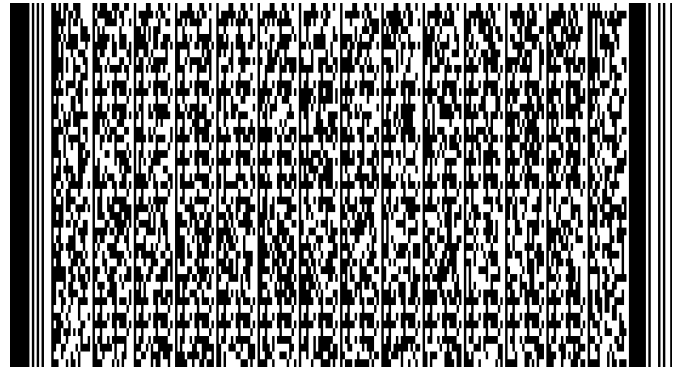
Oregon Individual Income Tax Return for Full-year Residents

Submit original form—do not submit photocopy

Fiscal year ending:

Space for 2-D barcode—do not write in box below

- ☐ Amended return. If amending for an NOL,
tax year the NOL was generated:
- ☐ Calculated using "as if" federal return.
- ☐ Short year tax election.
- ☐ Extension filed.
- ☐ Form OR-24.



First name and initial

Last name

☐ Deceased

Social Security no. (SSN)

☐ First time using
this SSN (see
instructions)☐ Applied
for ITIN

DAVID

C VASQUEZ

606-05-4563

Spouse's first name and initial

Spouse's last name

☐ Deceased

Spouse's SSN

☐ First time using
this SSN (see
instructions)☐ Applied
for ITIN

Current mailing address

Date of birth (mm/dd/yyyy)

Spouse's date of birth

155 NW KINGS BLVD APT 647

12/03/1979

City

State

ZIP code

Country

Phone

CORVALLIS

OR

97330

(925) 818-1172

Filing status (check only one box)

1. ☒ Single.
2. ☐ Married filing jointly.
3. ☐ Married filing separately (enter spouse's information **above**).
4. ☐ Head of household (with qualifying dependent).
5. ☐ Qualifying widow(er) with dependent child.

Exemptions

6a. Credits for yourself: ☒ Regular ☐ Severely disabled 6a.Total
1☐ Check box if someone else can claim you as a dependent.6b. Credits for spouse: ☐ Regular ☐ Severely disabled 6b.☐ Check box if someone else can claim your spouse as a dependent.

Dependents. List your dependents in order from youngest to oldest. If more than four, check this box ☐ and include Schedule OR-ADD-DEP with your return.

First name	Last name	Code*	Dependent's SSN	Dependent's date of birth (mm/dd/yyyy)	Check if child with qualifying disability
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

*Dependent relationship code—Please see instructions to determine the appropriate code.

6c. Total number of dependents 6c. 0

6d. Total number of dependent children with a qualifying disability (see instructions) 6d. 0

6e. Total exemptions. Add 6a through 6d Total 6e. 1

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Name	SSN
DAVID C VASQUEZ	606-05-4563

Taxable income

7. Federal adjusted gross income. Federal Form 1040, line 37; 1040A, line 21; 1040EZ, line 4; 1040NR, line 36; 1040NR-EZ, line 10; or 1040X, line 1C. See instructions	7.	19,140.00
8. Total additions from Schedule OR-ASC, section 1	8.	
9. Income after additions. Add lines 7 and 8.....	9.	19,140.00

Subtractions

10. 2017 federal tax liability. See instructions for the correct amount: \$0-\$6,550	10.	873.00
11. Social Security included on federal Form 1040, line 20b; or Form 1040A, line 14b	11.	
12. Oregon income tax refund included in federal income	12.	
13. Total subtractions from Schedule OR-ASC, section 2.....	13.	
14. Total subtractions. Add lines 10 through 13	14.	873.00
15. Income after subtractions. Line 9 minus line 14.....	15.	18,267.00

Deductions

16. Itemized deductions from federal Schedule A, line 29. If you are not itemizing your deductions, skip lines 16 through 18... 16.		
17. State income tax claimed as an itemized deduction.....	17.	
18. Net Oregon itemized deductions. Line 16 minus line 17.....	18.	
19. Standard deduction. See instructions	19.	2,175.00

You were: 19a. ☐ 65 or older 19b. ☐ Blind **Your spouse was:** 19c. ☐ 65 or older 19d. ☐ Blind

20. Enter the larger of line 18 or line 19. If you skipped line 18, enter the amount from line 19	20.	2,175.00
21. Oregon taxable income. Line 15 minus line 20. If line 20 is more than line 15, enter -0-	21.	16,092.00

Oregon tax

22. Tax. See instructions. Enter tax on line 22. Check box if tax is calculated using an alternative method	22.	1,207.00
22a. <input type="checkbox"/> Form OR-FIA-40 22b. <input type="checkbox"/> Worksheet OR-FCG 22c. <input type="checkbox"/> Schedule OR-PTE-FY		
23. Interest on certain installment sales.....	23.	
24. Total tax before credits. Add lines 22 and 23	24.	1,207.00

Standard and carryforward credits

25. Exemption credit. If the amount on line 7 is less than \$100,000, multiply your total exemptions on line 6e by \$197. Otherwise, see instructions.....	25.	197.00
26. Political contribution credit. See limits	26.	
27. Total standard credits from Schedule OR-ASC, section 3.....	27.	
28. Total standard credits. Add lines 25 through 27	28.	197.00
29. Tax minus standard credits. Line 24 minus line 28. If line 28 is more than line 24, enter -0-.....	29.	1,010.00
30. Total carryforward credits claimed this year from Schedule OR-ASC, section 4. Line 30 can't be more than line 29 (see Schedule OR-ASC instructions).....	30.	
31. Tax after standard and carryforward credits. Line 29 minus line 30.....	31.	1,010.00

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Name	SSN
DAVID C VASQUEZ	606-05-4563

Payments and refundable credits

32. Oregon income tax withheld. Include a copy of Form(s) W-2 and 1099	32.	817.00
33. Amount applied from your prior year's tax refund	33.	
34. Estimated tax payments for 2017. Include all payments made prior to the filing date of this return. Do not include the amount already reported on line 33.....	34.	
35. Earned income credit. See instructions	35.	0.00
36. Oregon surplus credit (kicker). Enter your kicker amount. See instructions.		
If you elect to donate your kicker to the State School Fund, enter -0- and see line 53	36.	22.00
37. Total refundable credits from Schedule OR-ASC, section 5.....	37.	
38. Total payments and refundable credits. Add lines 32 through 37	38.	839.00

Tax to pay or refund

39. Overpayment of tax. If line 31 is less than line 38, you overpaid. Line 38 minus line 31	39.	
40. Net tax. If line 31 is more than line 38, you have tax to pay. Line 31 minus line 38	40.	171.00
41. Penalty and interest for filing or paying late. See instructions	41.	
42. Interest on underpayment of estimated tax. Include Form OR-10	42.	

Exception number from Form OR-10, line 1: 42a.

Check box if you annualized: 42b. ☐

43. Total penalty and interest due. Add lines 41 and 42	43.	
44. Net tax including penalty and interest. Line 40 plus line 43..... This is the amount you owe	44.	171.00
45. Overpayment less penalty and interest. Line 39 minus line 43..... This is your refund	45.	
46. Estimated tax. Fill in the part of line 45 you want applied to your estimated tax account.	46.	
47. Charitable checkoff donations from Schedule OR-DONATE, line 30.....	47.	
48. Political party \$3 checkoff. Party code: 48a. You. 48b. Spouse.....	48.	
49. Total Oregon 529 College Savings Plan deposits from Schedule OR-529. See instructions	49.	
50. Total. Add lines 46 through 49; total can't be more than your refund on line 45.....	50.	
51. Line 45 minus line 50. This is your net refund Net refund	51.	

Direct deposit

52. For direct deposit of your refund, see instructions. Check the box if this refund will go to an account outside the United States: ☐

Type of account: ☐ Checking or ☐ Savings

Routing number:

Account number:

Surplus credit donation

53. Oregon surplus credit (kicker) donation. If you elect to donate your kicker to the State School Fund, check the box: 53a. ☐

Write the amount from line 7 of the surplus credit worksheet here. **This election is irrevocable**.....53b.

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If filing with a new SSN, enter your former identification number.