

Amended Return Form

OREGON

40N

Individual Income Tax Return FOR NONRESIDENTS

2010

For office use only

Oregon resident: From mm dd yyyy To mm dd yyyy Fiscal year ending K F P J

Last name, First name and initial, Social Security No. (SSN), Date of birth (mm/dd/yyyy)

Current mailing address, Telephone number, City, State, ZIP code, Country

Filing Status (Single, Married filing jointly, etc.), Exemptions (6a-6e)

Check all that apply: 7a You were: 65 or older, Blind; 7b You filed an extension; 7c You have federal Form 8886; 7d You filed Oregon Form 24; 7e If there is a kicker refund, I want to donate mine to the State School Fund

Table with columns: INCOME, ADJUSTMENTS TO INCOME, ADDITIONS, SUBTRACTIONS. Rows include Wages, salaries, interest, dividends, etc. Federal column (F) and Oregon column (S) with amounts.

Carry this amount to line 40

	40 Amount from front of form, line 38S ( <b>Oregon</b> amount).....	40	.00
<b>DEDUCTIONS AND MODIFICATIONS</b>	41 Itemized deductions from federal Schedule A, line 29..... ● 41	.00	<b>EITHER, NOT BOTH</b>
	42 State income tax claimed as itemized deduction..... ● 42	.00	
	43 Net Oregon itemized deductions. Line 41 minus line 42..... ● 43	.00	
	44 Standard deduction from page 25..... ● 44	.00	
	45 2010 federal tax liability ( <b>\$0-\$5,850; see instructions</b> for the correct amount).... ● 45	.00	
	46 Other deductions and modifications. Identify: ●46x <input type="checkbox"/> ●46y \$ <input type="text"/> Schedule 46z <input type="checkbox"/> ● 46	.00	
	47 Deductions and modifications X Oregon percentage. See page 26..... ● 47	.00	
	48 Deductions and modifications <b>not</b> multiplied by the Oregon percentage. See page 27 ● 48	.00	
49 Total deductions and other modifications. Add lines 47 and 48..... ● 49	.00		
50 Oregon taxable income. Line 40 minus line 49..... ● 50	.00		
<b>OREGON TAX</b>	51 <b>Tax.</b> See page 27 for instructions. Enter tax here..... ● 51	.00	
	Check if tax is from: 51a <input type="checkbox"/> Tax charts or ● 51b <input type="checkbox"/> Form FIA-40N or ● 51c <input type="checkbox"/> Worksheet FCG		
	52 Interest on certain installment sales..... ● 52	.00	
53 Total tax before credits. Add lines 51 and 52.....	OREGON TAX →	● 53	.00
<b>NONREFUNDABLE CREDITS</b> <small>Include proof →</small>	54 <b>Exemption credit.</b> See instructions, page 28..... ● 54	.00	<b>ADD TOGETHER</b>
	55 Credit for income taxes paid to another state. State: ●55y <input type="checkbox"/> Schedule 55z <input type="checkbox"/> ● 55	.00	
	56 Other credits. Identify: ●56x <input type="checkbox"/> ●56y \$ <input type="text"/> Schedule included 56z <input type="checkbox"/> ● 56	.00	
	57 Total non-refundable credits. Add lines 54 through 56..... ● 57	.00	
58 Net income tax. Line 53 minus line 57. If line 57 is more than line 53, enter -0-..... ● 58	.00		
<b>PAYMENTS AND REFUNDABLE CREDITS</b>  <small>Include Schedule WFC-N/P if you claim this credit</small>	59 Oregon income tax withheld from income. <b>Include Forms W-2 and 1099</b> ..... ● 59	.00	<b>ADD TOGETHER</b>
	60 Estimated tax payments for 2010 and payments made with your extension..... ● 60	.00	
	61 Tax withheld from pass-through entity and real estate transactions..... ● 61	.00	
	62 Earned income credit. See instructions, page 34..... ● 62	.00	
	63 <b>Working family child care credit</b> from WFC-N/P, line 21..... ● 63	.00	
	64 Mobile home park closure credit. Include Schedule MPC..... ● 64	.00	
	65 Total payments and refundable credits. Add lines 59 through 64..... ● 65	.00	
	66 <b>Overpayment.</b> Is line 58 <b>less</b> than line 65? If so, line 65 minus line 58..... <b>OVERPAYMENT</b> → ● 66	.00	
67 <b>Tax to pay.</b> Is line 58 <b>more</b> than line 65? If so, line 58 minus line 65..... <b>TAX TO PAY</b> → ● 67	.00		
68 Penalty and interest for filing or paying late. See instructions, page 34..... ● 68	.00	<b>ADD TOGETHER</b>	
69 Interest on underpayment of estimated tax. <b>Include Form 10 and check box</b> <input type="checkbox"/> . ● 69	.00		
Exception # from Form 10, line 1 ●69a <input type="checkbox"/> Check box if you annualized ●69b <input type="checkbox"/>			
70 Total penalty and interest due. Add lines 68 and 69..... ● 70	.00		
71 <b>Amount you owe.</b> Line 67 plus line 70..... <b>AMOUNT YOU OWE</b> → ● 71	.00		
72 <b>Refund.</b> Is line 66 more than line 70? If so, line 66 minus line 70..... <b>REFUND</b> → ● 72	.00		
<b>CHARITABLE CHECKOFF DONATIONS, PAGE 35</b>  <small>I want to donate part of my tax refund to the following fund(s)</small>	Oregon Nongame Wildlife ● 74	.00	<b>These will reduce your refund</b>
	The Nature Conservancy ● 76	.00	
	Oregon Humane Society ● 78	.00	
	Oregon Veterans' Home ● 80	.00	
	Oregon Lions Sight & Hearing ● 82	.00	
	Special Olympics Oregon ● 84	.00	
	Charity code ●86a <input type="checkbox"/> ●86b <input type="checkbox"/>	.00	
	St. Vincent de Paul Society ● 75	.00	
	Doernbecher Children's Hospital ● 77	.00	
	The Salvation Army ● 79	.00	
Planned Parenthood of Oregon ● 81	.00		
Shriners Hospitals for Children ● 83	.00		
Susan G. Komen for the Cure ● 85	.00		
Charity code ●87a <input type="checkbox"/> ●87b <input type="checkbox"/>	.00		
88 Total. Add lines 73 through 87. Total can't be more than your refund on line 72..... ● 88	.00		
89 <b>NET REFUND.</b> Line 72 minus line 88. This is your net refund..... <b>NET REFUND</b> → ● 89	.00		

**DIRECT DEPOSIT** 90 For direct deposit of your refund, see instructions, page 35. ● **Type of Account:**  Checking or  Savings

● Routing No.  ● Account No.

Will this refund go to an account outside the United States? ●  Yes

**Important: Include a copy of your federal Form 1040, 1040A, 1040EZ, or 1040NR. Do not include other federal schedules.**

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	● License No.
X		X	
Spouse's/RDP's signature (if filing jointly, BOTH must sign)	Date	Address	Telephone No.
X			