# Oregon Individual Income Tax Return 

2003
FULL-YEAR RESIDENTS ONLY

40 S

SHORT FORM




8 Wages ... •8a $\square .00$ plus unemployment ... $\bullet 8 \mathrm{~b}$ $\square$ plus interest and dividends .... •8c $\quad .00$....Total income $(8 a+8 b+8 c)$


Staple
92003 federal tax liability (\$0-\$3,500; see instructions for the correct amount) $\qquad$
$\qquad$

10 Standard deduction from the back of this form $\qquad$ 11 Add lines 9 and 10. $\qquad$
$\qquad$
$\qquad$

.11
12 Oregon taxable income. Line 8 d minus line 11 . If line 11 is more than line 8 d , fill in $-0-$
13 Tax from tables. See instructions, page 10

- 14

15 Earned income credit. See instructions, page 10

wage
16 Child and dependent care credit. See instructions, page 10

$\qquad$
$\qquad$slips17 Total credits. Add lines 14 through 16
$\qquad$ .. 15

17 Total credits. Add lines 14 through $\qquad$

- 16
$\begin{array}{r}13 \\ .00 \\ \hline\end{array}$
here

19 Surcharge. See instructions, page 10
20 Net income tax. Add lines 18 and 19 $\qquad$



20 Net income tax. Add lines 18 and 19 ................................................
21 Oregon income tax withheld. Attach your Form(s) W-2 and 1099 ..


22 Working family child care credit. Attach Schedule WFC, see page 21

- 21

23 Total payments. Add lines 21 and 22 .. $\qquad$ - 22


24 Refund. If line 23 is more than line 20 , you have a refund. Line 23 minus line 20 ........
...............

| 23 |  |
| :--- | :--- |
| 24 |  |
| 25 | .00 |
|  |  |

25 Tax to pay. If line 20 is more than line 23 , you have tax to pay. Line 20 minus line 23 ...


CHARITABLE CHECKOFFS
I wish to
donate part of my tax refund to the following fund(s)


## DIRECT

DEPOSIT
34 For direct deposit of your refund, see the instructions on page 12.

- Type of Account: $\square$ Checking or $\square$ Savings
- Routing No.


|  | Your signature | Date | Si |
| :---: | :---: | :---: | :---: |
| SIGN | X |  | X |
| HERE | Spouse's signature (if filing jointly, BOTH must sign) | Date | Ad |


| Signature of preparer other than taxpayer <br> $X$ | License No. |
| :--- | :--- |
| Address | Telephone No. |

- Standard deduction. Unless you are claimed as a dependent, or are age 65 or older, or blind, your standard deduction is based on your filing status as follows:
Single ..... \$1,670
Married filing jointly ..... 3,345
Married filing separately
If spouse claims standard deduction ..... 1,670
If spouse itemizes deductions ..... -0-
Head of household ..... 2,695
Qualifying widow(er) ..... 3,345
- Standard deduction- Dependents. If you can be claimed as a dependent on another person's return, your standard deduction is limited to the larger of:
- Your earned income plus $\$ 250$, but no more than the maximum allowed for your filing status, shown above, OR - \$750.

This limit applies even if the other person can, but does not, claim you as a dependent on his or her return. Use the worksheet on page 10 to calculate your standard deduction.

- Standard deduction - Age 65 or older, or blind. If you are age 65 or older, or blind, you are entitled to a larger standard deduction based on your filing status:

1. Are you: $\square 65$ or older? $\square$ Blind? If claiming spouse's exemption, is spouse: $\square 65$ or older? $\square$ Blind?
2. 

| If your filing status is... | And the number of boxes checked above is... | Then your standard deduction is... | If your filing status is... | And the number of boxes checked above is... | Then your standard deduction is... |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Single |  |  | Married filing jointly | 1 | 4,345 |
|  | $\begin{aligned} & 1 \\ & 2 \end{aligned}$ | $\begin{array}{r} \$ 2,870 \\ 4,070 \end{array}$ |  | 2 | 5,345 |
|  |  |  |  | 3 | 6,345 |
| Head of | 1 | 3,895 |  | 4 | 7,345 |
| Household | 2 | 5,095 | Married filing separately | 1 | 2,670 |
|  |  |  |  | 2 | 3,670 |
| Qualifying | 1 | 4,345 |  | 3 | 4,670 |
| Widow(er) | 2 | 5,345 |  | 4 | 5,670 |

- Standard deduction- Nonresident aliens. The standard deduction for nonresident aliens is -0-.

Make your check or money order payable to the: Oregon Department of Revenue. Write your Social Security number and "2003 Form 40S" on your check or money order.

Attach your payment to Form RPC-the payment coupon on page 37.

| Mail |
| ---: | :--- | ---: | :--- |
| TAX-TO-PAY <br> returns to | | Oregon Department of Revenue |
| :--- |
| PO Box 14555 |
| Salem OR 97309-0940 |$\quad$| Mail REFUND returns |
| ---: | :--- |
| and NO-TAX-DUE |$\quad$| REFUND |
| :--- |
| returns to |$\quad$| PO Box 14700 |
| :--- |
| Salem OR 97309-0930 |

