Schedule WFC-N/P

Oregon Working Family Child Care Credit for Form 40N and Form 40P Filers

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Last name	First name and initial	Soci	al Se	curity No. (SSN)	Da	te of birth (mm/dd/yyyy)	
Spouse's last name if joint return	Spouse's first name and initial if	joint return Spor	ıse's	SSN if joint return	Da	te of birth (mm/dd/yyyy)	
YOU MAY BE REQUIRED TO PROVIDE	PROOF OF YOUR		_]
PAYMENT OF YOUR CHILD CARE EXP Household Size Calculation 1. Enter the number of exemptions you claimed on your federal return		,					
Enter the number of exemptions you did claim on your federal return because yo the exemption to the child's other paren	d not u released it2	FOF	₹ (COMPUTEI	R USE	ONLY	
 3. Add lines 1 and 2 4. Enter the number of exemptions you claryour federal return for people who did n your household during 2006, including ereleased to you by your child's other parare not related by blood, marriage, or ac 	aimed on ot live in exemptions rent, or who						
5. Household size. Line 3 minus line 4							
Qualifying Child Care Expenses Paid in	2006. Complete all inforn	nation for each	ı chi	ild care provider yo	ou paid in 2	006.	=
Provider's full name and complete address			Prc	ovider's SSN or FEIN	Child to Provid Relationship	der er code)	
6. NameAddressCity, State, ZIP Code			Pro	ovider's Telephone No.]6	Amount You Paid to Provider	
Provider's full name and complete address			Pro	ovider's SSN or FEIN	Child to Provid Relationship	der	
7. Name			Prc	ovider's Telephone No.	`	er code) Amount You Paid to Provider	ر ا
City, State, ZIP Code					Child to Provide		J
Provider's full name and complete address			Pro	ovider's SSN or FEIN	Relationship		
8. Name			L		(ent	er code)	
Address			Pro	ovider's Telephone No.	٦ .	Amount You Paid to Provider	1
City, State, ZIP Code			_		8		┨
9. Total qualifying child care expenses you pa			3 and	d enter the result her	Child to	Φ	_
Qualifying Child Information—Complete all	information for each child	Child's SSN	1	Child's Date of Birth	Taxpayer Relationship (enter code)	You Paid for Child	_
10.						\$	-
11. 2.			—			\$	-
12. 3.						\$	-
14. Total qualifying child care expenses you	naid Add amounts on lines	e 10 through 13		d enter the result he	ro 1/	<u> </u>	-
Computation of Credit	paid. Add amounts on lines	s to through to	anc	d enter the result he	1614	Ψ	Ξ
 Enter your federal adjusted gross incom 	ne (Form 40N or Form 40P li	ine 30F)				15	1
6. Enter your Oregon adjusted gross incom							1
7. Enter the larger of line 15 or line 16							1
8. Enter the total qualifying child care expe							1
9. Enter the decimal amount from the work						-	1
matches your household size on line 5 a	= -					19 X .	1
20. Multiply the amount on line 18 by the decimal amount on line 19 and enter here				1			
21. Multiply line 20 by the Oregon percentag							
here and on Form 40N, line 63, or Form						. 21	

Working Family Child Care Credit—2006 Tables

Table 1, household size = 1			
If the amount on Schedule WFC-N/P, line 17 is:		Enter this decimal amount on Schedule	
at least:	but not more than:	WFC-N/P, line 19:	
	\$19,600	.40	
19,601	20,600	.36	
20,601	21,550	.32	
21,551	22,550	.24	
22,551	23,500	.16	
23,501	24,500	.08	
24,501		.00	

Table 2, household size = 2			
	amount on FC-N/P, line 17 is: but not more than:	Enter this decimal amount on Schedule WFC-N/P, line 19:	
	\$26,400	.40	
26,401	27,700	.36	
27,701	29,050	.32	
29,051	30,350	.24	
30,351	31,700	.16	
31,701	33,000	.08	
33,001		.00	

Table 3, household size = 3			
If the a	mount on	Enter this decimal	
Schedule WFC-N/P, line 17 is:		amount on Schedule	
at least:	but not more than:	WFC-N/P, line 19:	
	\$33,200	.40	
33,201	34,850	.36	
34,851	36,500	.32	
36,501	38,200	.24	
38,201	39,850	.16	
39,851	41,500	.08	
41,501		.00	

Table 4, household size = 4			
If the a	mount on	Enter this decimal	
Schedule WF	C-N/P, line 17 is:	amount on Schedule	
at least:	but not more than:	WFC-N/P, line 19:	
	\$40,000	.40	
40,001	42,000	.36	
42,001	44,000	.32	
44,001	46,000	.24	
46,001	48,000	.16	
48,001	50,000	.08	
50,001		.00	

Table 5, household size = 5			
	amount on FC-N/P, line 17 is:	Enter this decimal amount on Schedule	
at least:	but not more than:	WFC-N/P, line 19:	
	\$46,800	.40	
46,801	49,150	.36	
49,151	51,500	.32	
51,501	53,800	.24	
53,801	56,150	.16	
56,151	58,500	.08	
58.501		.00	

Table 6, household size = 6			
If the amount on		Enter this decimal	
Schedule WF	C-N/P, line 17 is:	amount on Schedule	
at least:	but not more than:	WFC-N/P, line 19:	
	\$53,600	.40	
53,601	56,300	.36	
56,301	58,950	.32	
58,951	61,650	.24	
61,651	64,300	.16	
64,301	67,000	.08	
67,001		.00	

Table 7, household size = 7			
If the a	mount on	Enter this decimal	
Schedule WF	C-N/P, line 17 is:	amount on Schedule	
at least:	but not more than:	WFC-N/P, line 19:	
	\$60,400	.40	
60,401	63,400	.36	
63,401	66,450	.32	
66,451	69,450	.24	
69,451	72,500	.16	
72,501	75,500	.08	
75,501		.00	

Table 8, household size = 8*			
If the amount on		Enter this decimal	
Schedule WF	C-N/P, line 17 is:	amount on Schedule	
at least:	but not more than:	WFC-N/P, line 19:	
	\$67,200	.40	
67,201	70,550	.36	
70,551	73,900	.32	
73,901	77,300	.24	
77,301	80,650	.16	
80,651	84,000	.08	
84,001		.00	

^{*} If your household size is more than eight, contact the department for the tables you need.

Working Family Child Care Credit—2006 Tables

Tak	Table 9, household size = 9			
	mount on	Enter this decimal amount on Schedule		
Scheaule v	VFC, line 15 is:	amount on schedule		
at least:	but not more than:	WFC, line 17:		
	\$74,000	.40		
\$74,001	\$77,700	.36		
\$77,701	\$81,400	.32		
\$81,401	\$85,100	.24		
\$85,101	\$88,800	.16		
\$88,801	\$92,500	.08		
\$92,501		.00		

Table 10, household size = 10			
If the a	mount on	Enter this decimal	
Schedule V	/FC, line 15 is:	amount on Schedule	
at least:	but not more than:	WFC, line 17:	
	\$80,800	.40	
\$80,801	\$84,840	.36	
\$84,841	\$88,880	.32	
\$88,881	\$92,920	.24	
\$92,921	\$96,960	.16	
\$96,961	\$101,000	.08	
\$101,001		.00	

Table 11, household size = 11		
If the a	mount on	Enter this decimal
Schedule WFC, line 15 is:		amount on Schedule
at least:	but not more than:	WFC, line 17:
	\$87,600	.40
\$87,601	\$91,980	.36
\$91,981	\$96,360	.32
\$96,361	\$100,740	.24
\$100,741	\$105,120	.16
\$105,121	\$109,500	.08
\$109,501		.00

Table 12, household size = 12		
If the a	mount on	Enter this decimal
Schedule WFC, line 15 is:		amount on Schedule
at least:	but not more than:	WFC, line 17:
	\$94,400	.40
\$94,401	\$99,120	.36
\$99,121	\$103,840	.32
\$103,841	\$108,560	.24
\$108,561	\$113,280	.16
\$113,281	\$118,000	.08
\$118,001		.00

Table 13, household size = 13		
If the amount on Schedule WFC, line 15 is:		Enter this decimal amount on Schedule
at least:	but not more than:	WFC, line 17:
	\$101,200	.40
\$101,201	\$106,260	.36
\$106,261	\$111,320	.32
\$111,321	\$116,380	.24
\$116,381	\$121,440	.16
\$121,441	\$126,500	.08
\$126,501		.00

Table 14, household size = 14		
If the a	mount on	Enter this decimal
Schedule WFC, line 15 is:		amount on Schedule
at least:	but not more than:	WFC, line 17:
	\$108,000	.40
\$108,001	\$113,400	.36
\$113,401	\$118,800	.32
\$118,801	\$124,200	.24
\$124,201	\$129,600	.16
\$129,601	\$135,000	.08
\$135,001		.00

Table 15, household size = 15		
1	mount on VFC, line 15 is:	Enter this decimal amount on Schedule
at least:	but not more than:	WFC, line 17:
	\$114,800	.40
\$114,801	\$120,540	.36
\$120,541	\$126,280	.32
\$126,281	\$132,020	.24
\$132,021	\$137,760	.16
\$137,761	\$143,500	.08
\$143,501		.00

Table 16, household size = 16*			
If the amount on Schedule WFC, line 15 is:		Enter this decimal amount on Schedule	
at least:	but not more than:	WFC, line 17:	
	\$121,600	.40	
\$121,601	\$127,680	.36	
\$127,681	\$133,760	.32	
\$133,761	\$139,840	.24	
\$139,841	\$145,920	.16	
\$145,921	\$152,000	.08	
\$152,001		.00	

^{*} *If your household size is more than 16, contact the department for the tables you need.*