Amended Return OREGON Individual Income Tax Return				Form		W	W For office use only			
				100			For office use only			
2007 Individu	ial Incon	ne Tax Ro	eturr		+U 5					
FULL-	YEAR RES	IDENTS ON	ILY	5	SHORT FORM	A	К	F	P	
Last name	First name and	l initial			Social Security No	o. (SSN)		Date	of birth (mn	n/dd/yyyy)
Spouse's last name if joint return	Spouse's first	name and initial if		Deceased Jrn	– Spouse's SSN if je	- oint return		Date	of birth <i>(mn</i>	n/dd/yyyy)
				Deceased	-	-				
Current mailing address						Telephone	e number			
City	State	ZIP code		Country		lf vou fil) ed a returi	n last vo	ar and vo	
							r address			
• Filing 1 Single				Exemp		•			₽	Total
Status 2 Married filing jointly				6a YourselfRegularSeverely disabled6a						
only 3 Married filing Spouse's name one separately Spouse's SSN				6b SpouseRegular Severely disabled b 6c All dependents First names • c						
box 4 Head of household Person who qu									€ ● (
5 🗌 Qualifying widow(er) with deper									Total ● 6	e
Check 7a • • • • • • • • • • • • • • • • • •	7b ● You				7d • Someon					
apply → Spouse was: 65 or older Blind			eral Forn T, or RIC		can claim yo a dependen					
8 Wages (enter in box 8a) +									o the near	
	0 + ●8b) + ●8c					● 8 .00		.00
 9 2007 federal tax liability (10 Standard deduction from 								.00		
11 Add lines 9 and 10										.00
Staple 12 Oregon taxable income. I	_ine 8 minus lir	ne 11. If line 11	is more	than lin	e 8, enter -0			12		.00
proof of 13 Tax. See instructions, page	ge 12. Enter ta	x from tax table	es or ch	arts here	ə	··· <u>·</u> ····		13		.00
withholding (W-2s, 14 Exemption credit. Multip		•						.00		
1099s), 15 Child and dependent care					• 1: • 1:			.00 .00		
and payment						-				.00
here 18 Net income tax. Line 13 r										.00
19 Oregon income tax withh								.00)		
20 Earned income credit. Se								.00		
Attach Schedule 21 Working family child car					• 2	1		.00 }	ADD TOO	GETHER
this credit Number from WFC, line 5 • 2		ount from WFC, I								
22 Mobile home park closure 23 Total payments and refur								.00 ノ ● 23		.00
24 Refund. If line 23 is more			•							.00
25 Tax to pay. If line 18 is m										.00
CHARITABLE Oregon Nongame Wildlife	e ● 26	.00	C	hild Abus	e Prevention • 27			.00)		
CHECKOFFS PAGE 13 Alzheimer's Disease Research	h ● 28	.00	Stop Do	om. & Sex	ual Violence • 29			.00		
I want to AIDS/HIV Education & Service		.00			ancial Assist. • 31			.00	These	
of my tax American Diabetes Association		.00			Association • 33			.00	redu your re	
refund to	T ● 34	.00		egon coa	SOLV ● 37			.00		
the following fund(s) Charity code •38a	•38b	.00	Charity	code •3				.00		
40 Total. Add lines 26 through								• 40		.00
41 NET REFUND. Line 24 m										.00.
DIRECT 42 For direct deposit of your DEPOSIT • Routing No.	retuna, see tr		on page ccount No		• iype	e of Acco		Checking	or⊔: 	Savings
Under penalty for false swearing, I declare	that the inform				nents is true, cor	rect, and	complete.	<u>+</u>		
Your signature		Date	S	ignature	of preparer other th	nan taxpay	er	 License 	No.	
x			2				<u></u>			
Spouse's signature (if filing jointly, BOTH must sig	ın)	Date	^	ddress			Telephone	NO.		
x										

How to figure your standard deduction

• **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	\$1,825
Married filing jointly	3,650
Married filing separately	
If spouse claims standard deduction	1,825
If spouse claims itemized deductions	-0-
Head of household	2,940
Qualifying widow(er)	3,650

• **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 \$300, up to the maximum allowed for your filing status, shown above, or
 \$850.

This limit applies even if you can be, but are **not**, claimed as a dependent on another person's return. See the standard deduction worksheet for single dependents on page 11, or contact us if you are a married dependent.

- 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: □65 or older? □Blind? If claiming spouse's exemption, is your spouse: □65 or older? □Blind?

· If your filing status is	And the number of boxes checked in step 1 above is	Then your standard deduction is	If your filing status is	And the number of boxes checked in step 1 above is	Then your standard deduction is
Single1 2Married1 filingjointly3 4	\$3,025 4,225 4,650	Married filing separately	1 2 3 4	2,825 3,825 4,825 5,825	
	•	5,650 6,650 7,650	Head of household Qualifying widow(er)	1 2 1 2	4,140 5,340 4,650 5,650

• **Standard deduction – Nonresident aliens.** The standard deduction for nonresident aliens, as defined by federal law, is -0-.

If you owe, make your check or money order payable to the **Oregon Department of Revenue**. Write your daytime telephone number and **"2007 Oregon Form 40S"** on your check or money order. Attach your payment, along with the payment voucher on page 3, to this return.

Mail TAX-TO-PAY returns to Oregon Department of Revenue PO Box 14555 Salem OR 97309-0940 Mail **REFUND** returns and **NO-TAX-DUE** returns to

REFUND PO Box 14700 Salem OR 97309-0930