STS 4100200 222 222

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13-23 Revision 2000

IF REPORT IS TYPED OR MACHINE PRINTED SEE INSTRUCTIONS

OKLAHOMA SALES TAX REPORT

A. Taxpayer FEIN/SSN	B. Reporting Period	C. Due Date

D. Permit Number

- OFFICE USE ONLY - F.C. P.T. Mailing Business G. Out of Business
F. Address Change

H. Page 0 1 of Page(s)

E. MAILING ADDRESS

Name

Address

City State Zip

		---- DOLLARS ----	CENTS
1. Total Sales *(Whole dollars only)*			0 0
2. Removed from inventory and consumed or used or purchased for which direct payment is due	+		0 0
3. Total exemptions *(Total from Schedule N. below)*	-		0 0
4. Net Taxable Sales.....	=		0 0
5. STATE TAX	=		

CITY AND COUNTY TAX COMPUTATION

	I. City/County Code	J. City/County Name	K. Net Sales Subject To Tax ---- WHOLE DOLLARS ONLY ----	L. Tax Rate (%)	M. Amount of Tax Due (multiply item K. by item L.) ---- DOLLARS ----	CENTS
6						
7						
8						
9						
10						
11						
12						
13						

N. SALES TAX EXEMPTION SCHEDULE

	-- WHOLE DOLLARS ONLY --
3a. Sales To Those Holding Sales Tax Permits or direct pay permits..	
3b. Gasoline Sales With State Gasoline Tax Paid	
3c. Motor Vehicle Sales On Which Excise Tax Has Been Paid	
3d. Agricultural Sales	
3e. Sales Subject To Federal Food Stamp Exemption	
3f. Returned Merchandise	
3g. Other Legal sales tax exemptions (explain on reverse)	

		---- DOLLARS ----	CENTS
14. Total Lines 6 through 13.....			
15. Total from Supplement pages			
16. Tax Due *(Add Lines 5, 14 and 15)....*			
17. Discount.....	-		
18. Interest	+		
19. Penalty.....	+		
20. Less Approved Credit *(Attach Credit Voucher)*.....	-		
21. TOTAL DUE *(if No Total Due put '0')*	=		

I declare that the information in this document and any attachments is true correct to the best of my knowledge and belief.

SIGN HERE:

GENERAL INSTRUCTIONS

Please use a #2 pencil or pen with black ink to make your entries on this form. If you type your report, please type "XXX" over "222" in box P. at the top of the form. If your mailing address or your business address has changed place an "X" in the proper Box F and enter the correct information in space provided below. If you are not required to file this form, call the Oklahoma Tax Commission at (405)521-3160.

Enter your taxpayer identification number.

Enter the month(s) and year for the sales being reported.

Enter the date the report is due.

Enter your Sales Tax Permit Number.

Provide your name and mailing address.

Enter the total number of pages enclosed in the boxes to the right o the word "of."

If you are closing your business and this will be your last sales tax return, marl over the "X" in block "G." and return your permit card with this report to the Oklahoma Tax Commission for cancellation.

LINE 1 (TOTAL SALES)- Enter the total amount of gross receipts, includin taxable and non-taxable receipts. If no sales were made during the reporting peri leave blank.

LINE 2 (REMOVED FROM INVENTORY)- Enter the sales value of tangibl personal property purchased for resale and consumed or used in this reportin period. Any merchandise purchased tax exempt with your sales tax permit an withdrawn for use by you or your business is to be included in this line. Also include amounts for purchases for which you are paying the sales tax directly to t Oklahoma Tax Commission.

LINE 3 (TOTAL SALES TAX EXEMPTIONS)- Use the Exemption Schedule Item N, to compute the authorized exemptions from gross receipts for thi reporting period. (Use Lines 3a. thru 3g.). Enter the amount of total sales ta exemptions on Line 3, at top.

3g. Explanation of 'Other Sales tax exemptions':_____

_____

_____

LINE 4 (NET TAXABLE SALES)- Subtract line 3 from the total of lines 1 and 2 to arrive at net taxable sales. If you have no amount subject to tax, leave blank.

LINE 5 (STATE TAX)- Multiply Line 4 by the applicable tax rate. If there is n tax due, leave blank.

LINES 6 THROUGH LINE 13 - We are aware the computer printed information subject to change: therefore, we have provided blank lines for you to ad cities/counties as needed. If any computer printed information is incorrect lin through the incorrect information and write in the correct data. If no taxable sal were made for a computer printed City/County, leave the line blank.

If additional space is needed to report more cities/counties, call our office 405-521-3279 for Sales Tax Supplement (page 2).

LINE 14 (TOTAL LINES 6 THROUGH 13)- Add the City/County tax due from lines 6 through 13, Column M.

LINE 15 (TOTAL FROM SUPPLEMENT PAGES)- Total the tax due amounts from Line 39 of all supplement pages of city/county taxes.

LINE 16 (TAX DUE)- Add the amounts on Line 5, 14 and 15. This will be the tota state, city, county tax due before any discount, interest, or penalty is applied.

LINE 17 (DISCOUNT)- If this report and remittance is postmarked by the due da shown in Item C, you are eligible for a discount for timely payment. Multiply Line 16 by the applicable discount rate. Make no entry if this report is late. Th maximum amount allowed is $3,300.00. Discount is not allowed for Direct Pay Permit holders.

LINE 18 (INTEREST)- If this report and remittance is postmarked after the du date shown in Item C, the tax is subject to interest from the due date (Item C) unti it is paid. Multiply the amount on Line 16 by the applicable rate for each month o part thereof that the report is late.

LINE 19 (PENALTY)- If this tax report and remittance is not postmarked withi 15 calendar days of the due date, a 10% penalty is due. Multiply the tax amount o Line 16 by .10 to determine the penalty.

LINE 20 (LESS APPROVED CREDIT)- Enter the amount of credit taken. Us any OTC credit voucher(s) issued for a previous over payment of taxes. Attach t credit voucher(s) to this report.

LINE 21 (TOTAL DUE)- Total the report: Line 16, minus Line 17 and 20, plus lin 18 and Line 19.

Sign and date the report and mail it with your payment in the enclosed return envelope to:

OKLAHOMA TAX COMMISSION
P.O. BOX 26850
OKLAHOMA CITY, OK 73126-0850

WHO MUST FILE

Every vendor who is responsible for collecting/remitting payment of Oklahom sales tax must file a Sales Tax Report. Reports must be filed for every period eve though there is no amount subject to tax nor any tax due.

Reports must be postmarked on or before the 15th day of the month following eac reporting period. The due date for filing this report is printed in Item C.

Please send a separate check with each report submitted and put your Taxpayer N (Item A.) on your check.

For assistance, call (405) 521-3160.

Mandatory inclusion of Social Security and/or Federal identification numbers i required on forms filed with the Oklahoma Tax Commission pursuant to Title 68 o the Oklahoma Statutes and regulations thereunder, for identification purposes, an are deemed part of the confidential files and records of the Oklahoma T Commission.

The Oklahoma Tax Commission is not required to give actual notice of changes in any state tax law.

Changes in Business Mailing Address:

FEIN/SSN _____ _____

NAME _____ _____

ADDRESS _____ _____

CITY _____ _____

STATE _____ ZIP _____ _____ _____