

**OKLAHOMA VENDOR USE TAX REPORT SUPPLEMENT**

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

D. Account Number					

<b>M M D D</b>	<input type="checkbox"/>	<input type="checkbox"/>
-OFFICE USE ONLY-	F.C.	P.T.

<input checked="" type="checkbox"/>	F.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Mailing	Business	G. "X" if Out	
"X" for Address Change		of Business	

H. Page    of    Page(s)

E. Mailing Address \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**DISTRIBUTION OF TAX FOR CITIES/COUNTIES**

I. City/County Name	J. Net Taxable Sales	K. City/County Use Tax	L. Discount	M. Interest and Penalty	N. Total Due	O. City/County Code
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						
17.						
18.						
19.						
20.						
21.						
22.						
23.						
24.						
<b>P. Total City/County Tax</b> (line 5 through line 24) (Enter amount on Page 1, line 11)						

IF MORE SPACE IS NEEDED, USE SUPPLEMENTAL PAGE(S)

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

I declare under the penalties of perjury, this return (including any accompanying schedules) has been examined by me, and to the best of my knowledge and belief is a true, correct, and complete return.

Signature of Taxpayer	Date	Prepared by	Date
-----------------------	------	-------------	------

## GENERAL INSTRUCTIONS

**Complete page 1 of the “Oklahoma Vendor’s Use Tax Report”, item numbers 1 through 10 before completing the supplemental form. Please use a #2 pencil or pen with black ink to make your entries on this form.**

If additional supplement pages are needed, download additional pages from our website at [www.tax.ok.gov](http://www.tax.ok.gov) or call our office at (405) 521-3160 and request the number of Vendor Use Tax Report Supplement pages required.

### SPECIFIC INSTRUCTIONS

- ITEM A - Enter your taxpayer identification number.
- ITEM B - Enter the month and year for the month of sales being reported.
- ITEM C - Enter the date the report is due.
- ITEM D - Enter your use Use Tax Permit Number.
- ITEM E - Provide your name and mailing address.
- ITEM H - Enter each individual page number and the total number of pages enclosed.

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

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

### Lines 5 through 24:

- Column I - Print the name of the city or county for which you are remitting tax.
  - Column J - Enter the “taxable sales” for each city or county. If no “taxable sales” were made leave blank.
  - Column K - Multiply the amount in Column J by the applicable rate and enter the amount of city/county tax due.
  - Column L - If this report and remittance are filed by the due date shown in Item C, you are eligible for a 1.00% discount for timely payment. Multiply the amount in Column K by 0.01. the maximum discount allowed is \$2,500. Make no entry if the report is late.
  - Column M - If this report and remittance is postmarked after the due date shown in Item C, the tax is subject to interest and penalty from the due date until it is paid. Multiply the amount in Column K by the applicable rates for each month the report is late.
  - Column N - Total Column K, minus Column L, plus Column M for each city/county listed.
  - Column O - Enter the code for each city or county for which you are remitting tax.
- ITEM P - (TOTAL CITY/COUNTY TAX) - Add lines 5 through 21. Enter the total for this page. Include the total of all supplemental pages on Line 11 of page 1 of Line P, Column N.