

STS 20003

Revised 04-2014
rL012

OKLAHOMA SALES TAX RETURN
TAXPAYER COPY/WORKSHEET

A. Taxpayer FEIN/SSN **_*_*_*_2376	B. Reporting Period	C. Due Date	D. Account Number STS-10016116-49
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--- Dollars --- - Cents -

1. Total Sales	_____	00
2. Deduct Non-taxable Sales	_____	00
3. Net Taxable Sales	_____	00
4. TAX 9.5%	x _____	
5. Discount	_____	
<i>Limit \$2,500. (Discount not allowed for direct pay)</i>		
6. Interest	+	_____
7. Penalty	+	_____
8. Total Due	=	_____



USE THIS WORKSHEET TO CALCULATE TAX,
THEN ENTER THE FIGURES ON THE COUPON BELOW.

MAILING ADDRESS

OKLA TAX COMMISSION
SPECIAL EVENTS
P O BOX 269062
OKLA CITY OK 73126
ATTN DARCEL
(405)522-4324
FAX 405-522-4325
EMAIL ddefibaugh@tax.ok.gov
SALES TAX PERMIT NUMBER

COMPLETING OKLAHOMA SALES TAX RETURN - SHORT FORM

Specific Item Instructions
Make sure the preprinted information in Items A, B, C and D are correct. If incorrect, contact the Oklahoma Tax Commission's Taxpayer Assistance Division at (405) 521-3100.
ITEM F. (Out of Business) - If this is your last return check Item F and give the Date Out of Business.

ITEM G. (Mailing Address Change) - check Box G to notify us of address change. Write new address in Section G.
NOTE: Changes to location address must be submitted on the Notification of Business Address Change Form (BT-115-C-W), available at www.tax.ok.gov.

ITEM H. (Off-Premise Beer Sales) - (Informational Only) This line should only include sales for low point off-premise consumption. It should not be used by bars and restaurants. Enter the total dollar amount of the monthly off-premise beer sales that was included in the total sales listed on Line 1.
NOTE: This total is NOT a deductible amount.

Specific Line Instructions
LINE 1. (Total Sales) - Enter the total amount of gross receipts, including all sales, taxable and non-taxable leases and rentals of tangible personal property. Includes values of items removed from inventory and used by you during the reporting period.
LINE 2. (Deduct Non-taxable Sales) - Enter the total amount of non-taxable sales you are deducting for this period. Keep all certificates, receipts and/or invoices verifying each deduction.

NOTE: Examples of legal deductions are:
1. Sales for needs to possess holding a sales tax permit.
2. Gasoline sales on which gasoline tax has been paid.
3. Motor vehicle sales.
4. Agricultural sales.
5. Sales subject to Federal Food Stamp exemption.
6. Non-taxable services, labor.
7. Sales to exempt organizations.
LINE 3. (Net Taxable Sales) - Subtract Line 2 from Line 1.
LINE 4. (Tax) - Multiply line 3 by the preprinted tax rate shown. This is a combined rate for state, city, and/or county.
LINE 5. (Discount) - If return and remittance is filed by the date shown in Item C you are eligible for a 1% discount for timely payment. Multiply Line 4 by 0.01. The maximum discount is \$2,500. If this return is late no discount is allowed. There is no discount for Direct Pay Permits.
LINE 6. (Interest) - If return and remittance is postmarked after the date shown in Item C, the tax is subject to 1.25% interest per month from the due date until it is paid. Multiply Line 4 by 0.0125 for each month or part thereof the return is late.
LINE 7. (Penalty) - If this return and remittance is not postmarked within 15 days of the date shown in Item C, a one-time 10% penalty is due. Multiply the tax amount on Line 4 by 0.10 to determine the penalty.
LINE 8. (Total Due) - Total due returns: Line 4, minus Line 5, plus Line 6 and Line 7.

Do not fold, staple, or paper clip

Please Detach Here And Return Coupon Below

Do not tear or cut below line

STS 20003 OKLAHOMA SALES TAX RETURN

Media Number 3282573441

A. Taxpayer FEIN/SSN **_*_*_*_2376	B. Reporting Period 6-17-17	C. Due Date 7-3-17	D. Account Number STS-10016116-49
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E. Amended Return

----- Dollars ----- - Cents -

F. Out of Business

G. Mailing Address Change

Date Out of Business: _____ MM/DD/YY

1. Total Sales	_____	00
2. Deduct Non-taxable Sales	_____	00
3. Net Taxable Sales	_____	00
4. TAX 9.5%	x _____	
5. Discount	_____	
<i>Limit \$2,500. (Discount not allowed for direct pay)</i>		
6. Interest	+	_____
7. Penalty	+	_____
8. Total Due	=	_____

G. name

Address _____

City _____ State _____ ZIP _____

H. Off-Premise Beer Sales: _____ 00
(See Instructions above)

Signature: _____ Date: _____
The information contained in this return and any attachments is true and correct to the best of my knowledge.

Please remit only one check per coupon

20003032825734413

Copo 11-19