

OTC

Oklahoma Tax Commission Request for Copy of Business Tax Report/Return



Do not sign this form unless all applicable lines have been completed. Request may be rejected if the form is incomplete, illegible or any required line was blank at the time of signature.

Tip: You may be able to get business report information from other sources. If you had your business tax report completed by a paid preparer, they should be able to provide you a copy of the report.

1a. Name of Taxpayer/Corporation/Business Owner:	1b. Social Security Number or Employer Identification Number of 1a:
2a. DBA (Doing Business As) Name:	2b. Account/Permit Number:

3. Mailing Address:

Address: _____

City State Zip

4. Contact Person Name and Position with Company, Address and Telephone Number:

Name: _____

Position: _____ Telephone Number: _____

Address: _____

City State Zip

5. If the business tax report is to be mailed to a third party (such as an accountant), enter the third party's name, address, and telephone number. The Oklahoma Tax Commission has no control over what the third party does with the business tax report.

Name: _____ Telephone Number: _____

Address: _____

City State Zip

Caution: If a third party requires you to complete Form BT-199, do not sign if sections 6 and 7 are blank.

6. Business Tax Report Requested. Sales, franchise, etc. and all attachments as originally submitted to the OTC, including schedules or amended reports. Enter only one form number. If you need more than one type of report, you must complete another Form BT-199.

Form Number: _____ **Note:** If the copies must be certified for court or administrative proceedings, check here.....

7. Period Requested. Enter the report period. **If you are requesting more than twelve report periods, you must attach another Form BT-199.**

8. Fee. Copies of business tax reports are \$0.25 per page with no minimum charge per request. Certified copies of business tax reports are a maximum of \$1.00 per copied page per request.

9. Signature of Taxpayer(s). I declare that I am either the taxpayer whose name is shown on section 1a, or a person authorized to obtain the tax report requested. If signed by a person other than the taxpayer, Form BT-129 Power of Attorney must be attached.

Signature: _____ Date: _____

Title (if section 1a above is a corporation, partnership, estate, or trust): _____

**Mail To: Oklahoma Tax Commission
Oklahoma City, OK 73194**