



Lodging Tax Return 'Supplement'

| | | | |
|----------------------|---------------------|-------------|-------------------|
| A. Taxpayer FEIN/SSN | B. Reporting Period | C. Due Date | D. Account Number |
|----------------------|---------------------|-------------|-------------------|

E. Amended Return

H. Page _____ of _____ Page(s)

City/County Tax Schedule

| | I. City/County Code | J. City/County Name | K. Net Taxable Sales Subject to Lodging Tax --- Whole Dollars Only --- | L. Tax Rate (%) | M. Amount of Tax Due (Multiply Item K by Item L) | |
|---|---------------------|---------------------|---|-----------------|--|-------|
| | | | | | --- Dollars --- | Cents |
| 16 | | | | | | |
| 17 | | | | | | |
| 18 | | | | | | |
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| 36 | | | | | | |
| 37 | | | | | | |
| 38 | | | | | | |
| 39 | | | | | | |
| 40 | | | | | | |
| N. TOTAL City/County Tax (Line 16 through Line 40) (Add to Total on Item N. on Form STH-20006) | | | | | | |

If more space is needed, use supplemental page(s)

Lodging Tax Return 'Supplement' Instructions

General Instructions

Complete Page 1 of Form STH-20006 "Lodging Tax Return", item numbers 9 through 15 before completing the "supplement".

Specific Instructions

ITEM A - Enter your taxpayer identification number.

ITEM B - Enter the month(s) and year for the city or county lodging tax being reported.

ITEM C - Enter the date the return is due.

ITEM D - Enter your Account Number.

ITEM E - Check Box E if this is an amended return.

ITEM H - Enter each individual page number and the total number of pages enclosed.

City/County Tax Schedule Computation (Lines 16-40)

Column I - Enter the code for each city or county for which you are remitting tax.

Column J - Print the name of the city or county for which you are remitting tax.

Column K - Enter the "net taxable sales" for each city or county. If no "net taxable sales" were made, enter zero.

Column L - Enter the current lodging tax rate for each city or county for which you are remitting tax.

Column M- Multiply the amounts in Column K times the rates in Column L and enter the lodging tax due for each city or county.

ITEM N. TOTAL: Add Column M lines 16 through 40 and enter the total for this page in Item N. Add this total and the total of all supplement pages to the total on Item N on page 1 of Form STH20006. Enter the combined totals on Form STH-20006, Line 4.

If additional supplemental pages are needed, download additional pages from our website at tax.ok.gov.

Mandatory inclusion of Social Security and/or Federal Identification numbers is required on forms filed with the Oklahoma Tax Commission (OTC) 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 OTC.

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