Barcode Placeholder

Oklahoma Supplemental Schedule for Form 514-PT

FORM **514-PT-SUP** 2024

FOR INFORMATIONAL PURPOSES ONLY - MUST BE FILED ELECTRONICALLY

Name of Partnership	FEIN	Page _____ of _____

A	B	C	D	E	F	G	H
FEIN/SSN	**Federal Distributive Income** From Form 514, Part 5: Line 4 plus Line 6 minus Line 8	**Oklahoma Additions and Subtractions** See instructions Attach schedule	**Distributive Income from All Sources** Column B plus/minus Column C	**Base Tax** See instructions	**Oklahoma Distributive Income** From Form 514, Part 5: Line 5 plus Line 7 minus Line 9 and Form 561-P, line 7	**Tax %** Column F divided by Column D	**Oklahoma Non-Resident Tax** See instructions
____)	+/-	=				%	
____)	+/-	=				%	
____)	+/-	=				%	
____)	+/-	=				%	
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