Barcode Placeholder

State of Oklahoma

# Report of Transfer of Venture Capital Credits

Title 68 O.S. Section 2357.7 – 2357.8

FORM 518-B

Revised 2015

**For the Year Ended:**

Oklahoma Tax Commission
Post Office Box 269054, Oklahoma City, Oklahoma 73126-9054

**(Transferee must attach a copy of this report to their income tax return)**

**1)**

Transferor Name _____ Social Security or Identification Number _____

Address _____

City _____ State _____ Zip _____

Amount of Credits Transferred $ _____ Date of Investment * _____

Signed _____ _____
Transferor Name of Venture Capital Company

*** Credits not used in the year invested may be carried forward a maximum of three (3) years from the date of investment.**

## Notary Public Affidavit

Signed and subscribed on this ____ day of _____ , _____ before me, a notary public in and for the state of _____ .

My commission expires _____ _____
Notary Public

**2)**

Transferee Name _____ Social Security or Identification Number _____

Address _____

City _____ State _____ Zip _____

Amount of credits transferred: $ _____

Amount of credit used: $ ( _____ )

Balance of credit unused: $ _____

Under penalties of perjury, I declare that I have examined this report and to the best of my knowledge and belief, it is true, correct and complete.

Signed _____
Taxpayer

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