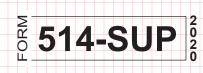
State of Oklahoma Supplemental Schedule for Form 514, Part 5

3 0

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NOTE: Place Form(s) 514-SUP immediately after Form 514, page 4. Make note of the number of Forms 514-SUP that are included in the partnership return (e.g. If there are five Forms 514-SUP, the second Form 514-SUP would have 2 of 5 shown in the Page section below.)

Name of Partnership		FEIN		Page	
				of	
	Partner	Partner	Partn	ar .	
	Faruler	Partiter	Paru	er	
Name and Address of Each Partner Name:					
Address:					
City, State, ZIP:					
SSN or FEIN					
Percentage of Partnership Owned					
Distributable Federal Income					
Distributable Oklahoma Income (see instructions)					
Guaranteed Payments (Federal)					
Guaranteed Payments (Oklahoma)					
Oil and Gas Depletion (Federal)					
Oil and Gas Depletion (Oklahoma)					
Amount of Credit					
Type of Credit					
Amount of Withholding					
Type of Withholding					
onresident Partner (If the electing PT	E box is checked on F	orm 514 page 1, leave line	e 14 blank)		
Is the Partner being included in Composite filing? (If Yes, complete Form 514-PT)	Yes	No Yes	No	Yes No	

6 2 3 4 5 6 7 8 9 10 1 2 3 4 5 6 7 8 9 10 1 2 3 4 5 6 7 8 9 20 1 2 3 4 5 6 7 8 9 20 1 2 3 4 5 6 7 8 9 30 1 2 3 4 5 6 7 8 9 30 1 2 3 4 5 6 7 8 9 80 1 2