Please print or type the name of the payor in the box below	v: State	of Oklahoma: Pro	duction Payments	Ī				Barcode Placeholder
		NFORMATION RETURN Tax Year Note: All payments with Oklahoma withholding must be reported			2	5	500	-A
Report payments of \$10 or more in this box (*see note):		Report pay	ment of \$750 or more in thes	e five box	es (*see note):			
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					Do not use this form to report salaries and wages. Use optional Form W-2: Internal Revenue Service.			
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					State Code.			
Please print or type the recipient's name, address, and ZIP in the area below:					State Withhold	ing:		
		.,			County Code:			
				Do	not use this	form	to report	

Do not use this form to report salaries and wages. Use optional Form W-2: Internal Revenue Service.