Form Number OW-12
Revised 11-2001

Oklahoma Tax Commission (OTC)
2501 Lincoln Boulevard
Oklahoma City, OK 73194-0010

Withholding for Nonresident Royalty Interest

Office Use

Approval _____

Denied _____

Status

FR WH

1. How is business owned? ☐ (a) Individual ☐ (b) General Partnership ☐ (c) Limited Partnership

☐ (d) Oklahoma Corporation ☐ (e) Foreign Corporation ☐ (f) Limited Liability Company (LICO)

☐ (g) other (explain) _____

2. ☐☐ – ☐☐☐☐☐☐☐
Federal Employer's Identification Number (FEIN)

3. (_____) _____ - _____
Business Phone (Area Code & No.)

Ownership Information

4. _____
Name of Individual, Partnership or Corporation — *Social Security Number (If Individual)*

_____
Mailing address (Street and number, P.O. Box, or rural route and box number)

_____
City — *State* — *ZIP Code* — *County*

5. Names. of Partners, Corporate Officers, and Managing Officer:

(a) _____
Name (Last, *First, Middle Initial)* — *Social Security Number* — *Title*

_____
Mailing address (Street and number, P.O. Box, or rural route and box number)

_____
City — *State* — *ZIP Code* — *County*

(b) _____
Name (Last, *First, Middle Initial)* — *Social Security Number* — *Title*

_____
Mailing address (Street and number, P.O. Box, or rural route and box number)

_____
City — *State* — *ZIP Code* — *County*

(c) _____
Name (Last, *First, Middle Initial)* — *Social Security Number* — *Title*

_____
Mailing address (Street and number, P.O. Box, or rural route and box number)

_____
City — *State* — *ZIP Code* — *County*

(If you need more space, attach additional pages.)

6. Date you began/will begin withholding for nonresident royalty interest?.....*(month/day/year)*_____/_____/_____

7. What FEI number will you use to report withholding tax?*(If different than item 2)*..... ☐☐ – ☐☐☐☐☐☐☐

8. _____
Trade Name of Business - DBA

9. _____
Physical Location *(Street and number or directions;* ***not*** *P.O. Box or Rural Route Number)* — City — State — ZIP — County

10. _____
Name and title of officer or employee responsible for remitting withholding for nonresident royalty interest — Phone Number

11. _____
Address to which forms are to be mailed — City — State — ZIP Code

A sole owner; general partner; corporate officer; or authorized representative must sign this application.

I, the undersigned applicant or authorized representative, declare under the penalties of perjury that I have examined this application and attachments and to the best of my knowledge the facts set forth are true and correct, and that the requirements hereunder will be carried out in accordance with the laws of the State of Oklahoma and the rules and regulations of the Oklahoma Tax Commission. I further acknowledge and agree that sales, withholding, and motor fuel taxes are trust funds for the State of Oklahoma and that any use of these trust funds other than timely remittance to the State of Oklahoma is embezzlement and can result in criminal prosecution.

sign here ▶

_____ — *Type or print name and title*

_____ — *Signature*

_____ / / — *Date*

Mandatory inclusion of Social Security and/or Federal Employer's Identification numbers is required on forms filed with the Oklahoma Tax Commission 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 Oklahoma Tax Commission. The Oklahoma Tax Commission is not required to give actual notice of changes in any state tax law.