

STATE OF OKLAHOMA RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX

Oklahoma Tax Commission, 2501 Lincoln Blvd., Oklahoma City, Oklahoma 73194-0009

Section 501 (c) of the Internal Revenue Code

FORM
512-E
19 99

For the year 01-01-199 -12-31-199 or other taxable year beginning ending

Date Qualified for tax exempt status	Name of organization OKC PC USER'S GROUP, INC.	Federal identification number 73-1298653
	Address number and street 3000 UNITED FOUNDERS BLVD.	OFFICE USE ONLY
	City, State and Zip OKLAHOMA CITY, OK 73112	

Enter the name and address used on your return for prior year (if same write same). If none filed, give reason.

OKC PC USER'S GROUP, INC.
P. O. BOX 12027, OKLAHOMA CITY, OK 73157-2027

(Please read instructions on page 2)

STATEMENT OF UNRELATED BUSINESS TAXABLE INCOME

	Total Federal	Allocable Oklahoma
Total Unrelated Trade or Business Income - Federal Form(s) 990	45,790	45,790
Total Unrelated Trade or Business Deductions - Federal Form(s) 990	45,790	45,790
Unrelated Business Taxable Income (Enter on Line 1 below)	0	0

INCOME SUBJECT TO TAX

1	Unrelated business taxable income - from statement above (allocable Oklahoma)	1	0
2	Other net income - enclose schedule	2	
3	Oklahoma taxable income (total of lines 1 and 2)	3	0

TAX

4	Tax at 6% of Line 3 (If Trust - See Rate Schedule on page 2)	4	
5	Tax Paid on Estimate	5	
6	Overpayment (if line 5 is larger than line 4) enter amount overpaid	6	0
7	Amount of Line 6 to be credited to the following year estimated tax	7	
Deductions from refund: If you wish to donate from your tax refund, check and enter amount			
8	Oklahoma Wildlife Diversity Program <input type="checkbox"/> \$2 <input type="checkbox"/> \$5 or <input type="checkbox"/> \$	8	0
9	Veterans Affairs Capital Improvement Program <input type="checkbox"/> \$2 <input type="checkbox"/> \$5 or <input type="checkbox"/> \$	9	0
10	Oklahoma Breast Cancer Program <input type="checkbox"/> \$2 <input type="checkbox"/> \$5 or <input type="checkbox"/> \$	10	0
11	Add lines 7, 8, 9, and 10 and enter amount	11	0
12	Amount to be refunded to you (Line 6 minus line 11)	12	0
13	Tax Due (if line 4 is larger than line 5) enter tax due	13	0
14	For Delinquent Payment, add Penalty of 5% plus Interest at 1 1/4% per month	14	
15	Underpayment of Estimated Tax, Penalty and Interest	15	
16	Total Penalty and Interest (Add Lines 14 and 15)	16	0
17	Total Tax, Penalty and Interest Due - Pay in Full with Return	17	0

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

Under penalties of perjury, I declare that I have examined this return, including accompanying returns, schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. This declaration is based on all information of which I have any knowledge.

Date	Signature of officer or trustee	Title
Date	Signature of individual or firm preparing this return	541 COUCH DR. OKLAHOMA CITY, OK 73102 - 2207