Form OR-TM-V

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Oregon Department of Revenue

TriMet Self-employment Tax Payment Voucher and Instructions

Online payments:

You may make payments directly online at www.oregon.gov/dor. Don't use this form with online payments.

Use this voucher ONLY if enclosing a payment for one of the following:

- Tax due when you file your **original return** for any year.
- Tax due by the original return's due date if you're filing for an **extension**.
- Tax due with an **amended return** for any tax year.
- Tax prepayments made before filing your return.

Required for accurate processing:

- Enter your tax year beginning and ending dates.
- Individual filer: Enter your SSN (Social Security number) if you're an individual sole proprietor or a member
 of a partnership and choose to file your own individual return. Note: Don't include the FEIN (federal employer
 identification number) if you're filing as an individual.
- Partnerships: Enter your FEIN if you're a partnership and including all your members on one return.

Don't combine your TriMet self-employment tax payment with any other tax payment made to the Oregon Department of Revenue. **Make your check or money order payable to:** Oregon Department of Revenue. On your check, write the following:

- Daytime phone number.
- Tax year.
- "Form OR-TM."
- SSN or FEIN.

Mail the voucher with your payment to: Oregon Department of Revenue

PO Box 14003

Salem OR 97309-2502

Note: This voucher isn't an extension to file. Oregon will grant an extension if you already submitted federal Form 7004 to the IRS for your federal return. If you need an extension for Oregon only, complete federal Form 7004 and write "For Oregon only" at the top. Make sure to check the extension box on the transit return. Don't send the extension; keep with your tax records.

Visit www.oregon.gov/dor/forms to print more vouchers.

Form OR-TM-V, TriMet Self-employment Tax Payment Voucher				Office use only
Tax year: Begins://	Payment type (check	conly one):		•
Ends: //	Original return.	Prepayr	ment.	
	Extension payme	ent. Amende	ed return.	
irst name and initial Las	et name (if an individual filing)	SSN		
		SSN		
First name and initial Partnership's name (if a partnership fili Current mailing address			_	Enter payment amount
Partnership's name (if a partnership fili	ng)	FEIN	\$	Enter payment amount