2021 Form OR-65

Oregon Partnership Return of Income

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Oregon Department of Revenue



Office use only
Date received

Submit original for	rm—do no	t submit photocopy.			
For calendar year 2021, Beginning: Mo Day Year or fiscal or short year	Endir	ng: Mo Day Year		A	Amended return
Type or print clearly and answer all the questions below.					
Name of partnership			Federal en	nployer id	dentification number (FEIN)
Partnership mailing address			Partnershi	p phone	
City	State	ZIP code	Date activ	ities start	ed in Oregon
Name of partner who has the partnership books			Partner co	ntact pho	one
Partner mailing address	City			State	ZIP code
Type of entity:					
Partnership Limited partnership	Limite	d liability company	Lim	nited lia	bility partnership
Check all applicable boxes:					
(a) Final return (b) Initial return	(c) Am	ended due to federal aud	dit or adjus	stments	3
(d) Name change			(e)	Accoun	ting period change
(f) Extension filed-extension due date:	Year		(g)	Form O	R-24
(h) You have federal Form 8886, a REIT, or a RIC					
 Doing business in Oregon. A. Did the partnership do business in Oregon during the year 	ear?				Yes1A.
2. Requirement to file Oregon partnership return.A. Does the partnership have income or loss derived from	sources	in Oregon?			2A.
B. Does the partnership have Oregon resident partners?					2B.
 3. Partnership minimum tax. A. Tax liability. Did you answer yes to question 1 and que If yes, enter \$150; if no, enter 0 (see instructions) B. Payments. Enter prepayments already made C. Tax due. If line 3A is more than line 3B, you have tax to D. Refund. If line 3B is more than line 3A, you have a refur 	pay. Lin	e 3A minus line 3B	3B. _{\$} 3C. _{\$}		.00
4. Partner information.A. Did the partners' profit/loss sharing percentages chang	je during	the year?			4A.
B. Were the Oregon modifications divided according to ea	ach partn	er's profit sharing percer	tage?		4В.

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							Yes		
4.	Pa	rtner information.	Continu	ed)					
	C.	Does the partnersh	ip have	corporate partners?		4C.			
	_			T. 145					
	D.			al Schedules K-1 issued to all partners:Total 4E					
				Oregon residents 4E					
	_). L				
	E.			tners, enter how many partners were included on	_				
		a Form OR-OC to re	eport tn	is income:	E				
5	Dri	or year returns and	fodora	Loudite					
Э.				ership return filed?		5Δ			
	Λ.	vvas a 2020 Oregor	ιραιιικ	siship return nieu:	• • • • • • • • • • • • • • • • • • • •				
		If not, why?:							
		, ,							
	В.	Was an amended fe	ederal r	eturn filed for a prior year?		5B.			
		If yes, what tax yea	ır(s) we	re changed?					
	_	Did a fadaral audit	or adi	ntment change a prior year or the authority and the resulting		F 0			
	U.	Dia a legeral audit (Did a federal audit or adjustment change a prior year or the current year tax return?						
		If yes, what tax year(s) were changed?							
		, 55,	(0)						
	D.	Did the partnership	make	an opt-out election under Internal Revenue Code (IRC) Section 622	1(b) for tax yea	ar 2021? 5D.			
		If "No," complete the following information (see instructions).							
	Fee	deral partnership re	eprese	ntative contact information					
	Fire	t name	Initial	Last name	Contact phone				
	1113	t name	linuai	Last name	()				
	Enti	ity name			Contact phone				
	LIII	ity name			/)				
	_				()				
_	_								
6.		siness inside and o				0.4			
	A.	Did the partnership have business activity both inside and outside of Oregon during the year?							
		If you answered yes, use the Oregon apportionment percentage from Schedule OR-AP to							
		figure Oregon source	ce inco	me. Include the schedule with your return.					
7	Oti	ner taxing authoriti	e s						
•				perform services in the TriMet Transit District?		7A			
	B.	Do any partners ha	ve self-	employment income from the partnership in the TriMet Transit Distr	ict?	7B.			
	C.	Do partnership employees perform services in the Lane Transit District?							
	_	_			. •				
	D.			employment income from the partnership in the Lane Transit District		7D.			
		-		and/or 7D, Form OR-TM and/or Form OR-LTD must be filed by the					
		individual partners	or the p	partnership may elect to file on the partners' behalf.					

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Schedule I—Oregon modifications to federal partnership income and credits passed through to partners. List the name, numeric code, and amount for each addition, subtraction, and credit (see instructions). Include schedules to explain and compute the modifications and credits.

Note: A partner's share of each modification or credit must be reported to the partner on their federal Schedule K-1, Schedule OR-K-1 or equivalent. Generally, a partner's share of each modification or credit is figured using the partner's profit/loss sharing percentage.

Additions—Items not included in federal partnership income	e which are taxable to Oregon.		Code			Amount
8.	c	a.	8b.	\$.00
9.	c	a.	9b.	\$.00
10.	10	a.	10b.	\$.00
11.	- 1 -	a.	11b.	\$.00
Subtractions – Items included in federal partnership income	that are not taxable to Oregon.		Code			Amount
12.	10		12b.	\$.00
13.	10	a.	13b.	\$.00
14.		a.	14b.	\$.00
15.	4 -	a.	15b.	\$.00
Credits—Oregon tax credits earned by the partnership that car	n be passed through to the partners	S.	Code			Amount
16.	16	a.	16b.	\$.00
17.	17	a.	17b.	\$.00
18.	10	a.	18b.	\$.00
19.		a.	19b.	\$.00
Under penalty of false swearing, I declare that the	information in this return and a	ny at	tachments i	s true	, correct, a	and complete.
Sign Signature of general partner or LLC member	Signature of paid prepaid	arer			lı i	icense number of preparer
here X	X	, a. o.				iconico nambor or proparor
Date	Date		Phon	e numbe		
/ /	/ /	Date I Horie			JI	
Print name of general partner or LLC member	Print name of paid pr	Print name of paid preparer				
Finit name of general parties of ELO member	Fillit flame of paid pre	parer				
Title of general partner or LLC member	Address of paid prepa	ırer				
	City				State	ZIP code

Make your payment

- Online payments: You may make payments online at www.oregon.gov/dor.
- Mailing your payment: We accept checks, money orders, and cashier's checks. Make your check or money order payable to the Oregon Department of Revenue. Write your daytime phone number, FEIN, and "2021 Oregon Form OR-65" on your check or money order. Send your payment in the same envelope as your return. Don't mail cash. Don't use Form OR-65-V if sending a payment with your return.

You can mail the Form OR-65 and any required enclosures to:

Oregon Department of Revenue PO Box 14555 Salem OR 97309-0940

Include a complete copy of the 2021 federal partnership return and required schedules as indicated in the instructions.