2022 Form OR-65

Oregon Partnership Income Return

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Oregon Department of Revenue



| Office use only | |
|-----------------|--|
| Date received | |
| | |
| | |
| | |
| | |
| | |

| | Submit original form—do not submit photocopy. | | | |
|------------|--|------------------|--------------|-----------------------------|
| | calendar year 2022, Beginning: Mo Day Year Ending: Mo Day Yiscal or short year | /ear | | Amended return |
| | or print clearly and answer all the questions below. | | | |
| Partne | ership name | Federal e | mployer id | dentification number (FEIN) |
| Partne | ership mailing address | Partnersh | ip phone | |
| City | State ZIP code | Date activ | rities start | ed in Oregon |
| Eiret n | name of partner who has the partnership books Initial Last name | Partner c | / | 200 |
| 1 11 51 11 | latine of partner who has the partnership books limital Last harne | (| ontact pri | _ |
| Partne | er mailing address City | · | State | ZIP code |
| Туре | of entity: | | | |
| | Partnership Limited partnership Limited liability company | Lir | nited lia | bility partnership |
| Chec | ck all applicable boxes: | | | |
| | (a) Final return (b) Initial return (c) Amended due to federa | al audit or adju | stments | 3 |
| | (d) Name change | (e) | Accour | iting period change |
| | Mo Day Year | | | |
| | (f) Extension filed-extension due date: | ∟ (g) | Form C | PR-24 |
| | (h) You have federal Form 8886, a REIT, or a RIC | | | |
| | oing business in Oregon. Did the partnership do business in Oregon during the year? | | | Yes |
| | equirement to file Oregon partnership return. | | | |
| A. | . Does the partnership have income or loss derived from sources in Oregon? | | | 2A. L_ |
| В | . Does the partnership have Oregon resident partners? | | | 2В. |
| 3. Pa | artnership minimum tax. | | | |
| A. | . Tax liability. Did you answer yes to question 1 and question 2A and/or 2B? If yes, enter \$150; if no, enter 0 (see instructions) | 3A ¢ | | . 0 (|
| | Payments. Enter prepayments already made | 3B. \$ | | .0(|
| | . Tax due. If line 3A is more than line 3B, you have tax to pay. Line 3A minus line 3B Refund. If line 3B is more than line 3A, you have a refund. Line 3B minus line 3A | | | .00 |
| 4 P | artner information. | | | |
| | . Did the partners' profit/loss sharing percentages change during the year? | | | 4A. |
| В | . Were the Oregon modifications divided according to each partner's profit sharing pe | ercentage? | | 4B. |

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| | | | | | | | Yes | | |
|---|------|---|------------|--|------------|------------------|-----|--|--|
| 4. | Pa | rtner information. (| 'Continu | ed) | | | | | |
| | C. | Does the partnersh | ip have | corporate partners? | | 4C. | | | |
| | | _ | | | | | | | |
| | D. | | | al Schedules K-1 issued to all partners:Total 4E | | | | | |
| | | | | Oregon residents 4E | D | | | | |
| | | | | Nonresidents 4E |) | | | | |
| | E. | | • | tners, enter how many partners were included on | | | | | |
| | | a Form OR-OC to re | eport th | is income:4l | Ξ | | | | |
| 5 | Dri | or year returns and | fodora | laudite | | | | | |
| ٥. | | - | | ership return filed? | | 5Δ | | | |
| | ٠ | 1140 a 2021 010g0 | ii pai iii | Total Tillou | | | | | |
| | | If not, why?: | | | | | | | |
| | R | Was an amended f | adaral i | eturn filed for a prior year? | | 5R | | | |
| | ٥. | vvas an amendeu n | ouerar i | cturri incu for a prior year: | | JD. | | | |
| | | If yes, what tax yea | ar(s) we | re changed? | | | | | |
| | | | | | | | | | |
| | C. | Did a federal audit | or adju | stment change a prior year or the current year tax return? | | 5C. | | | |
| | | 16 | () | | | | | | |
| | | If yes, what tax yea | ar(s) we | re changed? | | | | | |
| | D | Did the partnership | maka | on ont-out election under Internal Revenue Code (IRC) Section 622: | 1/b) for t | ov vear 20222 5D | | | |
| D. Did the partnership make an opt-out election under Internal Revenue Code (IRC) Section 6221(b) for tax year 2022 | | | | | | | | | |
| | | If "No," complete the following information (see instructions). | | | | | | | |
| | Fe | deral partnership r | eprese | ntative contact information | | | | | |
| | | | I | т | | | | | |
| | Firs | st name | Initial | Last name | Contact p | hone | | | |
| | _ | | | | () | _ | | | |
| | Ent | ity name | | | Contact p | hone | | | |
| | | | | | () | _ | | | |
| | | | | | | | | | |
| 6. | | siness inside and o | | | | | | | |
| | A. | | | ousiness activity both inside and outside of Oregon during the year? | | 6A. | | | |
| | | If you answered yes, use the Oregon apportionment percentage from Schedule OR-AP to | | | | | | | |
| | | figure Oregon source income. Include the schedule with your return. | | | | | | | |
| _ | | | | | | | | | |
| 7. | | her taxing authoriti | | and the second s | | | | | |
| | A. | Do partnership employees perform services in the TriMet Transit District?7A. | | | | | | | |
| | R | Do any partners have self-employment income from the partnership in the TriMet Transit District?7B. | | | | | | | |
| | ٥. | Do any paranois have sentemployment income nom the paranelsing in the millier trialist district: | | | | | | | |
| | C. | Do partnership em | ployees | perform services in the Lane Transit District? | | 7C. | | | |
| | _ | | ,. | | | | | | |
| | υ. | Do any partners have self-employment income from the partnership in the Lane Transit District? | | | | | | | |
| If you answered yes to 7B and/or 7D, Form OR-TM and/or Form OR-LTD must be filed by the | | | | | | | | | |
| | | individual partners | or the | 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 v | which are taxable to Oregon. | | Code | | | Amount |
|--|--------------------------------------|--------|-------------|---------|-------|-----------------------------|
| 8. | | 8a. | 8b | \$ | | .00 |
| 9. | | 9a. | 9b | \$ | | .00 |
| 10. | | 10a. | 10b | \$ | | .00 |
| 11. | | 11a. | 11b | \$ | | .00 |
| Subtractions—Items included in federal partnership income the | nat are not taxable to Oregon | n. | Code | | | Amount |
| 12. | _ | 12a. | 12b | \$ | | .00 |
| 13. | | 13a. | 13b | \$ | | .00 |
| 14. | | 14a. | 14b | \$ | | .00 |
| 15. | | 15a. | 15b | \$ | | .00 |
| | | | | | | |
| Credits —Oregon tax credits earned by the partnership that can be | e passed through to the partn | iers. | Code | | | Amount |
| 16 | | 16a. | 16b | \$ | | .00 |
| 17 | | 17a. | 17b | \$ | | . 00 |
| 18 | | 18a. | 18b | \$ | | .00 |
| 19 | | 19a. | 19b | \$ | | . 0 0 |
| Under penalty of false swearing, I declare the info | rmation in this return and a | ny att | achments is | true, c | | · |
| Sign General partner or LLC member signature | Paid preparer signa | ature | | | P | aid preparer license number |
| here → X | X | | | | | |
| Date | Date | | Pho | ne | • | |
| /_/ | / / | | (|) | _ | |
| General partner or LLC member printed name | Paid preparer print | ed nam | e | | | |
| General partner or LLC member title | Paid preparer addr | ess | | | | |
| | 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 "2022 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 2022 federal partnership return and required schedules as indicated in the instructions.