2024 Form OR-OC

Oregon Composite Return

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Oregon Department of Revenue



Office use only	
	-

		Submit original form	—do not submit photocopy.						
Pass-through entity (PTE) name					Federal employer identification number (FEIN)				
PTE address	PO Box								
City	State	ZIP code							
Contact first name	Contact last name	C	Contact phone						
, ,	corpora			rust		LLP LP			
Tax year end date for majority of control Extension filed. Extended Amended return. If amen CPAR report. FPA issue Form OR-OC-TR submitted.	due da ding for date:		was generated: Audited partnership ta	x year e	nd date:	:/			
Composite tax [from Schedule 0]	OR-OC-	-1, line 5(a), or	Individuals, trusts, and es	states	C	orporate income or excise tax			
Schedule OR-OC-2, line 6(a)]				. 00	1b.	.00			
2. CPAR tax [from Schedule OR-C				0.0		0.0			
Schedule OR-OC-4, line 6(a)]				.00	2b.	.00			
3. Add lines 1 and 2				. 0 0	3b.	.00			
4. PTE-E tax credit [from Schedule	9 OR-O	C-1, line 5(b)]4a		.00					
5. Reserved									
6. Estimated tax payments for 202				0.0		0.0			
made before filing this return				. 0 0	6b.	.00			
7. Add lines 4, 5, and 6				.00	7b.	.00			
8. Overpayment. Is line 3 less than	line 7?	If so, line 7		0.0					
minus line 3				.00	8b.	.00			
9. Tax to pay. Is line 3 more than li	ne 7? If	so, line 3 minus line 7 9a		. 00	9b	.00			
10. Penalty and interest (see instruc	tions)	10a		. 00	10b.	.00			
11. Interest on underpayment of es	imated	tax [from Schedule			_				
OR-OC-1, line 5(e), or Schedule	OR-OC	C-2, line 6(c)]11a			11b.	.00			
12. Add lines 9, 10, and 11		12a		. 00	12b.	. 00			
13. Amount you owe. Is line 12 more	e than li	ne 8? If so, line 12							
minus line 8				.00	13b.	.00			
14. Refund. Is line 8 more than line	12? If so	o, line 8 minus line 12 14a		0.0	14b.	.00			
		,			-				

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Net amount you owe or net retund							
15. Add lines 13a and 13b	15.	0					
16. Add lines 14a and 14b		.00					
17. Amount you owe. Is line 15 more than line 16? If s							
18. Is line 16 more than line 15? If so, line 16 minus lin	.00						
19. Fill in the part of line 18 that you want applied to y		.00					
20. Net refund. Line 18 minus line 19				Net refund 20.			. 00
Under penalty of false swearing, I declare the information Sign here. Keep a copy of this return for your tax reconstructions of general partner, LLC member, or officer		return and	any attachments is	s true, correct, and complete	Date	/	
Title of general partner, LLC member, or officer					,		
Print first name of general partner, LLC member, or officer	me						
Signature of paid preparer	Date	Preparer license number	Paid pre	eparer phone			
X			/ /		() -	_
Print first name of paid preparer	Initial	Last nar	ne	,	1		
Paid preparer address	<u> </u>		City		State	ZIP code	

If you're mailing a payment with your return, send it in the same envelope as your return. We accept checks, money orders, and cashier's checks. Don't mail cash. Don't use Form OR-OC-V if sending a payment with your return. Make your check or money order payable to "Oregon Department of Revenue" and write the PTE's FEIN and "2024 Oregon Form OR-OC" on your payment.

Mail returns with no payment to: Oregon Department of Revenue, PO Box 14700, Salem OR 97309-0930.

Mail returns with a payment to: Oregon Department of Revenue, PO Box 14555, Salem OR 97309-0940.