Amended	Return	
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Form	OREGC	N		. –				
65	Partnership	Raturn	201	15		or office use on	ly	
UJ	of Incon			•	Date received			
For calendar year 2015 or fiscal or short year	, Beginning: Mo	Day Year	Ending: Mo	Day Year				
Please type or print clea	arly and answer all the que	stions below.						
Name of partnership					Federal emplo	oyer identification nu	ımber (Fl	EIN)
Current mailing address					Telephone nur	nber		
City			State ZIP code		Date activities	started in Oregon		
Name of partner who has t	he partnership books				Telephone nur	nber		
Mailing address			City		Sta	ate ZIP code		
Type of entity: Par Elec 1. Doing business in C 2. Requirement to file A. Does the partner	Mo extension due date: tnership □ Limited pa eting large partnership Dregon. Did the partnership Oregon partnership return ship have income or loss de ship have Oregon resident p	rtnership [do business in O n. erived from source	es in Oregon?	mpany [r?	Limited liability		Yes 	No
See instructions B. Payments. Enter C. Tax due. If line 3A	I m tax. uestion 1 marked "Yes" and if "accounting period chang r prepayments already made t is more than line 3B, you ha B is more than line 3A, you h	e" box above is c e ve tax to pay. Line	hecked 3A minus line 3B		\$\$		\$150 \$0	.00
B. Were the OregonC. Does the partner	profit/loss sharing percenta modifications not divided a ship have corporate partner r of federal Schedules K-1 i	according to each 's?	ı partner's profit shari	ing percentage	9?	idents		
E. If there are nonre	sident owners, enter how ma	ny owners were in	ncluded on a Form OC	C to report this	income:			

- To ensure accurate processing, include payments with this return. -

5. Prior year returns. Yes No A. Was a 2014 Oregon partnership return filed?..... If no, give the reason: _ B. Did an IRS audit change a prior year return during the 2015 tax year?..... C. Was an amended federal return filed for a prior year?..... If you answered yes to 5B or 5C, what tax year(s) were changed?______. Send us a copy of the federal revenue agent's report or the amended return separately from this return if not previously sent. 6. Business inside and outside of Oregon. 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 Oregon Schedule AP, Apportionment of Income for Corporations and Partnerships, to figure Oregon source income. Include the schedule. 7. Other taxing authorities. A. Do partnership employees perform services in the TriMet Transit District?..... B. Do any partners have self-employment income from the partnership in the TriMet Transit District?..... \square \square C. Do partnership employees perform services in the Lane Transit District?..... D. 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 TM and/or Form LTD must be filed by the individual partners or the partnership may

elect to file on the partners' behalf.

Schedule I—Oregon modifications to federal partnership income and credits passed through to partners. List the name, and amount for each addition, subtraction, and credit. Inlcude 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 or Oregon Schedule K-1 or equivalent. Generally, a partner's share of each modification or credit is figured using the partner's profit/loss sharing percentage.

Additi	ons-Items not included in federal partnership income which are taxable to Oregon.	Amount		
1.	1a	\$.00	
2.	2a	\$.00	
3.	За	\$.00	
4.	4a	\$.00	

Subtractions – Items included in federal partnership income that are not taxable to Oregon.

5.	5a \$	\$.00
6.	6a \$	\$.00
7.	7a -	\$.00
8.	8a \$	\$.00

Credit	s-Oregon tax credits earned by the partnership that can be passed through to the partners.	Amount		
9.	9a	\$.00	
10.	10a	\$.00	
11.	11a	\$.00	
12.	12a	\$.00	

	Under penalty of false swearing, I declare that the information in	this return and any attachm	ents is true	e, correct, and complete.
	Signature of general partner or LLC member	Signature of paid preparer	License number of preparer	
here	X	X		
	Date	Date	Telephone r	humber
	Print name of general partner or LLC member	Print name of paid preparer		
	Title of general partner or LLC member	Address of paid preparer		

Include a complete copy of the 2015 federal partnership return (Form 1065 or 1065-B) and required schedules as indicated

in the instructions. If you owe tax, include payment and voucher Form 65-V.

Amount



2015 Oregon Schedule K-1

Distributive Share of Income, Deductions, Credits, etc. For individual owners of pass-through entities

Final K-1 □ Amended K-1 For calendar year 2015 or fiscal year beginning ____, 2015 and ending __ , 20_____

Part I-Pass-through entity (PTE) information

PTE FEIN

PTE address

PTE name

Partnership □ S corporation

ZIP code State

Part II—Owner information

Owner's SSN Owner's name				Owner's address				
General partner or LLC member manager Shareholder				City			State	ZIP code
□ Limited partner or other LLC m	nember							
Oregon resident? If no, state of legal residence If a nonresident, check the appropria				e box	Owner's share of prof	it and loss/stoc	k ownershi	0
☐ Yes ☐ No		Germ OC	Germ OF	R-19	Beginning	%	End	%
		Affidavit	🗌 Not requ	ired		,-		,-

City

Part III – Distributive share items

PTE	Oregon apportionment percentage	% (a)	(b)	(c)
		Federal	Oregon	Form 40N
Inc	ome (losses)	column	column	line numbers
1	Ordinary business income (loss)			17
2	Net rental real estate income (loss)			17
3	Other net rental income (loss)			17
4	Guaranteed payments to partners			17
5	Interest income			8
6	Ordinary/qualified dividends			9
7	Royalties			17
8	Net short-term capital gain (loss)			13
9	Net long-term capital gain (loss)			13
10	Net section 1231 gain (loss)			13
11	Other income (loss)(include schedule)			Varies
Adj	ustments			
12	IRC section 179 expense			17
13	Other adjustments (include schedule)			27
Ore	gon additions			
14	Interest on state and local gov't bonds			30
15	Other additions (include schedule)			30
Ore	gon subtractions			
16	U.S. government interest			33
17	Depreciation			33
18	Other subtractions (include schedule)			33
Ore	gon credits			
19	Credits (include schedule)			53 and/or 54
Pay	ments for nonresidents			
20	PTE owner payment from Form OR-19			59
21	Tax paid on Form OC filed on owner's behalf			

Keep this schedule with your tax records. Don't submit with your individual tax return, Form 65, or Form 20-S.