

COMBINED TAX RETURN  
FOR PARTNERSHIPSMultnomah County  
Business Income Tax  
City of Portland  
Business License Tax

## FORM P-2015

DUE DATE: 15th day of 4th  
month after taxable year end

(Calendar Year Filers: 4/18/2016)

TAXABLE YEAR	
From:	to
ACCOUNT #	FEIN #
FEDERAL BUSINESS CODE	

OFFICIAL USE ONLY

NAME			
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MAILING ADDRESS (Notify the Revenue Division if business location address changes)	CITY	STATE/PROV	ZIP CODE
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AMENDED RETURN?	CEASED PORTLAND/MULTNOMAH BUSINESS? (attach explanation)	SELECT PARTNERSHIP TYPE	EXPLAIN IF OTHER:
MAILING ADDR CHANGE?			

ATTACH FEDERAL FORM 1065 (& FORM 8825 IF APPLICABLE)		Multnomah County*	City of Portland*
INCOME	1. Ordinary Income or (Loss) .....	1M	1P
	2. Business Income Tax & Business License Tax Add Back .....	2M	2P
	3. Schedule K (lines 2-3, 5-13) and Oregon modifications on Form 65 .....	3M	3P
	4. Compensation (# GPs: _____, # LPs w/comp paid: _____, Total paid to LPs: _____) .....	4M	4P
	5. Adjusted Net Income (total lines 1, 2, 3 and 4) .....	5M	5P
	6. Compensation Allowance Deduction (see instructions) Enter as negative sum .....	6M ( )	6P ( )
	7. Subject Net Income (line 5 minus line 6) .....	7M	7P

Multnomah County Avg. Sum of Multnomah Employees in 2015: _____		8c	
8a. County Gross Income = _____	8c		
8b. Total Gross Income* = _____			
* If less than \$50,000, the taxpayer is exempt and should complete Form AER			
9. County Apportioned Net Income (line 7M x line 8c) .....	9		
10. Net Operating Loss Deduction (max 75% of line 9) Enter as negative sum .....	10 ( )		
11. Income Subject to Tax (line 9 minus line 10) .....	11		
12. Tax (line 11 x tax rate of 1.45%) MINIMUM \$100 .....	12		
13. Prepayments .....	13 ( )		
14. Penalty .....	14		
15. Interest .....	15		
16. Balance Due or (Overpayment) .....	16		
17. REFUND: _____ CREDIT: _____ TRANSFER TO PORTLAND: _____			

ATTACH CHECK HERE	City of Portland Avg. Sum of Portland Employees in 2015: _____		18c	
	18a. Portland Gross Income = _____	18c = (18a ÷ 18b) (must be 1.0 or less) →		
	18b. Total Gross Income* = _____			
	* If less than \$50,000, the taxpayer is exempt and should complete Form AER			
	19. Portland Apportioned Net Income (line 7P x line 18c) .....	19		
	20. Net Operating Loss Deduction (max 75% of line 19) Enter as negative sum .....	20 ( )		
	21. Income Subject to Tax (line 19 minus line 20) .....	21		
	22. Tax (line 21 x tax rate of 2.2%) MINIMUM \$100 .....	22		
	23. Prepayments .....	23 ( )		
	24. Penalty .....	24		
	25. Interest .....	25		
	26. Balance Due or (Overpayment) .....	26		
	27. REFUND: _____ CREDIT: _____ TRANSFER TO MULT CO: _____ DONATE TO "WORK FOR ART": _____			

28. COMBINED AMOUNT DUE WITH REPORT (total lines 16 and 26) Check # _____	28
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SIGNATURE	<b>Make check payable to City of Portland, 111 SW Columbia St., Suite #600, Portland, OR 97201-5840.</b>		
	The undersigned declares that the information given on this report is true. The undersigned is authorized to act as a representative of the filer. Filers of incomplete returns (including returns that have not reported the Average Sum of Employees) may be subject to civil penalties of up to \$500.		
	Signature of Filer _____	Date _____	Filer's Daytime Phone ( ) _____
	Signature of Preparer _____	Date _____	Filer's Email _____
	Preparer's Name/Address _____ Preparer Phone ( ) _____		
<b>REVENUE DIVISION (503) 823-5157 FAX (503) 823-5192 TDD (503) 823-6868</b>			