Clear form

# Form OR-TM-V
## TriMet Self-employment Tax Payment Voucher

Oregon Department of Revenue

 • Use UPPERCASE letters. • Use blue or black ink. • Print actual size (100%). • Don't submit photocopies or use staples.

Tax year beginning (MM/DD/YYYY) / / 

Tax year ending (MM/DD/YYYY) / / 

First name (if filer is an individual)

Initial

Last name

Social Security number (SSN) – –

Partnership name (if filer is a partnership)

Federal employer identification number (FEIN) –

Business address

City

State

ZIP code –

Contact phone – –

**Want to make your payment online?** Find options at www.oregon.gov/dor.

**Use this voucher only if you're sending a payment separate from a return.** Make your check, money order, or cashier's check payable to the Oregon Department of Revenue. Write "Form OR-TM-V," the filer name, the filer SSN or FEIN, the tax year beginning and ending dates, and a daytime phone on your payment. Don't mail cash. Mail the voucher and payment to:

**Oregon Department of Revenue**
**PO Box 14950**
**Salem OR 97309-0950**

**Payment type** (check one)

- ☐ Original return or extension
- ☐ Prepayment
- ☐ Amended return

**Enter payment amount**

$ , , . 0 0

150-555-172
(Rev. 05-01-24, ver. 06)