

# 2022 Form OR-TM

## Tri-county Metropolitan Transportation District Self-employment Tax

Oregon Department of Revenue

Page 1 of 2 • Use UPPERCASE letters. • Use blue or black ink. • Print actual size (100%). • Don't submit photocopies or use staples.

You may file this return directly with us through Revenue Online, at [www.oregon.gov/dor](http://www.oregon.gov/dor).

Fiscal year beginning (MM/DD/YYYY)

Fiscal year ending (MM/DD/YYYY)

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**See instructions for checkboxes (check all that apply)**

- Amended return      Name change      Address change      An extension has been filed  
 Utility or telecommunications

Did you file Form OR-TM for 2021?      Yes      No (if no, give reason.)

First name

Initial

Last name

Partnership name (if filer is a partnership)

Social Security number (SSN)

Federal employer identification number (FEIN)

Phone

-  -

-

-  -

Business address

County

City

State

ZIP code

-

1. Self-employment earnings from federal Schedule SE or Partnership Form 1065 ..... 1.
2. Apportionment percentage from Schedule OR-TSE-AP .....2.
3. Net self-employment earnings. Multiply line 1 by line 2 .....3.
4. Less: Exclusion. Not more than \$400 per taxpayer.....4.
5. Net earnings subject to transit district tax. Line 3 minus line 4 .....5.
6. Net tax. Multiply the amount on line 5 by 0.007937 .....6.
7. Prepayments .....7.
8. **Tax to pay.** If line 6 is more than line 7, you have tax to pay.  
Line 6 minus line 7 .....**Tax to pay** 8.

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Page 2 of 2 • Use UPPERCASE letters. • Use blue or black ink. • Print actual size (100%). • Don't submit photocopies or use staples.

9. Penalty and interest for filing or paying late.....9.

Grid for penalty and interest amount, ending in .00

10. Total amount due. Line 8 plus line 9 ..... Total due 10.

Grid for total amount due, ending in .00

11. Refund. If line 7 is more than line 6, you overpaid.

Line 7 minus line 6 ..... Refund 11.

Grid for refund amount, ending in .00

Business activity section with checkboxes for Sales, Services, and Other (explain)

Individuals: You must include a copy of your federal Schedule SE.

Partnerships: You must include a schedule listing each partner's name, Social Security number, partnership earnings, and exclusion.

Apportioning: You must include your completed Schedule OR-TSE-AP. If you don't provide your schedule as required, an unnecessary billing for tax may occur.

Under penalty of false swearing, I declare that the information in this return and any enclosures are true, correct, and complete.

Your signature

Signature line with 'X' mark

Date (MM/DD/YYYY)

Date input grid

Preparer signature other than taxpayer

Preparer signature line with 'X' mark

Date (MM/DD/YYYY)

Date input grid

Phone

Phone input grid

Preparer license number

Preparer license number input grid

Preparer first name

Preparer first name input grid

Initial

Preparer initial input grid

Preparer last name

Preparer last name input grid

Preparer address

Preparer address input grid

City

City input grid

State

State input grid

ZIP code

ZIP code input grid

Pay online or make check or money order payable to: Oregon Department of Revenue

Mail your return to: TMSE, Oregon Department of Revenue, PO Box 14555, Salem OR 97309-0940

Don't attach Form OR-TM to any other form, including your Oregon income tax return.

Don't include a payment voucher with this return. Payments included with a transit return don't require a voucher.

