FORM
IT-V Oregon Inheritance Tax Payment Voucher and Instructions

Use this voucher to send the following payments for Form IT-1, *Oregon Inheritance Tax Return*:

- **Tax due when you file your original return.** Check the "Original IT-1 return" box. Include the voucher with your check in the same envelope as your return.
- **Tax due by the original return due date, if you are applying for an extension of time to file your return.** Check the "Extension" box. Include the voucher with your check.
- **Prepayment of tax if you are making a payment before the original due date of your return.** Check the "Prepayment" box. Include the voucher with your check.
- **Tax due with an amended return.** Check the "Amended IT-1 return" box. Include the voucher with your check in the same envelope as your amended return.

Helpful tips:

- **Payment type:** Check the box that identifies the type of payment you are sending.
- **BIN:** Fill in the BIN (Oregon business identification number) if known.

Please use blue or black ink. Do not use gel pens or red ink.

Make your check payable to: Oregon Department of Revenue. To ensure proper credit to your account, write the following on your check: the decedent's name, the year of death, and "Form IT-1".

Please send all payments to:

Oregon Department of Revenue
PO Box 14110
Salem OR 97309-0910

Note: Do not use this voucher as an extension to file. Use IRS Form 4768, *Application for Extension of Time To File a Return and/or Pay U.S. Estate (and Generation-Skipping Transfer) Taxes*, and mail to us by the original due date of your Form IT-1. Attach a copy of the extension to your return.

Oregon Inheritance Tax Payment Voucher

150-103-172 (Rev. 08-10)

FORM
IT-V
(120)

Department of Revenue Use Only

Date of death: ____|____|_____

Payment type (check only one):
- ☐ Original IT-1 return
- ☐ Extension
- ☐ Prepayment
- ☐ Amended IT-1 return

Clear Form

BIN: _____

Decedent's SSN: _____

Enter Payment Amount

$ _____.00

Name of decedent: _____

Name of executor: _____ Telephone number: _____

Mailing address of executor: _____

City: _____ State: _____ ZIP code: _____