

Form
OR-MTR

Oregon Marijuana Tax Registration



Please print. See instructions. A separate registration is required for each location selling recreational marijuana products.

Recreational sales start date	Federal employer identification number (FEIN)	Business identification number (BIN)	Revenue use only
			Date received
Check one retailer type <input type="checkbox"/> Medical marijuana dispensary; or <input type="checkbox"/> Licensed marijuana retailer.		Retailer license number	
Business name (including DBA)		<input type="checkbox"/> Check if change in owner/officer. <input type="checkbox"/> Check if change in address.	
Mailing address		Type of ownership (check only one):	
City	State	ZIP code	<input type="checkbox"/> Corporation.
Physical address (required)		<input type="checkbox"/> Sub-chapter S corporation.	
City	State	ZIP code	<input type="checkbox"/> Sole proprietorship (individual).
County		Business phone	<input type="checkbox"/> LLP (limited liability partnership).
Organization information		<input type="checkbox"/> Partnership—general.	
Name of parent company		<input type="checkbox"/> Partnership—limited.	
Mailing address		LLC (limited liability company) recognized by the IRS as a—	
City	State	ZIP code	<input type="checkbox"/> Corporation; or
		<input type="checkbox"/> Individual (sole proprietorship); or	
		<input type="checkbox"/> Partnership.	
		<input type="checkbox"/> Non-profit 501(c)(3) (attach federal exemption).	
		<input type="checkbox"/> Other nonprofit.	
		Do you have employees? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Owners, officers, partners information

List all owners, officers, or partners. Please print clearly (use additional sheets if necessary).

Name		Social Security number (SSN)	
Address	City	State	ZIP code
Name		SSN	
Address	City	State	ZIP code
Name		SSN	
Address	City	State	ZIP code

Contact person

Name	Title
Daytime phone	Fax number
Email	Web address

Submitted by

Signature X	Date	Phone
Print name signed above	Title	

Mail your completed form to: Oregon Department of Revenue, PO Box 14630, Salem OR 97309-5050

Or email to: marijuanatax.dor@oregon.gov

Or fax to: 503-945-8772

Instructions for Form OR-MTR

Who must register

Only individuals or firms selling recreational marijuana need to file a Form OR-MTR. Medical marijuana dispensaries that become licensed marijuana retailers with the Oregon Liquor Control Commission, must complete a new Form OR-MTR.

Other locations in Oregon

If you have more than one place of business selling recreational marijuana in Oregon, complete a separate Form OR-MTR for each location.

Recreational marijuana sales start date

Insert the date (mm/dd/yyyy) your medical marijuana dispensary or licensed marijuana retailer began or plans to begin selling recreational marijuana products.

Federal employer identification number (FEIN)

If you don't have a FEIN, leave this field blank.

Business identification number (BIN)

If your business has an assigned BIN for another tax program, insert that number here. If your business does not have a BIN, leave this field blank.

Retailer license number

If your business has an assigned license number from the Oregon Liquor Control Commission (OLCC), insert that number here. If your business doesn't have an OLCC-issued license number, leave this field blank.

Retailer type

If you're a registered medical marijuana dispensary selling limited recreational marijuana products, check the "Medical marijuana dispensary" box. If you're a licensed recreational marijuana retailer, check the "Licensed marijuana retailer" box.

Business name

This is the name of the business location selling recreational marijuana products.

Physical address

This is the physical address of the location in which the business is selling recreational marijuana products.

Parent company

If applicable, list the name of the parent company and mailing address.

Employees

If you have employees, check the "Yes" box. Corporate officers are considered employees, including those in subchapter "S" corporations. Individuals or firms with employees need to file a *Combined Employer's Registration* form if you have not already done so.

Note: The definition of "employee" differs among Oregon state agencies. If you have questions, refer to the *Oregon Business Guide* booklet or call the appropriate agency.

Additional owner/officer information

List information on additional owners, officers, partners, etc., on a separate sheet and attach it to this registration form.

Submit your form

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Salem OR 97309-5050

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