Form OA Domestic

Oregon Annual Tax Report



6526010123

For more detailed instructions, see the Oregon Domestic Combined Payroll Tax Report at www.oregon.gov/dor. Make sure to enter the amount you paid for each tax in the appropriate box. **Complete both sides of this form.** To make a payment:

Date received

- Use electronic funds transfer (EFT) on Revenue Online at www.oregon.gov/dor; or
- Complete Form OR-OTC-V and mail with your check, payable to Oregon Department of Revenue, to:

Oregon Department of Revenue PO Box 14800 Salem OR 97309-0920

Business name			
Federal employer identification number (FEIN	Business identification nu	umber (BIN) Quarter/Year (Q/YY)	
			State Income Tax Withholding
 Subject wages. Enter 0 if there wa but you were still subject to withho 			
Total tax amount. You must enter amount for the year		2.	
3. Tax pre-paid this year		3.	
4. Total due. Line 2 minus line 3		4.	
 Report the number of workers cove October 	ered for Unemployment Insurance 5b. November	e (UI) who worked during or received pa 5c. December	ay for the period (see instructions). 5d. Total
6. Paid Leave out-of-state employe	es. Total of employees paid to wo	ork exclusively outside of Oregon. 6c. Third quarter	6d. Fourth quarter
7. Paid Leave Replacement Worker 7a. First quarter	s. Total of temporary workers em 7b. Second quarter	ployed as replacements for employees 7c. Third quarter	taking Paid Leave in the quarter. 7d. Fourth quarter

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Business identification number (BIN)	Quarter/Year (Q/YY
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	Unemployment Insurance (UI)		Paid Leave
8. Subject wages. Enter 0 if there was no payroll, but you were still subject8a.		8b.	
9. Excess wages (see instructions)9a.		9b.	
10. Taxable wages. Line 8 minus line 910a.	1	0b.	
11. UI tax / Paid Leave contribution rate11a.	1	1b.	
12. Paid Leave employer contributions (Line 10b multiplied by	line 11b multiplied by 0.40)	12.	
13. Paid Leave employee contributions (Line 10b multiplied by	line 11b multiplied by 0.60)	13.	
14. Total. For line 14a, multiply line 10a by line 11a. For line 14b, add line 12 to line 1314a.	1	4b.	
15. UI tax / Paid Leave contribution pre-paid this quarter15a.	1	5b.	
16. Penalty and interest owed16a.	1	6b.	
17. Total due. Line 14 minus line 15, add line 1617a.	1	7b.	
Special Payroll Tax Offset. See instructions. 18. Special payroll tax offset. Use to calculate the "contributions 19. Amount applied to UI trust fund. Line 14a minus line 18		_	
Workers' Benefit Fund (WBF) Assessment 20. Hours worked by paid workers subject to Oregon Worker (Whole hours only. Hours do not need to equal hours reported		20.	
21. WBF assessment rate		21.	
22. Total assessment. Line 20 multiplied by line 21		22.	
23. Assessment prepaid. Add prepayments that were made this on your WBF account		23.	
24. Total WBF assessment due. Line 22 minus line 23		24.	
Total Payment Due 25. Total Payment Due. Add lines 4, 17a, 17b, and 24		25.	
Under penalty of false swearing, I declare that the informatio Signature	on in this report and any enclosures are t	ue, co	rrect, and complete. Date (MM/DD/YY)
X			/ /
Preparer name	Preparer phone	\neg	Preparer license number

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