FORM
20-V

Oregon Corporation Tax Payment Voucher Instructions

Use this voucher to send the following payments:

- Tax due for **original return,** which has been e-filed or mailed separately.
- Tax due by the original return's due date if you are filing for an **extension** on your return.
- **Estimated** tax payments.
- Tax due for an **amended** return filed for any year.

Do not use this voucher if:

- Payment is being sent electronically.
- Payment is for pass-through entity withholding, instead use Form TPV-19 (see Form OR-19, 150-101-182).

Required for accurate processing:

- **Check the calendar or fiscal tax year box.** If you are a fiscal year filer, fill in the beginning and ending dates of your tax year.
- Enter your **BIN (Oregon business identification number, NOT your Oregon registry number),** if known. If this is your first filing with the department, check the first-time filer box and leave blank; a BIN will be assigned.
- Enter your **FEIN** (federal employer identification number), required.
- Check the **Composite Return** box only if you are a pass-through entity making a payment on behalf of corporate owners electing to be part of a composite return.

Make your check payable to: Oregon Department of Revenue. To ensure proper credit to your account, write the filer's name, BIN or FEIN, and tax year on your check.

Mailing information:

Estimated and extension payments: Oregon Department of Revenue
PO Box 14780
Salem OR 97309-0469

All other payments: Oregon Department of Revenue
PO Box 14790
Salem OR 97309-0470

Note: This voucher is not an extension to file. Oregon accepts the federal extension. If you need an Oregon-only extension, fill out the federal extension form and write "for Oregon only" at the top. Do not send a copy now. Include the federal extension form when you file your Oregon return and check the "Extension" box on the Oregon return.

Visit www.oregon.gov/dor/business/forms-corporation.shtml to print more vouchers

OREGON CORPORATION TAX PAYMENT VOUCHER

150-102-172 (Rev. 10-10)

FORM
20-V

Department of Revenue Use Only

● **Payment type** (check only one):
- [X] Original return
- [X] Extension payment
- [X] Estimated payment
- [X] Amended return

● **Tax year** (check only one):
- [X] Calendar year: Y Y Y Y
- [X] Fiscal year — Begins: MM / DD / YYYY
        Ends: MM / DD / YYYY

● **Tax return type** (check only one):
- (200) [X] Excise (Form 20, 20–S, or 20–INS)
- (202) [X] Income (Form 20–I or 20–S)
- (204) [X] Composite Return

● BIN: 1 2 3 4 5 6 7 8 – 9
  FEIN: 1 2 – 3 4 5 6 7 8 9

Enter payment amount

$ [   ] . 0 0

- [X] First-time filer
- [X] New name or address

Name of filer on return: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Filer address: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
City: XXXXXXXXXXXXXXXXXXXXXXXX   State: XX   ZIP code: XXXXX – XXXX

123456789ABCD0000000000000000010112020412100