

2023 Form METBIT-65



Metro Supportive Housing Services Business Income Tax Return for Partnerships

Due Date: 15th day of 4th month after taxable year end (Calendar Year Filers: 4/15/2024)

File online at Pro.Portland.gov

Tax Year From: _____ to _____ Official Use Only

Account # SHB- FEIN NAICS

Name

Mailing Address [] Check if changed City State/Prov ZIP Code

[] Initial Return [] Final Return (attach explanation) [] Amended Return [] Extension Filed

Part I - Gross Income and Apportionment

Table with 3 rows: 1. Metro gross income, 2. Total gross income, 3. Apportionment percentage

Part II - Metro Business Income Tax

Attach required federal and Oregon tax pages. See instructions.

Table with 18 rows: 4. Ordinary income or (loss) from Form 1065, 5. Add-back of deductions not allowed, 6. Schedule K (lines 2-3, 5-13) and Oregon modifications from Form 65, 7. Non-business income subtraction (see instructions), 8. Subject net income (sum of line 4 through line 7), 9. Metro apportioned net income (line 8 x line 3), 10. Add-back of non-business income allocated to Metro (see instructions), 11. Total business income taxable to Metro (sum of line 9 and line 10), 12. Net operating loss deduction (max 75% of line 11), 13. Income subject to tax (sum of line 11 and line 12), 14. Metro business income tax (line 13 x 1%) Minimum \$100, 15. Prepayments, 16. Penalty, 17. Interest, 18. Balance due or (overpayment)

Part III - Tax Due / Refund

Table with 3 rows: 19. If the amount on line 18 is negative, this is the amount you overpaid, 20. If the amount on line 18 is positive, this is the amount you owe

Part IV - Signature

The undersigned declares that the information given on this report is true. The undersigned is authorized to act as a representative of the filer. Filers of incomplete returns may be subject to civil penalties of up to \$500.

Signature of Taxfiler _____ Date _____

Taxfiler Email _____ Taxfiler Phone Number _____

Signature of Preparer _____ Date _____

Preparer's Name _____ Preparer's License Number _____

Mailing Instructions**If a payment is included, send to:**

Revenue Division - Metro SHS Tax
PO Box 9250
Portland, OR 97207-9250

Make check payable to Metro SHS Tax

If a payment is not included, send to:

Processing - Metro SHS Tax
111 SW Columbia St., Suite 600
Portland, OR 97201-5840

Phone (503) 823-5157

FAX (503) 823-5192

TDD (503) 823-6868
