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Oregon Combined Payroll Tax
Business Change in Status Form

To Update Business Status and Employment Information
Attach additional sheets if needed.

Business name	BIN (Oregon business identification number)
Other names (ABN/DBA)	FEIN (Federal employer identification number)

Owner/Officer updates:
To update owner/officer information, attach a complete list of current owners/officers including position, social security number (SSN), home address, and phone.

General updates (check all that apply)

☐ Update/Change FEIN to:

☐ Update/Change business name to:

☐ Now doing business in TriMet/Lane Transit District as of:

Closing account (check all that apply)

☐ Closed pension/annuity account as of:

☐ No longer doing business in TriMet/Lane Transit District as of:

☐ All or
☐ Part of the business was ▶ ☐ Closed ☐ No longer doing business in Oregon ☐ Sold ☐ Leased ☐ Transferred

Was business operating at the time it was sold, leased or transferred? ☐ Yes ☐ No Effective date:

How many employees were transferred? Date of final payroll:

Describe what was transferred

New business name

New owner's name	New owner's phone		
New owner's address	City	State	ZIP code

Where are the records of the terminated business? (Include contact name, phone, address, city, state, ZIP code)

Changing entity (check all that apply)

Effective date:

Note: A new *Combined Employer's Registration* form, 150-211-055, is required when there is an entity change.

Change from:	☐ Corporation—"C"	☐ Corporation—Subchapter "S"	☐ LLP (Limited Liability Partnership)
	☐ Individual (Sole Proprietor)		LLC (Limited Liability Company) Recognized by IRS as:
	☐ Partnership—General	☐ Partnership—Limited	☐ Corporation ☐ Sole Proprietor/Single Member ☐ Partnership
Change to:	☐ Corporation—"C"	☐ Corporation—Subchapter "S"	☐ LLP (Limited Liability Partnership)
	☐ Individual (Sole Proprietor)		LLC (Limited Liability Company) Recognized by IRS as:
	☐ Partnership—General	☐ Partnership—Limited	☐ Corporation ☐ Sole Proprietor/Single Member ☐ Partnership

Employment status updates (check all that apply)

☐ Still in business, but have no paid employees (corporate officers are still subject to payroll taxes). Effective date:

☐ Only have workers' compensation insurance to cover owners, officers or members.
☐ Only LLC members or officers
☐ Courtesy withholding
☐ Only using independent contractors

☐ Employing Oregon residents in another state. State:

☐ Now working in Oregon. Effective date:

Using leased employees

Name of leasing company	Worker leasing company license number	Date employees leased	
Address	City	State	ZIP code
Leasing company contact name	Phone		

Number of leased employees: Number of non-leased employees: Leasing corporate officers/owners? ☐ Yes ☐ No

Authorization

Under penalties of false swearing, I declare that the information on this form, including accompanying documents, is true, correct, and complete to the best of my knowledge and belief. (ORS 305.810)

Print name	Title	
Signature	Date	Phone

Fax to: 503-947-1700 or mail to: Employment Department, 875 Union St NE Rm 107, Salem OR 97311-0030