

Utah Partnership/Limited Liability Partnership/ Limited Liability Company Return

**2020
TC-65**

For calendar year 2020 or fiscal year (mm/dd/yyyy):
beginning - 99/99/9999 and ending - 99/99/9999

- 9 Amended Return (code 1-4)
- X Mark "X" if you filed federal form 8886

Partnership name
PARTNERSHIP-NAMEXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Address
ADDRESSXX

City State ZIP + 4
CITYXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX ST ZIP999999

Foreign country (if not U.S.) Telephone number
FOREIGN-COUNTRYXXXXXXXXXXXXXXXXXXXX PHONE99999

EMPLOYER IDENTIFICATION NUMBER
999999999

ENTITY TYPE (check one):

- X General partnership
- X Limited partnership
- X Other (describe below)
- X Limited liability partnership
- X Limited liability company

1 Date registered in Utah (mm/dd/yyyy) • 1 99/99/9999

2 If dissolved, date of dissolution (mm/dd/yyyy) • 2 99/99/9999

3 Total pass-through withholding tax - enter the amount from Schedule N, column I
Note: This amount must be paid by the due date of the return, without extensions • 3 999999999999

4 Utah use tax • 4 999999999999

5 Total tax - add line 3 and line 4 5 999999999999

6 Prepayments made for the year (do not include any pass-through withholding tax or credits - see instr.) • 6 999999999999

7 Amended return only (see instructions) • 7 999999999999

8 Total payments - add line 6 and line 7 • 8 999999999999

9 **Tax Due** - subtract line 8 from line 5 (not less than zero) • 9 999999999999

10 Penalties and interest (see instructions) 10 999999999999

11 **Total Due - Pay this amount** - add line 9 and line 10 • 11 999999999999

12 **Overpayment** - subtract the sum of line 5 and line 10 from line 8 (not less than zero) 12 999999999999

13 Amount of overpayment on line 12 to be applied to next year • 13 999999999999

14 **Refund** - subtract line 13 from line 12 • 14 999999999999

USTC USE ONLY

Under penalties of perjury, I declare to the best of my knowledge and belief, this return and accompanying schedules are true, correct and complete.

SIGN	Signature of general partner or member manager	Date	Title	"X" if USTC may discuss this return with preparer below: <input checked="" type="checkbox"/>
HERE	Preparer's signature	Date	Preparer's telephone number 9999999999	Preparer's PTIN • 9999999999
Paid	Firm's name and address PREPARER-NAMEXXXXXXXXXXXXXXXXXXXXXXXXXXXX PREPARER-ADDRESSXXXXXXXXXXXXXXXXXXXX PREPARER-CITYXXXXXXXX ST 9999999999			Preparer's EIN • 9999999999

