

2017 Montana Income Tax Return for Estates and Trusts

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Form FID-3

Include a complete copy of the federal Form 1041 and all related forms and schedules.

	For	calendar	year 2017 or tax year beginnin	ig MM	D D	2 0 1 7 and	l ending M M	1 D D	YYYY	
	all tha nitial re	at apply. eturn	Name of Estate or Trust				FEIN			
F	inal re	eturn	Name and Title of Fiduciary				Date Entity Crea	ted M	M D D Y Y	YY
	Amend	ed return					Enter number of:			
F	Refund	return	Mailing Address				Schedules K-1 inclu	ded		
	NOL ca	arryback					Resident beneficiari	es		一
		or filing	City	State	9	Zip Code + 4	Nonresident benefic	iaries		Ħ
	rust ma Sec. 64	ade a 15 election					Other types of bene	ficiaries		\mp
		. Mark all th	nat apply.				Residency Status			
	Decede		Qualified disability trust	Bankruptcy	estate	(Chapter 11)	Resident	П	Resident part-year	
	estate		ESBT	Pooled inco		, ,	Nonresident		State moved to	
	Simple	trust	Grantor type trust	Qualified fur	neral ti	rust			State moved from	
	Comple	ex trust	Bankruptcy estate (Chapter 7)	Other			Date of char	nge M	MDDYY	YY
	Fr	nter amounts	s on lines 1 through 17 corresponding to y	our federal retu	ırn. Ro	ound to the nearest doll	ar. If no entry, leave b	olank.		
	1		omeg to y							0.0
	2		vidends							00
	3	•	ncome or (loss).			usiness Code/NAICS		3		00
	4									00
ц	5		alties, partnerships, other estates and trus			00				
Income	6		ne or (loss)			00				
_	7		ain or (loss)			00				
	8	Other incor	me. List type				and am	ount 8		00
	9	Add lines 1	through 8. Total federal income					9		00
		Line 9 mus	t equal the total income reported on feder	al Form 1041 (s	see ins	structions for Electing S	mall Business Trust)			
	10	Interest						10		0.0
	11	Taxes (do r	not include federal income tax deduction)					11		00
	12	Fiduciary fe	ees					12		00
	13	Charitable	deduction					13		00
Ξ	14	•	ccountant, and return preparer fees							00
nptic	15a		actions not subject to the 2% floor (include	•						00
Exer			miscellaneous itemized deductions subjec							00
and			0 through 15b							00
Deductions and Exemption		1041, line	justed total income or (loss). Subtract line 17.)	17		0.0				
Sedu	18	Montana a	dditions from Schedule A, line 9					18		00
_	19		eductions and subtractions from Schedule							00
	20		7 and 18, then subtract line 19. Montana	•		• •				00
	21		come distribution deduction from Schedul							00
	22	•							240	00 00
	23		1 and 22. Total Montana income distrib			•				00
	24	Subtract lin	ne 23 from line 20. Montana taxable inco	me				24		0.0



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	25	Montana taxable income from line 24	25	0.0
	26	Tax from the tax table. If line 25 is zero or less, enter zero		00
	27	2% capital gains tax credit on undistributed capital gains from Schedule E, line 4		00
	28	Subtract line 27 from line 26. If zero or less, enter zero. Resident tax after capital gains tax credit		00
ţ	28a	Nonresident, resident part-year tax after capital gains credit from Schedule F, line 17, but not less than zero		00
red	29	Tax on lump sum distributions	29	00
D Pu	30	Add line 28 or 28a and line 29. Total tax.	30	00
Taxes and Credits	31	Credit for taxes paid to other states or countries (see instructions on page 3)	31	0.0
Tax	32	Other nonrefundable credits. List credit form(s)	32	00
	33	Add lines 31 and 32. Total nonrefundable credits	33	00
	34	Subtract line 33 from line 30. If zero or less, enter zero	34	00
	35	Endowment credit recapture tax	35	0.0
	36	Add lines 34, 35 and the ESBT tax liability from Schedule G, line 12. Tax liability.	36	00
	37a	Total Montana income tax withheld. Include federal Forms W-2 and 1099	0.0	
	37b	Montana income tax withheld allocated to beneficiaries	0.0	
	37	Subtract line 37b from 37a. Montana income tax withheld allocable to the estate or trust.	37	0.0
<u>a</u>	38a	Total Montana pass-through entity withholding. Include Montana Schedule(s) K-1	0.0	
dab	38b	Montana pass-through entity withholding allocated to beneficiaries	00	
efun	38	Subtract line 38b from 38a. Montana pass-through entity withholding allocable to the estate or trust	38	0.0
Payments and Refundable Credits	39a	Total Montana mineral royalty tax withheld. Include federal Forms 1099 and supporting schedules if any	00	
ents	39b	Mineral royalty tax withheld allocated to beneficiaries	00	
aym	39	Subtract line 39b from 39a. Mineral royalty tax withheld allocable to the estate or trust.	39	0.0
<u>a</u>	40	2017 estimated tax payments and amount applied from the 2016 return	40	0.0
	41	2017 extension payments	41	0.0
	42	Refundable credits. List credit form(s)	42	0.0
	43	Add lines 37 through 42. Total payments and refundable credits.	43	0.0
Тах	44	If line 36 is greater than line 43, subtract line 43 from line 36. Tax due .	44	0.0
100	45	If line 43 is greater than line 36, subtract line 36 from line 43. Tax overpaid.		0.0
P	46	Interest on underpayment of estimated taxes (see instructions on page 5)	46	0.0
Penalties and Interest	47	Late file, late payment penalties and interest (see instructions and table on page 5)	47	0.0
nalt Inte	48	Other penalties (see instructions on page 5)	48	0.0
Pe	49	Add the amounts on lines 46 through 48. Total penalties and interest.	49	0.0

Continue to page 3 for the calculation of the amount the entity owes or its refund.

	2017 Montana Individual Income Tax Table										
If Your Taxable Income Is More Than	But Not More Than	Multiply Your Taxable Income By	And Subtract	This Is Your Tax	If Your Taxable Income Is More Than	But Not More Than	Multiply Your Taxable Income By	And Subtract	This Is Your Tax		
\$0	\$2,900	1% (0.010)	\$0		\$10,600	\$13,600	5% (0.050)	\$266			
\$2,900	\$5,200	2% (0.020)	\$29		\$13,600	\$17,600	6% (0.060)	\$402			
\$5,200	\$7,900	3% (0.030)	\$81		More Tha	ın \$17,600	6.9% (0.069)	\$560			
\$7.900	\$10.600	4% (0.040)	\$160								

For example:

Taxable income $6,800 \times 3\% (0.030) = 204$.

\$204 minus \$81 = \$123 tax

Questions? Call us at (406) 444-6900 or TDD (406) 444-2830 for hearing impaired.



	F	Form FID-3, Page	3 – 2017			FEIN			
Amount the Entity Owes or Its Refund	50	overpayment (ar	mount on line 45) ai	nd it is less than line 4	ld lines 44 and 49 OR, if ignormal states and 49 or, if ignormal states are states and the states are states and the states are states are states and the states are	ne 49. Enter the result.		50	0.0
efu j					yov. If writing a check, ma				. 0
nt the Entity or Its Refund	51		•	•	ne 45) and it is greater the			.,	
ount o	52				applied to the 2018 estin				00
Α̈́	52				applied to the 2016 estin				00
	00	Cubitact iiii 0 02	Tront line of and on	tor the recult					10
		t Deposit Refund	1. RTN#		2. ACCT#				
		e 1, 2, 3 and 4	3. If using direct de	eposit, the estate or tr	ust is required to mark or	ne box. Ch	necking Sa	avings	
(s	see in	structions).	4. Is this refund go	ing to an account that	t is located outside of the	United States or its ten	ritories?	Yes No	
and be	lief, it	is true, correct an	nd complete.			FEIN of Fiduciary		he best of my knowledge	
-	ure of	Fiduciary (or offic	cer representing fidu	iciary)	Date	(if a financial institu	ition) lele	phone Number	
X									
Print/T	уре Р	reparer's Name		Preparer's Signatur	e	Date	PTIN	I	
Firm's	Name)					Firm'	's FEIN	
Firm's	Addre	ess					Telep	ohone Number	
May the	e DOF	R discuss this retu	ırn with the tax prep	arer? Yes	No				
Send	your c	completed Form F	ID-3 to:	Montana Departmen PO Box 8021 Helena, MT 59604-8			adrana 7-fil	See electronic options revenue.mt.gov	at
				Schedule	A – Schedule of A	dditions			
1	Intere	st and mutual fund	d dividends from sta	ate, county or municipa	al bonds from other state	S		.1	00
2	Divide	ends not included i	in federal total incor	me				0	00
3	Taxab	le federal refund						2	00
4	Other	recoveries of amo	ounts deducted in e	arlier years that reduc	ed Montana taxable inco	me		4	00
5	Monta	ana income taxes	paid or accrued					E	00
6	Exper	nses allocated to U	J.S. obligations					6	00
7	Feder	al net operating lo	oss carryover includ	ed on Form FID-3, line	e 15a			7	00
8	Other	income. List type					and amount	0	00
9 .	Total	additions (add lin	nes 1 through 8). Er	nter the total on Form	FID-3, line 18			0	0.0

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	Schedule B – Schedule of Deductions/Subtractions	
1	Federal income tax deduction	00
2	Exempt interest and mutual fund dividends from federal bonds, notes, and other obligations	00
3	State tax refunds included on Form FID-3, line 8	00
4	Other recoveries of amounts deducted in earlier years that did not reduce Montana taxable income	00
5	Partial pension and annuity income exemption (see worksheet and instructions)	00
6	Subtraction for federal taxable U.S. Railroad Retirement Board benefits (Tier I and Tier II)6	00
7	Expenses allocated to other states' interest and mutual fund dividends	00
8	Montana net operating loss carryover from Montana Form NOL (see instructions)	00
9	Other subtractions. List type and amount 9	00
10	Total deductions/subtractions (add lines 1 through 9). Enter the total on Form FID-3, line 19	00

	Schedule C – Montana Distributable Net Income (MDNI) and Montana Income Distri	ibution Deduction (MID	וח
1	Montana adjusted total income or (loss) from Form FID-3, line 20. If Montana adjusted total income AND the total Form FID-3, line 4 are losses, use the smaller loss	from	00
2a	Add: Federal tax exempt income (gross)	0.0	
2b	Less: Expenses allocated to federal tax exempt income	00	
2c	Add: Income from federal obligations that is tax exempt for Montana	0.0	
2d	Less: Expenses allocated to income from federal obligations that are tax exempt for Montana	0.0	
2e	Add: Expenses allocated to non-Montana municipal income taxable to Montana	00	
2f	Less: Non-Montana municipal income taxable to Montana	0.0	
2	Montana adjusted tax exempt interest income	100	00
3a	Enter the amount from federal Form 1041, Schedule B, line 3	00	1001
3b	Enter the amount from federal Form 1041, Schedule B, line 4	00	
3с	Enter the amount from federal Form 1041, Schedule B, line 5	0.0	
3	Total net capital gains. Add lines 3a through 3c		0.0
4	If the amount on Form FID-3, line 4 is a gain, enter as a negative number. If the amount on Form FID-3, line 4 is a enter the loss as a positive number.		00
5	Montana distributable net income. Combine lines 1 through 4. If zero or less, enter zero	5	00
6	If a complex trust, enter the accounting income for the tax year as determined under the governing instrument	00	
7	Income required to be distributed currently	7	00
8	Other amounts paid, credited or otherwise required to be distributed	8	00
9	Actual total distributions for the year. Add lines 7 and 8	9	00
10	Tax exempt income included in actual distributions included on line 9	10	00
11	Tentative income distribution deduction based on actual distributions. Subtract line 10 from line 9	11	00
12	Tentative income distribution deduction. Subtract line 2 from line 5. If zero or less, enter zero	12	00
13	Montana income distribution deduction. Enter the smaller of line 11 or line 12 and on Form FID-3, line 21. If ze enter zero	ero or less,	00

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Schedule D - Beneficiaries and Montana Income Distributions

List name and address of each beneficiary receiving distributions reported on Form FID-3, line 21. If more than 10 beneficiaries, see instructions.

	A		В	С	D	
	Beneficiary Information: Name Street Address City State Zip Code	lde	entification Number	Residency Status	Montana Incon Distribution Rece by Benefician	eived
1				Resident		
		SSN		Resident part-year		
		FEIN		Nonresident		00
2				Resident		
		SSN		Resident part-year		
		FEIN		Nonresident		00
3				Resident		
		SSN		Resident part-year		
		FEIN		Nonresident		00
4				Resident		
		SSN		Resident part-year		
		FEIN		Nonresident		00
5				Resident		
		SSN		Resident part-year		
		FEIN		Nonresident		00
6				Resident		
		SSN		Resident part-year		
		FEIN		Nonresident		00
7				Resident		
		SSN		Resident part-year		
		FEIN		Nonresident		00
8				Resident		
		SSN		Resident part-year		
		FEIN		Nonresident		00
9				Resident		
		SSN		Resident part-year		
		FEIN		Nonresident		00
10				Resident		
		SSN		Resident part-year		
		FEIN		Nonresident		00
				Total		00

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	Schedule E – Capital Gains Tax Credit Cal	culation	
1	Enter the capital gain or (loss) from Form FID-3, line 4	1	00
2	Enter the net capital gains reported on federal Form 1041, Schedule D, Part III, line 19 column (1)	Beneficiaries2	00
3	Subtract line 2 from line 1. Net capital gains eligible for the credit	3	00
4	If line 3 is greater than \$0, multiply line 3 by 2% (.02). If line 3 is less than or equal to \$0, enter \$0.	Allowable capital	

Schedule F - Nonresident/Resident Part-Year Estate and Trust Tax

		A Total income	B Montana source income included in column A
1	Interest income1	0.0	00
2	Ordinary dividends2	00	0.0
3	Business income or (loss)3	00	0.0
4	Capital gain or (loss)4	00	0.0
5	Rental real estate, royalties, partnerships, S corporations, other estates and trusts, etc5	00	00
6	Farm income or (loss)6	00	00
7	Ordinary gain or (loss)7	00	00
8	Other income8	00	0.0
9	Interest and mutual fund dividends from other states' state, county or municipal bonds9	00	00
10	Dividends not included in total federal income10	00	0.0
11	Taxable federal refund11	00	00
12	Other recoveries of amounts deducted in earlier years that reduced Montana taxable income	00	00
13	Other additions	00	00
14	Add lines 1 through 13 and enter the result here. Column B is the estate or trust's Montana source income	00	00
15	Divide the amount in column B, line 14 above by the amount in column A, line 14 above and er decimal places and do not enter more than 1.000000		
16	Enter the resident tax after capital gains tax credit reported on Form FID-3, line 28	16	00
17	Multiply the tax on line 16 by the percentage on line 15 and enter here and on Form FID-3, line nonresident/resident part-year tax after capital gains tax credit		00

Schedule F applies to nonresident and resident part-year estates and trusts only. The fiduciary will use this schedule to compute the ratio of Montana source income to total income. This ratio is then multiplied by the resident tax from FID-3, line 28 to determine the nonresident or resident part-year tax to be reported on FID-3, line 28a.

Column A - Enter on lines 1 through 13 the total income from FID-3, lines 1 through 8 and Schedule A (see instructions).

Column B – Enter on lines 1 through 13 the Montana source income from FID-3, lines 1 through 8 and Schedule A (see instructions).

How does a nonresident estate or trust determine its Montana source income?

For further information and a line-by-line description of Montana source income, refer to Form FID-3, Schedule F instructions beginning on page 10.

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	Schedule G – Electing Small Business Trus	t Tax Calculation	
1	Total federal adjusted ESBT income (include federal schedule)	1	00
2a	Montana additions to ESBT income (include statement)2a	00	
2b	Montana deductions to ESBT income (include statement)	00	
2	Subtract line 2b from 2a	2	00
3	Add lines 1 and 2. Montana adjusted ESBT income.	3	00
4	Tax from tax table. If line 3 is zero or less, enter zero	4	00
5a	Net capital gains reported on line 35a	00	
5	Multiply line 5a by 2%. Capital gains tax credit.	5	00
6	Subtract line 5 from line 4. If zero or less, enter zero. Resident tax after capital gains tax cre	edit6	00
	If a resident or resident part-year trust, complete lines 7a and 7. If a nonresident trus	st, skip lines 7a and 7.	
7a	Enter the total credit for income taxes paid to another state or country (see instructions)7a	00	
7	Subtract line 7a from line 6	7	00
	If a nonresident or resident part-year trust, complete lines 8a through 8c and 8. If a resident and 8.	trust, skip lines 8a through 8c	
8a	Enter the amount from lines 1 and 2a8a	00	
8b	Enter the Montana source income reported on line 3. Include Montana Schedule(s) K-18b	00	
8c	Divide the amount on line 8b by the amount on line 8a (round to 6 decimal places)8c		
8	Multiply the amount on line 8c by line 6 if a nonresident trust. Multiply the amount on line 8c by trust. Nonresident or resident part-year trust tax after capital gains tax credit		00
9	Tax on lump sum distributions	9	00
10	Endowment credit recapture tax	10	00
11	Other nonrefundable credits. List credit form(s)	11	00
12	If a resident trust, add lines 7, 9 and 10. If a nonresident or resident part-year trust add lines 8	through 10. Subtract line 11	

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Schedule H – Reporting of Special Transactions
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Complete Schedule H only if the estate or trust filed any of the federal income tax forms described below. Mark the appropriate box indicating which form the estate or trust filed with the Internal Revenue Service for this tax year. If your answer is "Yes" to one or more of these forms, include a complete copy of the federal Form 1041

104	1.
1	The estate or trust filed federal Form 8918 – Material Advisor Disclosure Statement with the Internal Revenue Service
2	The estate or trust filed federal Form 8824 – Like-Kind Exchanges with the Internal Revenue Service
	NOTE: Mark the box if the like-kind exchange includes Montana property. Nonresidents do not have to report a like-kind exchange if the properties involved do not include Montana property.
	Use Form 8824 to report each exchange of business or investment property for property of a like kind.
3	The estate or trust filed federal Form 8865 – Return of U.S. Persons With Respect to Certain Foreign Partnerships with the Internal Revenue Service
	Use Form 8865 to report the information required under 26 USC 6038 (reporting with respect to controlled foreign partnerships), section 6038B (reporting of transfers to foreign partnerships), or section 6046A (reporting of acquisitions, dispositions, and changes in foreign partnership interest).
4	The estate or trust filed federal Form 8886 – Reportable Transaction Disclosure Statement with the Internal Revenue Service
	Use Form 8886 to disclose information for each reportable transaction in which the estate or trust participated.