Form PTE

2021 Montana Pass-Through Entity Tax Return Include a complete copy of all related federal forms and schedules.



/	No	1
(St	aple	s)
/		/

Partnership S corporation

Page		or calendar year 2021 c	or tax year beginning			and ending				
	all that apply:	Name				E 1 15 :	_	FEIN		
	nitial return	NA 'II' A L L				Federal Busin				
	inal return	Mailing Address					-	of State ID #		
	mended return		04-4- 710.0	1		Date of Registr				
	Refund return	City	State ZIP C	oae + 4		State formed	ın	on		
F	TP									
Ente	er Number of:	Schedules K-1 Included			dent Owners			Schedules D		
		Resident Owners	Ot	her Type	s of Owners		S	schedules K-1	I Received	
	Owners' Dist	tributive Share of Income Items	s (federal Schedule K)							
	1 Ordinary b	ousiness income (loss)						1		0.0
	2 Net rental	real estate income (loss) (include fe	ederal Form 8825)					2		00
	3a Other gros	ss rental income (loss)			3a		00			
	3b Expenses	from other rental activities (include	detailed statement)		3b		00			
	3 Subtract li	ne 3b from line 3a.		This is	your other net ren	ntal income or los	SS.	3		0.0
	4 Guarantee	ed payments (partnerships only)						4		0.0
	5 Interest in	come						5		0.0
_	6 Ordinary of	dividends						6		0.0
Federal Schedule K	7 Royalties							7		0.0
Jed		term capital gain (loss) (include fede						8		0.0
SC		erm capital gain (loss) (include fede	,					9		0.0
eral		n 1231 gain (loss) (include federal F	,					10		0.0
Fed		ome (loss) (include detailed stateme	ent)					11		0.0
		1 through 11 and enter result.			is is your total fede	eral income or lo	SS.	12		0.0
		ributive Share of Deduction Ite	•	lule K)						
		79 deduction (include federal Form	4562)		13a		00			
	13b Contribution				13b		00			
		nt interest expense			13c		00			
		9(e)(2) expenditures (include detaile	,		13d		00			
		luctions (include detailed statement)			13e		00			
		13a through 13e and enter result.			This is your total			13		0.0
		ne 13 from line 12.		This is	your federal incon	ne from all source		14		0.0
		additions to the PTE's apportionable			10			15		00
		subtractions from the PTE's apportion			16a		00			
		ywhere income (loss) from federal S			16b		00			
a)		ywhere income (loss) from disregar			16c		00			
) O		apportionable income (loss) from th			16d		00	40		0.0
<u>2</u>		16a through 16d.	This is your dec	ductions	including nonapp	ortionable incon		16		0.0
낊		14 and 15, then subtract line 16.						17		00
Sol		e I not required. (See instructions)			0/			40		0.0
ana		loss) apportioned to Montana. N			%			18		00
Montana Source Income		tana source income received from p	-		10-		0.0			
Σ		source income from MT Schedules	- '		19a		0.0			
		tana source income from Schedule			19b		0.0			
		tionable income allocated to Montal	,	outional	19c		00	10		0.0
		19a through 19c.	This is the total nonappe					19		0.0
	ZU Add lines	18 and 19; enter result.		ınıs	is your total Monta	ana source incon	ie.	20		0.0



Form F	PTE, Page 2 – 2021		FEIN			
PTE Liability	 21 Enter your total composite tax from Schedu 21a Enter the PTE's tax liability resulting from a 22 Enter the sum of pass-through withholding 	n adjustment to partnership income. (See in from all owners' MT Schedules K-1, Part 5,			21 21a 22	00
Withholding	 23a Total Montana mineral royalty tax from MT federal Forms 1099 received by the PTE 23b Mineral royalty tax allocated to owners on the Subtract line 23b from line 23a. 24a Total Montana pass-through withholding from Montana pass-through withholding allocated Part 5, line 3b 	heir MT Schedules K-1, Part 5, line 4 2 This is the amount of Montana minera om MT Schedules K-1 received 2 did to owners on their MT Schedules K-1,	3a 3b I royalty tax tha 4a 4b	0 0 0 0 t the PTE can claim.	23	00
yments	 25 Add lines 23 and 24. 26a 2020 overpayment applied to 2021 26b 2021 estimated payments 26c 2021 tentative payments 	2 2	-		25	00
Return Payments	26d For amended returns only – payments mad 26e For amended returns only – previously issu 26 Add lines 26a through 26d, then subtract line 27 Add lines 21, 21a, and 22, then subtract line 28a PTE information return late filing penalty	ued refunds. (See instructions) 2 ne 26e. es 25 and 26. Th i	-	0 0 otal return payments. at due or (overpaid).	26 27	00
Penalties and Interest	28b Interest on underpayment of estimated con 28c Composite income tax return late filing pen- 28d Late payment penalty 28e Interest	alty 2 2 2	8b 8c 8d 8e	0 0 0 0 0 0 0 0		0.0
Amount Owed or Refund	 Add lines 28a through 28e. Add lines 27 and 28 If line 29 results in an amount due, enter it l <i>Why not e-pay? See your optio</i> If line 29 results in an overpayment, enter it Enter the amount from line 31 that you wan 	nere. ns at MTRevenue.gov. If writing a character. This is your overpa	This is the a	nalties and interest. amount you owe. ► nyable to MONTANA s a positive number.	29 30 DEPART 31	0 0 0 0 0 0 TMENT OF REVENUE.
	33 Subtract line 32 from line 31 and enter the a	amount here.	Th	is is your refund. ▶	33	00
You l Comp		2. ACC eposit, you are required to mark on bing to an account that is located on	ne box. ▶	Checking United States or it		vings ories, mark here.
to the	er penalties of false swearing, I declar be best of my knowledge and belief, it i ture of Officer	s true, correct, and complete.	n, including a		nedules	s and statements, and Telephone Number
	Гуре Preparer's Name s Name	Preparer's Signature Firm's Address		Date MMMDDDY Telephone Num	y y l	PTIN Y Firm's FEIN



If you allow the DOR to discuss this tax return with your tax preparer, mark here.

Schedule I - Apportionment Factor for Multistate Pass-Through Entities

er amounts in columns A and B. Enter percentages in colum		A. Everywhere B.	Montana.	C. Fact
Property Factor: Use average value for real and tangible personal property				
1a Land	1a	00		0.0
1b Buildings	1b	00		0.0
1c Machinery	1c	00		0.0
1d Equipment	1d	00		0.0
1e Furniture and fixtures	1e	00		0 0
1f Leases and leased property	1f	00		0.0
1g Inventories	1g	00		0 0
1h Depletable assets	1h	00		0.0
1i Supplies and other	1i	00		0 0
1j Multiply amount of rents by 8 and enter result	1j	00		00
1k Total Property Value. Add lines 1a through 1j	1k	00		00
Divide the total in column B by the total in column A. Multiply the result by 100.		This is your property	factor. 1	
Payroll Factor:				
2a Compensation of officers	2a	00		00
2b Salaries and wages	2b	00		00
Payroll included in:				
2c Costs of goods sold	2c	00		00
2d Other expenses and deductions	2d	00		00
2e Total Payroll Value. Add lines 2a through 2d.	2e	00		00
Divide the total in column B by the total in column A. Multiply the result by 100.		This is your payrol	I factor. 2	
Gross Receipts Factor:				
3a Gross Receipts, less returns and allowances	3a	00		
3b Receipts delivered or shipped to Montana purchasers:				
(1) Shipped from outside Montana		3b(1)		00
(2) Shipped from within Montana		3b(2)		0 0
3c Receipts shipped from Montana to:				
(1) United States government		3c(1)		00
(2) Purchasers in a state where the taxpayer is not taxable		3c(2)		00
3d Receipts other than receipts of tangible personal property (e.g., service in	come)	3d		00
3e Net gains reported on federal Schedule D and Form 4797	3e	00		0.0
3f Other gross receipts (rents, royalties, interest, etc.)	3f	00		0.0
3g Total Receipts Value. Add lines 3a through 3f.	3g	00		0.0
Divide the total in column B by the total in column A. Multiply the result by 100.	_	This is your receipts	factor. 3	
For tax years beginning after June 30, 2021, enter the amount reported on line				
Add the percentages from lines 1, 2, 3, and 4 in column C.	`	This is the sum of your f		
Divide the total percentage from line 5, column C, by the number of factors that	at can be in	•		
If a property, payroll, or receipts factor is 0%, it is included in the calculation for				
		This is your apportionment	t factor. 6	

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Schedule II – Montana Pass-Through Entity Tax Credits Type of Credit **Amount of Credit** 1 Dependent care assistance credit (include Form DCAC) 00 1 00 2 2 College contribution credit (include Form CC) 3 Health insurance for uninsured Montanans credit (include Form HI) 3 00 00 4 Recycle credit (include Form RCYL) 4 5 Alternative energy production credit (include Form AEPC) 5 00 6 Contractor's gross receipts tax credit. If the entity reports multiple CGR accounts, mark here. CGR account id: 00 6 CGR 7 Alternative fuel credit (include Form AFCR) 7 00 8 Infrastructure user fee credit (include Form IUFC) 8 00 9 Historic property preservation credit (include federal Form 3468) 9 00 10 Mineral and coal exploration incentive credit (include Forms MINE-CERT and MINE-CRED) 00 10 00 11 Empowerment zone credit 11 00 12 Biodiesel blending and storage credit (include Form BBSC) 12 13 Innovative educational program credit 13 00 14 Student scholarship organization credit 14 00 15 00 15 Emergency lodging credit (include Form ELC) 00 16 Unlocking public lands credit 16 17 00 17 Apprenticeship tax credit 18 Media credit (include Form MEDIA-CLAIM and all supplemental information with Montana Schedules K-1) 18 00 19 Trades education and training credit 19 00 Amount of **Credit Recapture** Type of Credit Recapture 20 00 20 Historic property preservation credit recapture 00 21 21 Biodiesel blending and storage credit recapture 22 Oilseed crushing and biodiesel/biolubricant production credit recapture 22 00 When attributing any credit or credit recapture from a PTE to its owners, use the same proportion the PTE used to report each owner's income or loss for Montana tax purposes. Include a detailed breakdown that shows each owner's share of the credit or credit recapture.

Use Montana Schedule K-1 to notify each owner of the amount of credit available to the owner.

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Schedule IV – Montana Composite Income Tax Schedule

Part I. Eligible Participating Owners

Enter the number of eligible participating owners. See instructions for more information about eligible participants.

Part II. Composite Tax Ratio	1	2	3
Use the amount in column 3	Enter the amount from	Enter the amount from	Divide column 2 by
to complete the calculation	page 1, line 14	page 1, line 20	column 1 Do not enter more
in column H below.	of this form.	of this form.	than 1.000000.
	00	0.0	

Part III. Enter the required information and amounts for each eligible participant in columns A – H.

	Α	В	С	D	Ε	F	G	Н
	Name	Social Security Number or Federal Employer Identification Number	Owner's share of federal income from entity	Standard deduction	Exemption \$2,580	Montana taxable income – Subtract columns D and E from column C.	Enter the appropriate tax from the tax table below.	Montana composite income tax. Multiply column G by composite tax ratio from Part II.
1			0.0	00	00	00	0.0	00
2			00	00	00	00	0.0	00
3			0.0	00	00	00	0.0	00
4			00	00	00	00	0.0	00
5			0.0	00	0.0	00	0.0	00
6			0.0	00	00	00	0.0	00
7			0.0	00	00	00	0.0	00
8			0.0	00	00	00	0.0	00
9			00	0.0	00	00	0.0	00
10			00	0.0	00	00	0.0	00
				11 Enter th	e total comp	oosite tax from all addi	tional pages, if used	00
Add column H, lines 1 through 11. This is your total composite income tax liability.								

Transfer the amounts from column H to each owner's Montana Schedule K-1, Part 5, line 2.



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If additional space is needed, make copies of this page. Include all additional pages from line 11 with the tax return.

If Your Taxable Income Is More Than	But Not More Than	Multiply Your Taxable Income By	And Subtract	This Is Your Tax
\$0	\$3,100	1% (0.010)	\$0	
\$3,100	\$5,500	2% (0.020)	\$31	
\$5,500	\$8,400	3% (0.030)	\$86	
\$8,400	\$11,400	4% (0.040)	\$170	
\$11,400	\$14,600	5% (0.050)	\$284	
\$14,600	\$18,800	6% (0.060)	\$430	
More than \$18,800		6.9% (0.069)	\$599	

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Schedule VI – Reporting of Special Transactions Complete Schedule VI only if your PTE filed any of the feder box indicating which form(s) you filed with the Internal Rever one or more of these forms, you must include a complete co	nue Service (IRS) for this tax year. If your answ	
1 The entity filed federal Form 8918 – Material Advisor	Disclosure Statement with the IRS	Yes
2 The entity filed federal Form 8824 – Like-Kind Excha NOTE: Mark the box if your like-kind exchange include	<u> </u>	Yes
3 The entity filed federal Form 8865 – Return of U.S. P Partnerships with the IRS	ersons with Respect to Certain Foreign	Yes
4 The entity filed federal Form 8886 – Reportable Tran	saction Disclosure Statement with the IRS	Yes
5 For S corporations only: The S corporation filed federa for Corporations Making Qualified Stock Purchase		Yes
Complete this section if	the PTE is a partnership.	
6 Mark the box if the partnership filed one or more of the Provide a copy of each form with your tax return. • Federal Form 8985, Pass-Through Statement - Trans • Federal Form 8986, Partner's Share of Adjustment(s) • Federal Form 8082, Notice of Inconsistent Treatment 7 Mark the box if the partnership had Montana source in If applicable, provide a copy of your federal audit adjusted.	smittal/Partnership Adjustment Tracking Repo) to Partnership-Related Items(s) t or Administrative Adjustment Request (AAR) acome and paid an imputed underpayment.	
Complete this section if you made	a disbursement to a related party.	
8 During this tax year, the entity made payments to a (excluding salary compensation) that exceeded \$1 If you answered "Yes" to this question, please provide number of each related party below and the amount the Name	the name and federal employer identification at you paid to each related party: FEIN Amount of Payment	
		00
		00
		00
		00
		00
		00
		00
		00
		00
		20



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Schedule VII – List of Disregarded Entities (DE)

Ochedule VI	A	- <i>)</i> B	С	D	Е	F	G	Н	I
	Name	FEIN	Montana SOS Registration Number	LLC	Q Sub	If Q Sub, enter election date	DE has multistate activities	DE is a segment of the PTE	Montana Source Income from DE's own activities
1									00
2									00
3									00
4									00
5									00
6									00
7									00
8									00
9									00
10									00
11									00
12									00
13									00
14									00
								15 Total	00

Schedule DE – Disregarded Entity Montana Source Income

File this schedule for all disregarded entities that must report Montana source income.

Do not file this schedule for disregarded entities that only receive flow-through income or are considered segments. (See instructions.)

Complete the Everywhere column first. If the income reported on line 17 includes apportionable income, then mark the box and calculate the apportionment factor.

Use the apportionment factor to calculate your Montana source income. If line 17 includes nonapportionable income, report it on the applicable line in the Montana column.

Disregarded Entity Name Disregarded Entity FEIN Everywhere 1a 00 1a Gross income **Business Income** 1b Returns and allowances 1b 00 00 1c Balance. Subtract line 1b from line 1a. 1c 1d Cost of goods sold (provide statement) 1d 00 1e Gross profit. Subtract line 1d from line 1c. 00 1e 1f Other income including gains (provide statement) 1f 00 1g Add lines 1e and 1f. This is your total income. 00 1g 1h 00 1h Wages **Deductions** 1i Rent 1i 00 00 1j 1j Other deductions (provide statement) 1k Add lines 1h through 1j. This is your total deductions. 1k 00 Montana 1 Subtract line 1k from line 1g. This is your total income from trade or business. 1 00 00 2 00 00 2 Net rental real estate income (loss) 3 00 00 3 Other net rental income (loss) 3 4 00 4 Guaranteed payments (partnerships only) 00 4 5 00 5 Interest income 00 5 6 Ordinary dividends 6 00 6 00 Other Income 7 00 7 Royalties 00 8 00 00 8 Net short-term capital gain (loss) (include federal Schedule D) 8 9 9 Net long-term capital gain (loss) (include federal Schedule D) 00 9 00 10 00 10 Net section 1231 gain (loss) (include federal Form 4797) 00 10 11 Other income (loss) (include detailed statement) 11 00 11 00 12 00 12 00 12 Section 179 deduction (include federal Form 4562) 13 00 13 00 13 Other deductions (include detailed statement) 00 14 Add lines 1 through 11, then subtract lines 12 and 13 14 00 14 00 15 Montana additions to income 15 00 15 16 Montana subtractions from income 16 00 16 00 17 Add lines 14 and 15, then subtract line 16. **Total** 17 00 17 00 Mark this box if some income is apportionable. 00 1a Everywhere property 1a 1b 00 1b Montana property 1 Divide line 1b by line 1a. This is your Property factor. % 2a 00 2a Everywhere payroll Apportionment Factor 00 2b Montana payroll 2b % 2 Divide line 2b by line 2a. This is your Payroll factor. 3a Everywhere receipts 3a 00 3b Montana receipts 3b 3 Divide line 3b by line 3a. This is your Receipts factor. % 3 4 For tax years beginning after June 30, 2021, enter the amount reported on line 3. Otherwise, leave blank. 4 % 5 Add the percentages from lines 1, 2, 3, and 4. 5 % This is the sum of your factors. 6 Divide the total percentage from line 5 by the number of factors that can be included in the calculation. If a property, payroll, or receipts factor is 0%, it is included in the calculation for line 6 if there is a value in the "Everywhere" column.



This is your Apportionment factor.

%

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Montana Adjustments Worksheet

		Α	В	С	D	E
Montana Additions to Everywhere Income	Code	PTE's Apportionable Activities	Nonapportionable Income	From MT Schedules K-1, Part 3, Column I (See instructions)	From Schedules DE, Everywhere column, lines 15 and 16	Total Everywhere Adjustments
		00	00	00	0 0	
		00	00	00	0 0	
		0.0	00	00	0 0	
		00	00	00	0.0	
		00	00	00	0 0	
		00	00	00	00	
Montana Subtractions	Total	00	00	00	00	
to Everywhere Income						
		00	00	00	00	
		00	00	00	00	
		00	00	00	00	
		00	00	00	00	
		00	00	00	00	
		00	00	00	00	
	Total	00	00	00	00	
				From MT Schedules K-1,	From Schedules DE, Montana	Total Montana Source
Montana Source Additions	Code	PTE's Apportionable Activities	Nonapportionable Income	Part 3, Column II	column, lines 15 and 16	Income Adjustments
		00	00	00	00	
		00	00	00	00	
		00	00	0.0	00	
		0.0	00	0.0	0.0	
		0.0	00	0.0	0.0	
		0.0	0.0	0.0	0.0	
	Total	0.0	0.0	0.0	0.0	
Montana Source Subtractions						
		00	00	00	00	
		00	00	0.0	0.0	
		0.0	00	0.0	00	
		00	00	0.0	0.0	
		00	00	00	00	
					00	
		00	00	00	()()	

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Montana Source Income Schedule

		Α	В	С	D	E
					Montana Source income	
Sum of Montana source income		Montana Source Income from	Montana Source Income from	Montana Source Income from	from PTE's apportionable	Total of columns
per item of income (loss) and deduction.		Montana Schedules K-1	Schedules DE	Nonapportionable income	activities	A through D
1 Ordinary business income (loss)	1	00	00	00	0 0	00
2 Net rental real estate income (loss)	2	00	00	00	0 0	00
3 Other net rental income (loss)	3	00	00	00	0 0	00
4 Guaranteed payments	4	00	00	00	0 0	00
5 Interest income	5	00	00	00	0 0	00
6 Ordinary dividends	6	00	00	00	0 0	00
7 Royalties	7	00	00	00	0 0	00
8 Net short-term capital gain (loss)	8	00	00	00	0 0	00
9 Net long-term capital gain (loss)	9	00	00	00	0 0	00
10 Net §1231 gain (loss)	10	00	00	00	0 0	00
11 Other income (loss).	11	00	00	00	0 0	00
12 §179 expense deduction apportionable						
and/or allocable to Montana	12	0.0	00	00	0 0	00
13 Other expense deductions apportionable						
and/or allocable to Montana	13	0.0	00	00	0 0	00
14 Total Montana Source Income	14	00	00	00	00	00

Montana Schedule K-1

(PTE)

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2021, or tax year beginning MMDDYYYYY and ending MMDDYYYYY

	Mark applicable boxes: Amended Schedule	K 1	Final Schedul	o K 1			
on	Pass-through Entity's Name						
- nati	1 ass allough Entity s Name	FEIN					
Part 1 nform	Mailing Address						
n Pa	3 11 11						
Part 1 PTE Information	City	State	Э	ZIP C	ode		
ь.							
_	Name					FEIN OR	
ţi	Mailing Address					SSN	
na T	ivialility Address	Beneficial owner					
Part 2 Inform	City	State	9	ZIP C	ode	FEIN	
r Pa	J.,	01.01		0		or SSN	
Part 2 Owner Information	Owner Type Resident No.	nresident		Th	e owner is included in a compo	site income tax return	
õ		l loss percentage	9/				
	The owner filed Form PT-AGR Year				С	apital/Ownership	9/
					_	II	
Part 3 Adj.	Montana Adjustments (See worksheet on	page 9)		4	Everywhere	Montan	
Par Ac	1 Additions 2 Subtractions			1 2	00		00
	Distributive Share of Montana Source Inc	rome (Lo	ice)	2	0.0	0	0.0
	1 Ordinary business income (loss)	JOINE (LC	,33)	1	0.0	0	0.0
	2 Net rental real estate income (loss)			2	0(0.0
i i	3 Other net rental income (loss)			3	0(0.0
ည	4 Guaranteed payments			4	0.0	0	0.0
Part 4 Montana Source Income	5 Interest income			5	0.0	0	0.0
Part 4 Source	6 Ordinary dividends			6	0.0	0	0.0
Pal	7 Royalties			7	0.0	0	0.0
na	8 Net short-term capital gain (loss)			8	00		0.0
nta	9 Net long-term capital gain (loss)			9	0.0		0.0
ě	10 Net section 1231 gain (loss)			10	0(0.0
	11 Other income (loss) (include detailed statement)			11	00		0.0
	12 Section 179 expense deduction 13 Other expense deductions			12 13	00		00
	Supplemental Information			13	0.0	0	0.0
	1 Owner's share of Montana source income (loss)					1	0.0
e U	Montana composite income tax paid on behalf of owner	2	0.0				
t 5 atio	3a Montana income tax withheld on behalf of owner. (See	3a	0.0				
Part 5 Informati	3b Montana income tax withheld by a lower tier pass-through	3b	0.0				
_ <u>n</u>	3c Add lines 3a and 3b.	his is you	r total Montan	a incom	ne tax withheld on your behalf.	3c	0.0
	4 Montana mineral royalty tax withheld					4	0.0
	5 Other information. List type		and amount	5	0.0	0	0.0
o &	Tax Credits and Recapture						
Part 6 Tax Credits	1 Contractor's gross receipts tax credit. If multiple CGR a		ark here.			1	0.0
چ ر ي	CGR Account ID				C G R	0	0.0
	2 Other credit/recapture information. List type Montana Adjustments Detail: Enter the amo	unt and cod	do of each adiu	etmont c	and amount	2	0.0
96	1 Code 00	2 Code		ou n o n t	0.0 3 Code	13)	0.0
ر ٿي	4 Code 00	5 Code			00 6 Code		0.0
Part 7 PTE Use	7 Code 00	8 Code			00 9 Code		0.0
4	10 Code 0 0	11 Code			00 12 Code		0.0

