

Form CLT-4S

2016 Montana S Corporation Information and Composite Tax Return

Include a complete copy of the federal Form 1120S and all related forms and schedules.

For calendar year 2016 or tax year beginning

D2016

and ending

S

Name		FEIN — —
		Enter number of:
Mailing Address		Schedules K-1 included
		Resident shareholders
City	State Zip Code + 4	Nonresident shareholders
		Other types of shareholders
on M M D D Y Y Y Y	Federal Business Code/NAICS	
D#	Foreign S corporations: date S corpor certificate of authority from Montana S	
	Mailing Address City	Mailing Address City State Zip Code + 4 on M D D Y Y Y Federal Business Code/NAICS D #

Shareholders' Pro Rata Share of Income Items (Form 1120S, Schedule K)

1. Ordinary business income (loss)	1.	00
2. Net rental real estate income (loss) (include federal Form 8825)	2.	00
3. a. Other gross rental income (loss)	00	
b. Expenses from other rental activities (include detailed statement)	00	
c. Subtract line 3b from line 3a. This is your other net rental income or loss.	3c.	00
4. Interest income	4.	00
5. Ordinary dividends	5.	00
6. Royalties	6.	00
7. Net short-term capital gain (loss) (include federal Schedule D, Form 1120S)	7.	00
8. Net long-term capital gain (loss) (include federal Schedule D, Form 1120S)	8.	00
9. Net section 1231 gain (loss) (include federal Form 4797)	9.	00
10. Other income (loss) (include detailed statement)	. 10.	00
11. Add lines 1 through 10 and enter result. This is your total federal income or loss.	11.	00
Shareholders' Pro Rata Share of Deduction Items (Form 1120S, Schedule K)		
12. a. Section 179 deduction (include federal Form 4562)	12a.	00
b. Contributions	12b.	00
c. Investment interest expense	12c.	00
d. Section 59(e)(2) expenditures (include detailed statement)	12d.	00
e. Other deductions (include detailed statement)	12e.	00
13. Add lines 12a through 12e and enter result. This is your total federal deductions.	. 13.	00
14. Subtract line 13 from line 11. This is your federal income from all sources	. 14.	00
Shareholders' Pro Rata Share of Montana Additions and Deductions to Income		
15. a. Interest and dividends not taxable under the Internal Revenue Code	00	
b. Taxes based on income or profits	00	
c. Other additions (include a detailed statement)	00	
Add lines 15a, 15b, and 15c; enter result. This is your total Montana additions to income	. 15.	00
16. a. Interest on U.S. government obligations (include detailed statement)	00	
b. Deduction for purchasing recycled material (include Form RCYL)16b.	00	
c. Other deductions (include detailed statement)	00	
Add lines 16a, 16b, and 16c; enter result. This is your total Montana deductions to income	. 16.	00
17. Add lines 14 and 15, then subtract line 16 from that result	. 17.	00
Apportioned and Allocated Montana Source Income		
18. Income apportioned to Montana. Multiply line 17 X % (see instructions)	. 18.	00
19. Income allocated to Montana. Enter the income or loss allocated directly to Montana (see instructions)		00
20. Add lines 18 and 19; enter result. This is your total Montana source income.	. 20.	00



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Calculation of Amo	ount Owed o	r Refund			
21. Enter your Montana	total composite t	ax from Schedule III, column E			. 00
22. Enter the amount of	total pass-throu	h withholding from Schedule II	I, column F		. 00
Withholding					-
		vithheld on your behalf (see inst		00	
		uted to shareholders		00	
c. Subtract 23b from	n 23a. Montana	mineral royalty tax withheld	attributable to S cor	poration23c.	. 00
24. a. Total Montana pas	s-through withho	Iding paid on your behalf (see in	structions)24a.	00	
b. Montana pass-thr	ough withholding	g distributed to shareholders	24b.	00	
c. Subtract line 24b	from 24a. Monta	ana pass-through withholding	g attributable to S co	orporation24c.	. 00
25. Add lines 23c and 24	lc. This is the to	otal withholding payments at	tributable to S corpo	oration 25.	. 00
Return Payments					I
-	nt applied to 201	6	26a.	00	1
b. 2016 estimated pa	ayments		26b.	00	
c. 2016 extension pa	ayment			00	
d. For amended retu	ırns only—paym	ents made with original return.	26d.	00	
	• •	ously issued refunds (see instru	,	00	
	•	ubtract line 26e. This is your t	•••		
		nes 25 and 26f. This is your ar	nount due or (overp	aid)27.	. 00
Penalties and Interes	•	-			1
		te filing penalty		00	-
-	-	nated composite tax		00	
-		filing penalty		00	-
	•			00	-
		s your total penalties and inte			
Amount Owed or Ref	-	s your total penalties and int			00
				29	. 00
		nter it here. This is the amoun			
		ov. If writing a check, make it pa	-		
-	-	ter it here. This is your overpa	-		
	-	ou want applied to your 2017 co		00	
		er the amount here. This is yo u			. 00
Direct Deposit	1. RTN#	2	2. ACCT#		
Your Refund Complete 1, 2, 3 and 4	3. If using direct	t deposit, you are required to n	nark one box. ►	Checking	Savings
(see instructions).	4. Is this refund	going to an account that is locat	ed outside of the Unite	d States or its territ	ories? Yes No
		are that I have examined this re t is true, correct, and complete		npanying schedule	s and statements, and
Signature of Officer	<u> </u>	Date	Printed Name and Tit	le	Telephone Number
X					
Print/Type Preparer's Name	9	Preparer's Signature	Date	PT	ĪN
Firm's Name		Firm's Address	Telephon	e Number Fir	m's FEIN
Mark if you do not n	eed Mav t	ne DOR discuss this tax return	with your tax prepare	r?	Aark this box to receive
Form CLT-4S sent no		Yes No	,		our Montana extension.
		*16DX020	 		



Schedule I – Apportionment Factors for Multistate S Corporations Enter amounts in columns A and B. Enter percentages in column C. A. Everywhere B. Montana C. Factor 1. Property Factor: Use average value for real and tangible personal property. 00 00 00 00 1b. Buildings.....1b. 00 00 1c. Machinery.....1c. 1d. Equipment1d. 00 00 1e. Furniture and fixtures1e. 00 00 00 1f. Leases and leased property1f. 00 1g. Inventories......1g. 00 00 00 00 1h. Depletable assets.....1h. 1i. Supplies and other1i. 00 00 1j. Property of foreign subsidiaries included in combined unitary group 1j. 00 00 1k. Property of unconsolidated subsidiaries included in combined 00 00 unitary group1k. 00 00 11. Property of pass-through entities included in combined unitary group 11. 1m. Multiply amount of rents by 8 and enter result1m. 00 00 Total Property Value add lines 1a through 1m 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. % 2. Payroll Factor: 2a. Compensation of officers......2a. 00 00 2b. Salaries and wages......2b. 00 00 Payroll included in: 00 00 2c. Costs of goods sold......2c. 2d. Other expenses and deductions......2d. 00 00 2e. Payroll of foreign subsidiaries included in combined unitary group 2e. 00 00 2f. Payroll of unconsolidated subsidiaries included in combined unitary group2f. 00 00 2g. Payroll of pass-through entities included in combined unitary group 2g. 00 00 Total Payroll Value add lines 2a through 2g 00 00 Divide the total in column B by the total in column A. Multiply the result by 100. This is your payroll factor.2. % 3. Sales (Gross Receipts) Factor: 00 3b. Sales delivered or shipped to Montana purchasers: 00 00 3c. Sales shipped from Montana to: 00 00 00 3e. Net gains reported on federal Schedule D and federal Form 4797...3e. 00 00 00 00 3g. Sales (receipts) of foreign subsidiaries included in combined 00 00 3h. Sales (receipts) of unconsolidated subsidiaries included in combined unitary group......3h. 00 00 3i. Sales (receipts) of pass-through entities included in combined 00 00 00 00 00 Total Sales Value add lines 3a through 3j..... 00 % % 5. Divide the total percentage on line 4, column C, by the number of factors that can be included in the calculation. If there is a value in column A for a factor category (Property, Payroll or Sales), you should include this factor as part of the calculation (see instructions). Enter the results here and also insert on page 1, line 18 of this form. This is %



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Schedule II – Montana S Corporation Tax Credits

Тур	e of Credit	Amount of Credit
1.	Dependent Care Assistance Credit include Form DCAC	00
2.	College Contribution Credit include Form CC	00
3.	Health Insurance for Uninsured Montanans Creditinclude Form HI	00
4.	Recycle Credit include Form RCYL	00
5.	Alternative Energy Production Creditinclude Form AEPC	00
6.	Contractor's Gross Receipts Tax Credit. If multiple CGR accounts, mark here.	
	CGR Account ID:	00
7.	Alternative Fuel Credit include Form AFCR	0.0
8.	Infrastructure User Fee Credit include Form IUFC	00
9.	Historic Property Preservation Credit include federal Form 3468	00
10.	Mineral and Coal Exploration Incentive Credit include Forms MINE-CERT and MINE-CRED	00
11.	Empowerment Zone Credit	00
12.	Biodiesel Blending and Storage Creditinclude Form BBSC	00
13.	Innovative Educational Program Credit	00
14.	Student Scholarship Organization Credit	00
15.	Emergency Lodging Creditinclude Form ELC	00
16.	Unlocking Public Lands Credit	00
Тур	e of Credit Recapture	Amount of Credit Recapture
17.	Historic Property Preservation Credit Recapture	00
18.	Film Production Credit Recapture	00
19.	Biodiesel Blending and Storage Credit Recapture	00
20.	Oilseed Crushing and Biodiesel/Biolubricant Production Credit Recapture	00

When attributing any credit or credit recapture from an S corporation to its shareholders, use the same proportion the S corporation used to report each shareholder's income or loss for Montana tax purposes. Include a detailed breakdown that shows each shareholder's share of the credit or credit recapture.

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



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Schedule III – Montana S Corporation Information Summary Schedule and Supplemental Information

Complete columns A through D for all sharehold	lers			Befor on pa		E, F or G, read the ins	structions	
A	В	С	D		E	F	G	
Name Street Address or PO Box City State Zip Code	Entity Type (see codes below*) and Identification Number (FEIN or SSN)	Residency Code (R/N)	MT Pro Rata Share		nposite Income Tax from Schedule IV, column H)	Pass-Through Withholding (see instructions)	PT-AGR (year)	
1.	Entity Type	R						
	FEIN							
	SSN	N	00		00	00		
2.	Entity Type	R						
	FEIN	- R						
	SSN	□ N	00		00	00		
3.	Entity Type	R						
	FEIN	R		0.0				
	SSN		00		00	00		
4.	Entity Type	R						
	FEIN							
	SSN	N	0.0		00	00		
5.	Entity Type	R						
	FEIN							
	SSN	N	00		00	00		
6.	Entity Type	R						
	FEIN							
	SSN	N	00		00	00		
7.	Entity Type	R						
	FEIN							
	SSN	N	00		00	00		
8. Enter the totals of columns D, E and F from all pa	ges (see instructions)		00		00	00		

Transfer the total from column E to page 2, line 21 of this form. Transfer the total from column F to page 2, line 22 of this form. Include all additional pages from line 8 with the tax return.

*Column B Entity Type Codes:

E – Estate I – Individual TE - Tax-exempt entity T – Trust

If additional space is needed, make copies of this page.



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Schedule IV – Montana S Corporation Composite Income Tax Schedule

Part I. Eligible Participating Shareholders	Part II. Composite Tax Rat	io 1	2	3
Enter the number of eligible participating shareholders.	Use the amount in column to complete the calculation		Enter the amount from page 1,	Divide column 2 by column 1. Do not enter more than 1.000000.
See instructions for more information about eligible participating shareholders.	in column H below.	line 14 of this form.	line 20 of this form.	· .

Part III. Enter below in columns A through H the required information and amounts for each eligible participating shareholder.

	А	В	С	D	Е	F	G	н
	Name	Social security number or federal employer identification number	Shareholders' share of federal income from entity	Standard deduction	Exemption \$2,380	Montana taxable income – Subtract columns D and E from column C.	Enter the appropriate tax from the tax table below.	
1.			00	00	00	00	00	00
2.			00	00	00	00	00	00
3.			00	00	00	00	00	00
4.			00	00	00	00	00	00
5.			00	00	00	00	00	00
6.			00	00	00	00	00	00
7.			00	00	00	00	00	00
8.			0.0	00	00	00	00	00
9.			00	00	00	00	00	00
10.			00	00	00	0.0	00	00
11.	Enter the total composite tax fr	om all additional pages,	if used				11.	0.0
			Add colur	nn H, lines 1 thro	ugh 11. This is yo	our total composite	income tax liability.	0.0

Transfer the amounts from column H to page 5, Schedule III, column E.



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	\$2,900	1% (0.010)	\$0	
\$2,900	\$5,100	2% (0.020)	\$29	
\$5,100	\$7,800	3% (0.030)	\$80	
\$7,800	\$10,500	4% (0.040)	\$158	
\$10,500	\$13,500	5% (0.050)	\$263	
\$13,500	\$17,400	6% (0.060)	\$398	
	More Than \$17,400	6.9% (0.069)	\$555	

FEIN

Schedule VI – Reporting of Special Transactions

Complete Schedule VI only if your small business corporation filed any of the federal forms described below. Mark the appropriate box indicating which form(s) you filed with the Internal Revenue Service for this tax year. If your answer is "Yes" to one or more of these forms, you need to include a complete copy of your federal tax return Form 1120S.

1.	The S corporation filed federal Form 8918 – Ma Internal Revenue Service.	terial Advisor Disclosure Stat	ement with the	Y	⁄es		
	Material advisors to any reportable transactions	must file Form 8918.					
2.	The S corporation filed federal Form 8824 – Lik Service.	e-Kind Exchanges with the Int	ernal Revenue	Y	⁄es		
	NOTE: Mark the box if your like-kind exchange i have to report a like-kind exchange if the proper						
	Use Form 8824 to report each exchange of busi kind.	iness or investment property for	property of a like-				
3.	The S corporation filed federal Form 8865 – Re Foreign Partnerships with the Internal Revenu		spect to Certain	Y	⁄es		
	Use Form 8865 to report the information require controlled foreign partnerships), Section 6038B or Section 6046A (reporting of acquisitions, disp interest).	(reporting of transfers to foreign	partnerships)				
4.	The S corporation filed federal Form 8886 – Re with the Internal Revenue Service.	portable Transaction Disclos	ure Statement	Y	/es		
	Use Form 8886 to disclose information for each	reportable transaction in which	you participated.				
5.	The S corporation filed federal Form 8023 – Ele Making Qualified Stock Purchases with the In		Corporations	Y	/es		
	Use Form 8023 to report elections under IRC 338 made by a purchasing corporation for a target corporation in a qualified stock purchase (QSP). In the case of a target S corporation acquisition under IRC 338(h)(10), the election must be made by all of the shareholders of a target S corporation, including those who do not sell their stock in the event of a QSP transaction.						
	Complete this section if you r	nade a disbursement to a r	elated party.				
6.	During this tax year, the S corporation made (excluding salary compensation) that exceed		ated parties	Y	/es		
	If you answer "Yes" to this question, provide the of each related party below and the amount that						
	Name	FEIN	Amount of Payment				
			00				
			00				
			00				

