Form	n PTE	2023 N Inclu	Montana Pass-TI ude a complete copy of all r	nrough Entity related federal forms a	Tax Retui nd schedules.	'n	P
No Stap		F	Partnership	S corporation			
Page	1	For calendar year	2023 or tax year beginnir	MMDD2023	and ending		
Mark	all that apply:	Name	, ,		0	FEI	
Ir	nitial return				Federal Business	Code/NAIC	S
F	inal return	Mailing Address			MT Secretary	of State ID	#
A	mended return				Date of Registration		
F	Refund return	City	State ZIP	Code + 4	State formed in		
P	TP						
P	TET						
F	Resident PTET	Enter Number of:	Schedules K-1 Included	Nonresident Own	ers	Schedules	DE Included
			Resident Owners	Other Types of Own	ers	Schedules k	K-1 Received
	Owners' Dist	ributive Share of Income	Items (federal Schedule K)				
		usiness income (loss)	. ,			1	00
	2 Net rental	real estate income (loss) (inc	lude federal Form 8825)			2	00
		s rental income (loss)	,	3a	00)	
		from other rental activities (in	nclude detailed statement)	3b	00)	
		ne 3b from line 3a.	,	This is your other net re	ntal income or loss.	3	00
	4a Guarantee	ed payments: Services		4a	00)	
		ed payments: Capital		4b	00)	
	4 Add lines			This is your total gu	aranteed payments.	4	00
	5 Interest in	come		, ,		5	00
Federal Schedule K	6 Ordinary of	lividends				6	00
edu	7 Royalties					7	00
Sch		erm capital gain (loss) (includ	de federal Schedule D)			8	00
폡		erm capital gain (loss) (includ	,			9	00
ede	-	n 1231 gain (loss) (include fe				10	00
<u> </u>		me (loss) (include detailed st				11	00
		1 through 11 and enter result.		This is your total fed	leral income or loss.	12	00
			ion Items (include federal Sche				
		9 deduction (include federal	-	13a	00)	
	13b Contributio	()	13b	00)	
		t interest expense		13c	00		
		e)(e)(2) expenditures (include)	detailed statement)	13d	00		
		uctions (include detailed state	,	13e	00)	
		13a through 13e and enter re			I federal deductions.	13	00
		ne 13 from line 12.		This is your federal incor		14	00
	15 Montana a	additions to the PTE's apporti	onable activities	,		15	00
		subtractions from the PTE's a		16a	00		
		where income (loss) from fe		16b	00		
		where income (loss) from dis		16c	00		
e			from the PTE's own activities	16d	00		
COL		16a through 16d.		eductions including nonap			00
e II		14 and 15, then subtract line	-	J		17	00
Montana Source Income				Montana activity			
a Sc		oss) apportioned to Monta	-	%		18	00
Itan		ana source income received					50
Mon			edules K-1 issued to this entity)	19a	00)	
		ana source income from Sch	• ·	19b	00		
		tionable income allocated to I		19c	00		
		19a through 19c.	. ,	portionable income (loss) s			00
		18 and 19; enter result.		This is your total Mont			00
							5.0

Office Use Only

Date Received



2023v3 11/2023

ents	21 2023 payments	21	00
ayme	22 2022 overpayment applied to 2023	22	00
Prep	23 Add lines 21 and 22. Total prepayments	23	00
<u> </u>	24 Total taxable income subject to pass-through entity tax from all owners' MT Schedules K-1, Part 4, line 14 (see instructions)	24	00
' Tay	25 Total pass-through entity tax from all owners' MT Schedules K-1, Part 5, line 1	25	00
te T	26 Flow-Through Payments Schedule, Column A, line 12	26	00
h E oosi	27 Subtract lines 23 and 26 from line 25. Pass-through entity tax due or (overpayment)	27	00
duo 6no	28 Total composite tax from Schedule IV, Column H	28	00
d C th	29 Flow-Through Payments Schedule, Column B, line 12	29	00
ass an	30 Add lines 27 and 28, then subtract line 29. Composite tax and pass-through entity tax due or (overpayment)	30	00
L	31 Interest on underpayment of estimated tax (see instructions)	31	00
	32 Total pass-through withholding from all owners' MT Schedules K-1, Part 5, line 3a	32	00
ugn D	33 PTE's tax liability resulting from an adjustment to partnership income (see instructions)	33	00
2 2 2022 overpayment applied to 2023 2022 2022 2022 2022 2022 2022 202	00		
ss-T ithh	35 Add lines 32 and 33, then subtract line 34.		
N N	Pass-through withholding and other partnership liability due or (overpayment)	35	00
	36 PTE information return late filing penalty	36	00
	37 Add lines 30, 31, 35, and 36. Total PTE taxes with interest and/or penalty	37	00
ded			00
mender Return	39 For amended returns only - payments made with original return	39	00
		40	0.0

Am	Ř		40 Add lines 37 and 38, then subtract line 39.		40	00
₹		st	41 Late payment penalty		41	0 0
Penalty	and	itere	42 Interest		42	00
		2	43 Add lines 40 through 42.	Total tax, penalties, and interest	43	00
ved	0		44 If line 43 is more than zero, enter the amount here.	This is the amount you owe.	44	00
ð	itun		45 If line 43 is less than zero, enter the amount here.	This is your overpayment.	45	0 0
Amount Owed	Å,		46 Enter the amount from line 45 that you want applied to your 2024 tax		46	0 0
Am	0		47 Subtract line 46 from line 45.	This is your refund.	47	0 0

Direct Deposit				
Your Refund	1. RTN#	2. ACCT#		
Complete 1, 2, 3, and 4.	3. If using direct deposit, you are require	d to mark one box. 🕨	Checking	Savings
(See instructions)	4. If this refund is going to an account that	is located outside of the L	Jnited States or its t	erritories, mark here.

Under penalties of false swearing, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.								
Signature of Officer	Date	Printed Name and	d Title	Telephone Number				
X	MMDDY							
Print/Type Preparer's Name	Preparer's	Preparer's Signature		PTIN				
Firm's Name	Firm's Address		Telephone Number	Firm's FEIN				

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



Form PTE, Page 2 – 2023

FEIN	

Flow-Through Payments Schedule

Part I. Montana Schedules K-1 received by the pass-through entity reporting mineral royalty withholding, pass-through withholding, and/or pass-through entity tax. Attach a statement with the same information if the PTE received more than four Montana Schedules K-1 reporting mineral royalty withholding, pass-through withholding, and/or pass-through entity tax.

	Entity Name	FEIN	A. Mineral royalty withholding received	B. Pass-through withholding received	C. Pass-through entity tax received
1			00	00	00
2			00	00	00
3			00	00	00
4			00	00	00
		5 Totals	00	00	0 0

Part II. Flow-through payment allocations (See instruction	ıs)	Schedules K-1 subject to:					
		A. Pass-through entity tax	B. Composite tax	C. Other			
1 Sum of profit and loss percentage of all MT Schedules K-1 subject to applicable Column(s) A, B, and C	1	%	%	%			
2 Multiply total in Part I, Column A by percentage on line 1 for each column	2	00	00	00			
3 Mineral royalty withholding passed to owners	3			00			
4 Enter Column A, line 2 and Column B, line 2.							
Subtract Column C, line 3 from Column C, line 2.							
Balance of mineral royalty withholding the PTE can claim as a credit.	4	00	00	00			
5 Multiply total in Part I, Column B by percentage on line 1 for each column	5	00	00	00			
6 Pass-through withholding passed to owners	6			00			
7 Enter Column A, line 5 and Column B, line 5.							
Subtract Column C, line 6 from Column C, line 5.							
Balance of pass-through withholding the PTE can claim as a credit	7	00	00	00			
8 If Column A, line 1 is greater than 0%, enter the total from Part I, Column C	8	00					
9 If Column A, line 1 is 0%, multiply the total in Part I, Column C							
by Columns B and C, line 1	9		00	00			
10 Total pass-through entity tax passed to owners	10			00			
11 Enter Column B, line 9.							
Subtract Column C, line 10 from line 9.							
Credit balance for PTE not electing to pay PTET	11		00	00			
12 Add lines 4, 7, 8, and 11 in each column.							
Total payments the PTE can claim as a credit	12	00	00	00			

Part III. Authorized Representative: Authority	rized to make PTET election for Tax	fear 2023	
Name	Title	Telephone Number	Email



Schedule I - Apportionment Factor for Multistate Pass-Through Entities

er amounts in columns A and B. Enter percentages in col		. Everywhere	B. Montana.	C. Fact	or
Property Factor: Use average value for real and tangible personal p	roperty.				
1a Land	1a	00		00	
1b Buildings	1b	00		00	
1c Machinery	1c	00		00	
1d Equipment	1d	00		00	
1e Furniture and fixtures	1e	00		00	
1f Leases and leased property	1f	00		00	
1g Inventories	1g	0.0		00	
1h Depletable assets	1h	00		00	
1i Supplies and other	1i	00		00	
1j Multiply amount of rents by 8 and enter result	1j	00		00	
1k Total Property Value. Add lines 1a through 1j	1k	0 0		00	
Divide the total in column B by the total in column A. Multiply the result by	100.	This is your prop	erty 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	0 0		00	
2d Other expenses and deductions	2d	0 0		00	
2e Total Payroll Value. Add lines 2a through 2d.	2e	0.0		00	
Divide the total in column B by the total in column A. Multiply the result by	100.	This is your pay	roll factor. 2		
Gross Receipts Factor:					
3a Gross Receipts, less returns and allowances	3a	0 0			
3b Receipts delivered or shipped to Montana purchasers:					
(1) Shipped from outside Montana		3b(1)		00	
(2) Shipped from within Montana		3b(2)		00	
3c Receipts shipped from Montana to:					
(1) United States government		3c(1)		00	
(2) Purchasers in a state where the taxpayer is not taxabl	e	3c(2)		00	
3d Receipts other than receipts of tangible personal property (e.g., servic		3d		00	
3e Net gains reported on federal Schedule D and Form 4797	3e	00		00	
3f Other gross receipts (rents, royalties, interest, etc.)	3f	00		00	
3g Total Receipts Value. Add lines 3a through 3f.	3g	00		00	
Divide the total in column B by the total in column A. Multiply the result by		This is your rece	ipts factor. 3		
Enter the amount reported on line 3.			4		
Add the percentages from lines 1, 2, 3, and 4 in column C.		This is the sum of yo			
Divide the total percentage from line 5, column C, by the number of factor	s that can be included				
If a property, payroll, or receipts factor is 0%, it is included in the calculation					
		This is your apportionm	ent factor. 6		

Schedule II - Montana Pass-Through Entity Tax Credits

Use the corresponding credit code in the instructions to report the credit you are claiming in Column A. If you were provided an authorization number to claim the credit, enter that number in Column B. Report the total amount of credit in Column C. Use Montana Schedule K-1 to notify each owner of their share of the credit. Attach a copy of the credit's form to your return (if applicable). See instructions for more information.

A. Credit Code	B. Credit Authorization Number	C. Amount of credit
1		00
2		00
3		00
4		00
5		00



00

Schedule IV – Montana Composite Income Tax Schedule

Part I. Eligible Participating Owners	Part II. Composite Tax Ratio	А	В	С
Enter the number of eligible participating owners.	Use the amount in column 3	Enter the amount from	Enter the amount from	Divide column 2 by
See instructions for more information about	to complete the calculation	page 1, line 14	page 1, line 20	column 1 Do not enter more
eligible participants.	in column H below.	of this form.	of this form.	than 1.000000.
		00	0 ()

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

	A. Name	B. Social Security Number or Federal Employer Identification Number	C. Owner's share of federal income from entity	D. Standard deduction	E. Exemption \$2,960	F. Montana taxable income – Subtract columns D and E from column C.	G. Enter the appropriate tax from the tax table below.	H. Montana composite income tax. Multiply column G by composite tax ratio from Part II.
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			00	00	00	00	00	00
9			00	00	00	00	00	00
10			00	00	00	00	00	00
				11 Enter t	00			

11 Enter the total composite tax from all additional pages, if used

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.



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	But Not More Than	Multiply Your Taxable	And Subtract	This Is Your Tax
More Than		Income By		
\$0	\$3,600	1% (0.010)	\$0	
\$3,600	\$6,300	2% (0.020)	\$36	
\$6,300	\$9,700	3% (0.030)	\$99	
\$9,700	\$13,000	4% (0.040)	\$196	
\$13,000	\$16,800	5% (0.050)	\$326	
\$16,800	\$21,600	6% (0.060)	\$494	
More than \$21,600		6.75% (0.0675)	\$656	

1 The entity filed federal Form 8918 – Material Advisor Disclosure Statement with the IRS										
2 The entity filed federal Form 8824 – Like-Kind Exchanges with the IRS. NOTE: Mark the box if your like-kind exchange includes Montana property.										
3 The entity filed federal Form 8865 – Return of U.S. Persons with Respect to Certain Foreign Partnerships with the IRS										
4 The entity filed federal Form 8886 – Reportable Transaction Disclosure Statement with the IRS										
5 For S corporations only: The S corporation filed federal Form 8023 – Elections Under Section 338 f Corporations Making Qualified Stock Purchases with the IRS	or									
Complete this section if the PTE is a partnership.										
 The partnership filed one or more of the following forms in 2023. Provide a copy of each form with your tax return. Federal Form 8985, Pass-Through Statement - Transmittal/Partnership Adjustment Tracking Report Federal Form 8986, Partner's Share of Adjustment(s) to Partnership-Related Items(s) Federal Form 8082, Notice of Inconsistent Treatment or Administrative Adjustment Request (AAR) The partnership had Montana source income and paid an imputed underpayment. If applicable, provide a copy of your federal audit adjustment report. (See instructions) 										
8 Previously unreported Montana source income from Federal Form 8082 (See instructions)	00									
Complete this section if you made a disbursement to a related party.										
9 The entity made payments during this tax year to one or more related parties (excluding salary compensation) that exceeded \$100,000 per recipient. If you marked this box, please provide the name and federal employer identification number of each reparty below and the amount that you paid to each related party:										
A. Name B. FEIN C. Amount of Pa	yment									
	00									
	00									
	00									
	00									
	00									
	00									
	00									
	00									
	00									
	00									
	00									
	00									

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Schedule VII – List of Disregarded Entities (DE) A. Name	B. FEIN	C. Montana SOS	D. LLC	E. Q Sub	F. If Q Sub, enter	G. DE has	H. DE is a	I. Montana Source Income
A. Name	D. FEIN	Registration Number	D. LLC	E. Q 300	election date	multistate	segment of the PTE	from DE's own activities
1		Number				activities	thePTE	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

			A Everywhere		
	1a Gross income	1a	00		
me	1b Returns and allowances	1b	00		
20	1c Balance. Subtract line 1b from line 1a.	1c	00		
Business Income	1d Cost of goods sold (provide statement)	1d	00		
sine	1e Gross profit. Subtract line 1d from line 1c.	1e	00		
Bus	1f Other income including gains (provide statement)	1f	00		
	1g Add lines 1e and 1f. This is your total income.	1g	00		
	1h Wages	1h	00		
suo	1i Rent	1i	00		
ucti	1j Other deductions (provide statement)	1j	00		
Deductions	1k Add lines 1h through 1j. This is your total deductions.	1k	00		B. Montana
_	1 Subtract line 1k from line 1g. This is your total income from trade or business.	1	00	1	00
	2 Net rental real estate income (loss)	2	00	2	00
	3 Other net rental income (loss)	3	00	3	00
	4 Guaranteed payments (partnerships only)	4	00	4	00
	5 Interest income	5	00	5	00
e	6 Ordinary dividends	6	00	6	00
Б	7 Royalties	7	00	7	00
Other Income	8 Net short-term capital gain (loss) (include federal Schedule D)	8	00	8	00
the	9 Net long-term capital gain (loss) (include federal Schedule D)	9	00	9	00
0	10 Net section 1231 gain (loss) (include federal Form 4797)	10	00	10	00
	11 Other income (loss) (include detailed statement)	11	00	11	00
	12 Section 179 deduction (include federal Form 4562)	12	00	12	00
	13 Other deductions (include detailed statement)	13	00	13	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	00
Adj.	16 Montana subtractions from income	16	00	16	00
Total	17 Add lines 14 and 15, then subtract line 16.				
P	Mark this box if some income is apportionable.	17	00	17	00
	1a Everywhere property	1a	00		
	1b Montana property			1b	00
	1 Divide line 1b by line 1a.		This is your Property factor.	1	%
	2a Everywhere payroll	2a	00		
Factor	2b Montana payroll			2b	00
	2 Divide line 2b by line 2a.		This is your Payroll factor.	2	%
nen	3a Everywhere receipts	3a	00		
onr	3b Montana receipts			3b	00
Apportionment	3 Divide line 3b by line 3a.	This is your Receipts factor.		3	%
App	4 Enter the amount reported on line 3			4	%
	5 Add the percentages from lines 1, 2, 3, and 4.	his is the sum of your factors.	5	%	
	6 Divide the total percentage from line 5 by the number of factors that can be included	in the c	alculation. 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	ne "Eve	rywhere" column.		
			is your Apportionment factor.	6	%



Montana Adjustments Worksheet

Code	A.PTE's Apportionable Activities	B. Nonapportionable Income	C. From MT Schedules K-1, Part 3, Column A (See instructions)	D. From Schedules DE, Column A, lines 15 and 16	E. Total Everywhere Adjustments
	00		00	00	00
	00	00	00	00	00
	00	00	00	00	0.0
	00	00	00	00	0 (
	00	00	00	00	0
	00	00	00	00	0
Total	0 0		00	00	0
				00	0
	00	00	00	00	0
	00	00	00	00	0
	00	00	00	00	0
	00	00	00	00	0
	00	00	00	00	0
Total	00	00	00	00	0
	A. PTE's Apportionable	B. Nonapportionable Income	C. From MT Schedules K-1,	D. From Schedules DE,	E. Total Montana Source
Code	Activities		Part 3, Column B	Column B, lines 15 and 16	Income Adjustments
	00	00	00	00	0
	00	00	00	00	0
	00	00	00	00	0
	00	00	00	00	0
	00	00	00	00	0
	00	00	00	00	0
Total	00	00	00	00	0
	0.0	0.0	0.0	0.0	0
					0
					0
	00		00	00	0
					0
	$\cap \cap$	0.0	1111	1111	
	00		00	00	0
	Total Total Code	Code 00 00 00 00 00 00 00 00 00 00 00 00 00 Total 00 00 00	Code 00 00 00 00 00 <td>Code (See instructions) 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 1 00 00 00 1 00 00 00 1 00 00 00 1 00 00 00 1 00 00 00 1 00 00 00 1 00 00 00 <tr< td=""><td>Code (See instructions) lines 15 and 16 0</td></tr<></td>	Code (See instructions) 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 0 00 00 00 1 00 00 00 1 00 00 00 1 00 00 00 1 00 00 00 1 00 00 00 1 00 00 00 1 00 00 00 <tr< td=""><td>Code (See instructions) lines 15 and 16 0</td></tr<>	Code (See instructions) lines 15 and 16 0



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Montana Source Income Schedule

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



Montana Schedule K-1 (PTE)

-+ 01

		"s Share of Income (Loss)				
	For the calendar year 2023		chedule K-			
on			chequie K-			
Part 1 PTE Information	Pass-through Entity's Name				FEIN	
Part 1 Inform	Mailing Address					
Pai	Mailing Address					
ш	City	Ctata		do		
Ы	City	State	ZIP Co	ue		
	Name				FEIN	
	Indine				OR	
c	Mailing Address				SSN	
Part 2 Owner Information	Mailing Address				Beneficial own	or
ma	City	State	ZIP Co	do	FEIN	
for 2	City	Sidle	ZIF CU	ue	or SSN	
Part 2 ' Inforn	Owner Type	Resident Nonres	vidont		01 3314	
ner	Special Allocations (See instructions)	Nesident	SILLEIIL	Drofit and	loss percentage	%
Ň	The owner is included in a pass-throug	h entity tax election			apital/Ownership	%
U	Resident owner PTET election (See in	-		0	apital/Ownership	70
	The owner is included in a composite i					
~	Montana Adjustments (See works			A. Everywhere	В	Montana
Part 3 Adj.	1 Additions	neer on page 5)	1	00		00
A Pa	2 Subtractions		2	00		00
	1 Ordinary business income (loss)		1	00		00
~	2 Net rental real estate income (loss)		2	00		00
Part 4 ributive Share of Source Income (Loss)	3 Other net rental income (loss)		3	00		00
	4 Guaranteed payments		4	00		00
e c ne	5 Interest income		5	0(00
har	6 Ordinary dividends		6	00		00
e Sl	7 Royalties		7	00		00
Part utive urce I	8 Net short-term capital gain (loss)		8	00		00
bul	9 Net long-term capital gain (loss)		9	00		00
	10 Net section 1231 gain (loss)		10	00		00
Dist Montana	11 Other income (loss) (include detailed stateme	ent)	11	00		00
ont	12 Section 179 expense deduction	,	12	00)	00
ž	13 Other expense deductions		13	00)	00
	14 Total distributive share (See instructions)		14	00)	00
	The owner filed Form PT-AGR Yea	ar The owner i	s a Domesti	c 2nd tier PTE		
-	1 PTET paid on behalf of owner. (See instruction	1	00			
Part 5 Supplemental Information	2 Montana composite income tax paid on beha	2	00			
Part 5 plemei ormatio	3a Montana income tax withheld on behalf of ov	vner. (See instructions)			3a	00
Pai	3b Montana income tax withheld by a lower tier	pass-through entity			3b	00
n p	3c Add lines 3a and 3b.	This is your total Monta	ina income	tax withheld on your behalf.	3c	00
S	4 Montana mineral royalty tax withheld				4	00
	5 Other information. List type	and amour	t 5	00)	00
6 6	Credit Code	Credit Authorization	n Number		Am	ount of credit
Part 6 Tax Credits	1					00
Pa Ti	2					00
0	3					00
0	Montana Adjustments Detail: Ente		ljustment en		is)	
τŐ	1 Code	00 2 Code		00 3 Code		00
Part 7 PTE Use	4 Code	00 5 Code		00 6 Code		00
L	7 Code	00 8 Code		00 9 Code		00

