

2021 Montana Pass-Through Entity Tax Return



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

Partnership ☒S corporation ☒

Page 1

For calendar year 2021 or tax year beginning 09092099 and ending 09092099

Mark all that apply: Name

<input checked="" type="checkbox"/> Initial return	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	FEIN	999999999
<input checked="" type="checkbox"/> Final return	Mailing Address	Federal Business Code/NAICS	XXXXXX
<input checked="" type="checkbox"/> Amended return	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Secretary of State ID #	XXXXXXXXXX
<input checked="" type="checkbox"/> Refund return	City State ZIP Code + 4	Date of Registration in Montana	09092099
<input checked="" type="checkbox"/> PTP	XXXXXXXXXXXXXXXXXXXX XX 99999999	State formed in XX on	09092099

Enter Number of:

Schedules K-1 Included

99999

Resident Owners

99999

Nonresident Owners

99999

Other Types of Owners

99999

Schedules DE Included

99999

Schedules K-1 Received

99999

Owners' Distributive Share of Income Items (federal Schedule K)

Federal Schedule K

1 Ordinary business income (loss)	1	999999999999	00
2 Net rental real estate income (loss) (include federal Form 8825)	2	999999999999	00
3a Other gross rental income (loss)	3a	999999999999	00
3b Expenses from other rental activities (include detailed statement)	3b	999999999999	00
3 Subtract line 3b from line 3a.			
4 Guaranteed payments (partnerships only)	4	999999999999	00
5 Interest income	5	999999999999	00
6 Ordinary dividends	6	999999999999	00
7 Royalties	7	999999999999	00
8 Net short-term capital gain (loss) (include federal Schedule D)	8	999999999999	00
9 Net long-term capital gain (loss) (include federal Schedule D)	9	999999999999	00
10 Net section 1231 gain (loss) (include federal Form 4797)	10	999999999999	00
11 Other income (loss) (include detailed statement)	11	999999999999	00
12 Add lines 1 through 11 and enter result.	12	999999999999	00

This is your other net rental income or loss.

This is your total federal income or loss.

Owners' Distributive Share of Deduction Items (include federal Schedule K)

13a Section 179 deduction (include federal Form 4562)	13a	999999999999	00
13b Contributions	13b	999999999999	00
13c Investment interest expense	13c	999999999999	00
13d Section 59(e)(2) expenditures (include detailed statement)	13d	999999999999	00
13e Other deductions (include detailed statement)	13e	999999999999	00
13 Add lines 13a through 13e and enter result.	13	999999999999	00
14 Subtract line 13 from line 12.	14	999999999999	00
15 Montana additions to the PTE's apportionable activities	15	999999999999	00

This is your total federal deductions.

This is your federal income from all sources.

Montana Source Income

16a Montana subtractions from the PTE's apportionable activities	16a	999999999999	00
16b Total everywhere income (loss) from federal Schedules K-1	16b	999999999999	00
16c Total everywhere income (loss) from disregarded entities	16c	999999999999	00
16d Other nonapportionable income (loss) from the PTE's own activities	16d	999999999999	00
16 Add lines 16a through 16d.	16	999999999999	00
17 Add lines 14 and 15, then subtract line 16.	17	999999999999	00
Schedule I not required. (See instructions) <input checked="" type="checkbox"/>			
18 Income (loss) apportioned to Montana. Multiply line 17 x 999.9999 %	18	999999999999	00
19a Total Montana source income received from pass-through entities (Montana source income from MT Schedules K-1 issued to this entity)	19a	999999999999	00
19b Total Montana source income from Schedules VII	19b	999999999999	00
19c Nonapportionable income allocated to Montana. (See instructions)	19c	999999999999	00
19 Add lines 19a through 19c.	19	999999999999	00
20 Add lines 18 and 19; enter result.	20	999999999999	00

This is the total nonapportionable income (loss) sourced to Montana.

This is your total Montana source income.

Office Use Only

Date Received

D7 11162021



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PTE Liability	21	Enter your total composite tax from Schedule IV, column H	21	999999999999	00
	21a	Enter the PTE's tax liability resulting from an adjustment to partnership income. (See instructions)	21a	999999999999	00
	22	Enter the sum of pass-through withholding from all owners' MT Schedules K-1, Part 5, line 3a	22	999999999999	00
Withholding	23a	Total Montana mineral royalty tax from MT Schedules K-1 and federal Forms 1099 received by the PTE	23a	999999999999	00
	23b	Mineral royalty tax allocated to owners on their MT Schedules K-1, Part 5, line 4	23b	999999999999	00
	23	Subtract line 23b from line 23a. This is the amount of Montana mineral royalty tax that the PTE can claim.	23	999999999999	00
	24a	Total Montana pass-through withholding from MT Schedules K-1 received	24a	999999999999	00
	24b	Montana pass-through withholding allocated to owners on their MT Schedules K-1, Part 5, line 3b	24b	999999999999	00
	24	Subtract line 24b from 24a. This is the amount of Montana pass-through withholding the PTE can claim.	24	999999999999	00
	25	Add lines 23 and 24. This is the total withholding payments that the PTE can claim.	25	999999999999	00
Return Payments	26a	2020 overpayment applied to 2021	26a	999999999999	00
	26b	2021 estimated payments	26b	999999999999	00
	26c	2021 tentative payments	26c	999999999999	00
	26d	For amended returns only – payments made with original return	26d	999999999999	00
	26e	For amended returns only – previously issued refunds. (See instructions)	26e	999999999999	00
	26	Add lines 26a through 26d, then subtract line 26e. This is your total return payments.	26	999999999999	00
	27	Add lines 21, 21a, and 22, then subtract lines 25 and 26. This is your amount due or (overpaid).	27	999999999999	00
Penalties and Interest	28a	PTE information return late filing penalty	28a	999999999999	00
	28b	Interest on underpayment of estimated composite tax	28b	999999999999	00
	28c	Composite income tax return late filing penalty	28c	999999999999	00
	28d	Late payment penalty	28d	999999999999	00
	28e	Interest	28e	999999999999	00
Amount Owed or Refund	28	Add lines 28a through 28e. This is your total penalties and interest.	28	999999999999	00
	29	Add lines 27 and 28	29	999999999999	00
	30	If line 29 results in an amount due, enter it here. This is the amount you owe. ▶	30	999999999999	00
	Why not e-pay? See your options at MTRevenue.gov. If writing a check, make it payable to MONTANA DEPARTMENT OF REVENUE.				
	31	If line 29 results in an overpayment, enter it here. This is your overpayment. Enter as a positive number.	31	999999999999	00
	32	Enter the amount from line 31 that you want applied to your 2022 tax	32	999999999999	00
33	Subtract line 32 from line 31 and enter the amount here. This is your refund. ▶	33	999999999999	00	

Direct Deposit Your Refund

1. RTN# 999999999 2. ACCT# 9999999999999999

Complete 1, 2, 3, and 4. 3. If using direct deposit, you are required to mark one box. ☒ Checking ☒ Savings

(See instructions) 4. If this refund is going to an account that is located outside of the United States or its territories, 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 Title	Telephone Number
X	09092099	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999 999 9999

Print/Type Preparer's Name	Preparer's Signature	Date	PTIN
XXXXXXXXXXXXXXXXXXXXXXXXXXXX		09092099	P99999999
Firm's Name	Firm's Address	Telephone Number	Firm's FEIN
XXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999 999 9999	999999999
	XXXXXXXXXXXXXXXXXXXXXXXXXXXX		

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



21TT0257

Schedule I - Apportionment Factor for Multistate Pass-Through Entities

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.

1a Land	1a	999999999999	00	999999999999	00
1b Buildings	1b	999999999999	00	999999999999	00
1c Machinery	1c	999999999999	00	999999999999	00
1d Equipment	1d	999999999999	00	999999999999	00
1e Furniture and fixtures	1e	999999999999	00	999999999999	00
1f Leases and leased property	1f	999999999999	00	999999999999	00
1g Inventories	1g	999999999999	00	999999999999	00
1h Depletable assets	1h	999999999999	00	999999999999	00
1i Supplies and other	1i	999999999999	00	999999999999	00
1j Multiply amount of rents by 8 and enter result	1j	999999999999	00	999999999999	00
1k Total Property Value. Add lines 1a through 1j	1k	999999999999	00	999999999999	00

Divide the total in column B by the total in column A. Multiply the result by 100.

This is your property factor. 1 999 . 9999

2 Payroll Factor:

2a Compensation of officers	2a	999999999999	00	999999999999	00
2b Salaries and wages	2b	999999999999	00	999999999999	00
Payroll included in:					
2c Costs of goods sold	2c	999999999999	00	999999999999	00
2d Other expenses and deductions	2d	999999999999	00	999999999999	00
2e Total Payroll Value. Add lines 2a through 2d.	2e	999999999999	00	999999999999	00

Divide the total in column B by the total in column A. Multiply the result by 100.

This is your payroll factor. 2 999 . 9999

3 Gross Receipts Factor:

3a Gross Receipts, less returns and allowances	3a	999999999999	00		
3b Receipts delivered or shipped to Montana purchasers:					
(1) Shipped from outside Montana	3b(1)	999999999999	00		
(2) Shipped from within Montana	3b(2)	999999999999	00		
3c Receipts shipped from Montana to:					
(1) United States government	3c(1)	999999999999	00		
(2) Purchasers in a state where the taxpayer is not taxable	3c(2)	999999999999	00		
3d Receipts other than receipts of tangible personal property (e.g., service income)	3d	999999999999	00		
3e Net gains reported on federal Schedule D and Form 4797	3e	999999999999	00	999999999999	00
3f Other gross receipts (rents, royalties, interest, etc.)	3f	999999999999	00	999999999999	00
3g Total Receipts Value. Add lines 3a through 3f.	3g	999999999999	00	999999999999	00

Divide the total in column B by the total in column A. Multiply the result by 100.

This is your receipts factor. 3 999 . 9999

4 For tax years beginning after June 30, 2021, enter the amount reported on line 3. (If the tax year begins before July 1, 2021 leave blank).

4 999 . 9999

5 Add the percentages from lines 1, 2, 3, and 4 in column C.

This is the sum of your factors.

5 999 . 9999

6 Divide the total percentage from line 5, column C, 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 column A (See instructions).

This is your apportionment factor.

6 999 . 9999



Schedule II – Montana Pass-Through Entity Tax Credits**Type of Credit****Amount of Credit**

1	Dependent care assistance credit (include Form DCAC)	1	999999999	00
2	College contribution credit (include Form CC)	2	999999999	00
3	Health insurance for uninsured Montanans credit (include Form HI)	3	999999999	00
4	Recycle credit (include Form RCYL)	4	999999999	00
5	Alternative energy production credit (include Form AEPC)	5	999999999	00
6	Contractor's gross receipts tax credit. If the entity reports multiple CGR accounts, mark here. <input checked="" type="checkbox"/>	6	999999999	00
	CGR account id: 999999999 C G R	7	999999999	00
7	Alternative fuel credit (include Form AFRCR)	8	999999999	00
8	Infrastructure user fee credit (include Form IUFC)	9	999999999	00
9	Historic property preservation credit (include federal Form 3468)	10	999999999	00
10	Mineral and coal exploration incentive credit (include Forms MINE-CERT and MINE-CRED)	11	999999999	00
11	Empowerment zone credit	12	999999999	00
12	Biodiesel blending and storage credit (include Form BBSC)	13	999999999	00
13	Innovative educational program credit	14	999999999	00
14	Student scholarship organization credit	15	999999999	00
15	Emergency lodging credit (include Form ELC)	16	999999999	00
16	Unlocking public lands credit	17	999999999	00
17	Apprenticeship tax credit	18	999999999	00
18	Media credit (include Form MEDIA-CLAIM and all supplemental information with Montana Schedules K-1)	19	999999999	00
19	Trades education and training credit			

Type of Credit Recapture**Amount of
Credit Recapture**

20	Historic property preservation credit recapture	20	999999999	00
21	Biodiesel blending and storage credit recapture	21	999999999	00
22	Oilseed crushing and biodiesel/biolubricant production credit recapture	22	999999999	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.

99999

See instructions for more information about eligible participants.

Part II. Composite Tax Ratio

Use the amount in column 3 to complete the calculation in column H below.

1

Enter the amount from page 1, line 14 of this form.

999999999999 00

2

Enter the amount from page 1, line 20 of this form.

999999999999 00

3

Divide column 2 by column 1. Do not enter more than 1.000000.

9.999999

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

	A	B	C	D	E	F	G	H
	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	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 00	9999 00	9999 00	999999999 00	999999999 00	999999999 00
2	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 00	9999 00	9999 00	999999999 00	999999999 00	999999999 00
3	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 00	9999 00	9999 00	999999999 00	999999999 00	999999999 00
4	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 00	9999 00	9999 00	999999999 00	999999999 00	999999999 00
5	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 00	9999 00	9999 00	999999999 00	999999999 00	999999999 00
6	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 00	9999 00	9999 00	999999999 00	999999999 00	999999999 00
7	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 00	9999 00	9999 00	999999999 00	999999999 00	999999999 00
8	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 00	9999 00	9999 00	999999999 00	999999999 00	999999999 00
9	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 00	9999 00	9999 00	999999999 00	999999999 00	999999999 00
10	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	999999999 00	9999 00	9999 00	999999999 00	999999999 00	999999999 00
						11 Enter the total composite tax from all additional pages, if used		999999999 00
						Add column H, lines 1 through 11. This is your total composite income tax liability.		999999999 00

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	999999999
\$3,100	\$5,500	2% (0.020)	\$31	999999999
\$5,500	\$8,400	3% (0.030)	\$86	999999999
\$8,400	\$11,400	4% (0.040)	\$170	999999999
\$11,400	\$14,600	5% (0.050)	\$284	999999999
\$14,600	\$18,800	6% (0.060)	\$430	999999999
More than \$18,800		6.9% (0.069)	\$599	999999999

Schedule VI – Reporting of Special Transactions

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

- | | | | |
|---|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----|
| 1 | The entity filed federal Form 8918 – Material Advisor Disclosure Statement with the IRS | <input checked="" type="checkbox"/> | Yes |
| 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. | <input checked="" type="checkbox"/> | Yes |
| 3 | The entity filed federal Form 8865 – Return of U.S. Persons with Respect to Certain Foreign Partnerships with the IRS | <input checked="" type="checkbox"/> | Yes |
| 4 | The entity filed federal Form 8886 – Reportable Transaction Disclosure Statement with the IRS | <input checked="" type="checkbox"/> | Yes |
| 5 | For S corporations only: The S corporation filed federal Form 8023 – Elections Under Section 338 for Corporations Making Qualified Stock Purchases with the IRS | <input checked="" type="checkbox"/> | Yes |

Complete this section if the PTE is a partnership.

- 6 Mark the box if the partnership filed one or more of the following forms in 2021.
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)**

- 7 Mark the box if the partnership had Montana source income and paid an imputed underpayment. If applicable, provide a copy of your federal audit adjustment report. (See instructions)

Complete this section if you made a disbursement to a related party.

- 8 During this tax year, the entity made payments to one or more related parties (excluding salary compensation) that exceeded \$100,000 per recipient.** ☒ Yes
- If you answered "Yes" to this question, please provide the name and federal employer identification number of each related party below and the amount that you paid to each related party:

[illegible]

Schedule VII – List of Disregarded Entities (DE)

	A	B	C	D	E	F	G	H	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	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	XXXXXXXXXX	X	X	09092099	X	X	999999999 00
2	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	XXXXXXXXXX	X	X	09092099	X	X	999999999 00
3	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	XXXXXXXXXX	X	X	09092099	X	X	999999999 00
4	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	XXXXXXXXXX	X	X	09092099	X	X	999999999 00
5	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	XXXXXXXXXX	X	X	09092099	X	X	999999999 00
6	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	XXXXXXXXXX	X	X	09092099	X	X	999999999 00
7	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	XXXXXXXXXX	X	X	09092099	X	X	999999999 00
8	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	XXXXXXXXXX	X	X	09092099	X	X	999999999 00
9	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	XXXXXXXXXX	X	X	09092099	X	X	999999999 00
10	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	XXXXXXXXXX	X	X	09092099	X	X	999999999 00
11	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	XXXXXXXXXX	X	X	09092099	X	X	999999999 00
12	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	XXXXXXXXXX	X	X	09092099	X	X	999999999 00
13	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	XXXXXXXXXX	X	X	09092099	X	X	999999999 00
14	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999999	XXXXXXXXXX	X	X	09092099	X	X	999999999 00
15	Total								999999999 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 XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX**Disregarded Entity FEIN** 999999999

		Everywhere		Montana	
Business Income	1a Gross income	1a	9999999999 00		
	1b Returns and allowances	1b	9999999999 00		
	1c Balance. Subtract line 1b from line 1a.	1c	9999999999 00		
	1d Cost of goods sold (provide statement)	1d	9999999999 00		
	1e Gross profit. Subtract line 1d from line 1c.	1e	9999999999 00		
	1f Other income including gains (provide statement)	1f	9999999999 00		
1g Add lines 1e and 1f. This is your total income.	1g	9999999999 00			
Deductions	1h Wages	1h	9999999999 00		
	1i Rent	1i	9999999999 00		
	1j Other deductions (provide statement)	1j	9999999999 00		
1k Add lines 1h through 1j. This is your total deductions.	1k	9999999999 00			
Other Income	1 Subtract line 1k from line 1g. This is your total income from trade or business.	1	9999999999 00	1	9999999999 00
	2 Net rental real estate income (loss)	2	9999999999 00	2	9999999999 00
	3 Other net rental income (loss)	3	9999999999 00	3	9999999999 00
	4 Guaranteed payments (partnerships only)	4	9999999999 00	4	9999999999 00
	5 Interest income	5	9999999999 00	5	9999999999 00
	6 Ordinary dividends	6	9999999999 00	6	9999999999 00
	7 Royalties	7	9999999999 00	7	9999999999 00
	8 Net short-term capital gain (loss) (include federal Schedule D)	8	9999999999 00	8	9999999999 00
	9 Net long-term capital gain (loss) (include federal Schedule D)	9	9999999999 00	9	9999999999 00
	10 Net section 1231 gain (loss) (include federal Form 4797)	10	9999999999 00	10	9999999999 00
	11 Other income (loss) (include detailed statement)	11	9999999999 00	11	9999999999 00
	12 Section 179 deduction (include federal Form 4562)	12	9999999999 00	12	9999999999 00
	13 Other deductions (include detailed statement)	13	9999999999 00	13	9999999999 00
	14 Add lines 1 through 11, then subtract lines 12 and 13	14	9999999999 00	14	9999999999 00
Adj.	15 Montana additions to income	15	9999999999 00	15	9999999999 00
	16 Montana subtractions from income	16	9999999999 00	16	9999999999 00
Total	17 Add lines 14 and 15, then subtract line 16. Mark this box if some income is apportionable. <input checked="" type="checkbox"/>	17	9999999999 00	17	9999999999 00
Apportionment Factor	1a Everywhere property	1a	9999999999 00	1b	9999999999 00
	1b Montana property			1	999 . 9999
	1 Divide line 1b by line 1a.				
	2a Everywhere payroll	2a	9999999999 00	2b	9999999999 00
	2b Montana payroll			2	999 . 9999
	2 Divide line 2b by line 2a.				
	3a Everywhere receipts	3a	9999999999 00	3b	9999999999 00
	3b Montana receipts			3	999 . 9999
	3 Divide line 3b by line 3a.			4	999 . 9999
	4 For tax years beginning after June 30, 2021, enter the amount reported on line 3. Otherwise, leave blank.			5	999 . 9999
5 Add the percentages from lines 1, 2, 3, and 4.					
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.			6	999 . 9999	
This is your Apportionment factor.					



Montana Source Income ScheduleSum of Montana source income
per item of income (loss) and deduction.

		A		B		C		D		E	
		Montana Source Income from Montana Schedules K-1		Montana Source Income from Schedules DE		Montana Source Income from Nonapportionable income		Montana Source income from PTE's apportionable activities		Total of columns A through D	
1	Ordinary business income (loss)	9999999999	00	9999999999	00	9999999999	00	9999999999	00	9999999999	00
2	Net rental real estate income (loss)	9999999999	00	9999999999	00	9999999999	00	9999999999	00	9999999999	00
3	Other net rental income (loss)	9999999999	00	9999999999	00	9999999999	00	9999999999	00	9999999999	00
4	Guaranteed payments	9999999999	00	9999999999	00	9999999999	00	9999999999	00	9999999999	00
5	Interest income	9999999999	00	9999999999	00	9999999999	00	9999999999	00	9999999999	00
6	Ordinary dividends	9999999999	00	9999999999	00	9999999999	00	9999999999	00	9999999999	00
7	Royalties	9999999999	00	9999999999	00	9999999999	00	9999999999	00	9999999999	00
8	Net short-term capital gain (loss)	9999999999	00	9999999999	00	9999999999	00	9999999999	00	9999999999	00
9	Net long-term capital gain (loss)	9999999999	00	9999999999	00	9999999999	00	9999999999	00	9999999999	00
10	Net §1231 gain (loss)	9999999999	00	9999999999	00	9999999999	00	9999999999	00	9999999999	00
11	Other income (loss).	9999999999	00	9999999999	00	9999999999	00	9999999999	00	9999999999	00
12	§179 expense deduction apportionable and/or allocable to Montana	9999999999	00	9999999999	00	9999999999	00	9999999999	00	9999999999	00
13	Other expense deductions apportionable and/or allocable to Montana	9999999999	00	9999999999	00	9999999999	00	9999999999	00	9999999999	00
14	Total Montana Source Income	9999999999	00	9999999999	00	9999999999	00	9999999999	00	9999999999	00



21TT1057

Montana Schedule K-1

(PTE)

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

For the calendar year 2021, or tax year beginning 09092099 and ending 09092099

Part 1 PTE Information	Mark applicable boxes: <input checked="" type="checkbox"/> Amended Schedule K-1 <input checked="" type="checkbox"/> Final Schedule K-1									
	Pass-through Entity's Name XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX									
	Mailing Address XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX									
	City XXXXXXXXXXXXXXXXXXXXXXXX	State XX ZIP Code 999999999								
Part 2 Owner Information	Name XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX									
	Mailing Address XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX									
	City XXXXXXXXXXXXXXXXXXXXXXXX	State XX ZIP Code 999999999								
	Owner Type XXX Resident <input checked="" type="checkbox"/> Nonresident <input checked="" type="checkbox"/> The owner is included in a composite income tax return <input checked="" type="checkbox"/>									
The owner filed Form PT-AGR <input checked="" type="checkbox"/> Year 2099		Profit and loss percentage 999.9999 Capital/Ownership 999.9999								
Part 3 Adj.	Montana Adjustments (See worksheet on page 9)									
	<table border="1"> <thead> <tr> <th></th> <th>I Everywhere</th> <th>II Montana</th> </tr> </thead> <tbody> <tr> <td>1 Additions</td> <td>1 9999999999 00</td> <td>9999999999 00</td> </tr> <tr> <td>2 Subtractions</td> <td>2 9999999999 00</td> <td>9999999999 00</td> </tr> </tbody> </table>			I Everywhere	II Montana	1 Additions	1 9999999999 00	9999999999 00	2 Subtractions	2 9999999999 00
	I Everywhere	II Montana								
1 Additions	1 9999999999 00	9999999999 00								
2 Subtractions	2 9999999999 00	9999999999 00								
Part 4 Montana Source Income	Distributive Share of Montana Source Income (Loss)									
	1 Ordinary business income (loss)	1 9999999999 00 9999999999 00								
	2 Net rental real estate income (loss)	2 9999999999 00 9999999999 00								
	3 Other net rental income (loss)	3 9999999999 00 9999999999 00								
	4 Guaranteed payments	4 9999999999 00 9999999999 00								
	5 Interest income	5 9999999999 00 9999999999 00								
	6 Ordinary dividends	6 9999999999 00 9999999999 00								
	7 Royalties	7 9999999999 00 9999999999 00								
	8 Net short-term capital gain (loss)	8 9999999999 00 9999999999 00								
	9 Net long-term capital gain (loss)	9 9999999999 00 9999999999 00								
	10 Net section 1231 gain (loss)	10 9999999999 00 9999999999 00								
	11 Other income (loss) (include detailed statement)	11 9999999999 00 9999999999 00								
	12 Section 179 expense deduction	12 9999999999 00 9999999999 00								
13 Other expense deductions	13 9999999999 00 9999999999 00									
Part 5 Information	Supplemental Information									
	1 Owner's share of Montana source income (loss)	1 9999999999 00								
	2 Montana composite income tax paid on behalf of owner	2 9999999999 00								
	3a Montana income tax withheld on behalf of owner. (See instructions)	3a 9999999999 00								
	3b Montana income tax withheld by a lower tier pass-through entity	3b 9999999999 00								
	3c Add lines 3a and 3b. This is your total Montana income tax withheld on your behalf.	3c 9999999999 00								
4 Montana mineral royalty tax withheld	4 9999999999 00									
5 Other information. List type 99999999999999 and amount 5 9999999999 00	9999999999 00									
Part 6 Tax Credits	Tax Credits and Recapture									
	1 Contractor's gross receipts tax credit. If multiple CGR accounts, mark here. <input checked="" type="checkbox"/>	1 9999999999 00								
Part 7 PTE Use	CGR Account ID 9999999999 C G R									
	2 Other credit/recapture information. List type XXXXXXXXXXXXXXXX and amount 2 9999999999 00	9999999999 00								
Montana Adjustments Detail: Enter the amount and code of each adjustment entered on Part 3. (See instructions)										
1 Code XXX	9999999999 00	2 Code XXX 9999999999 00								
4 Code XXX	9999999999 00	5 Code XXX 9999999999 00								
7 Code XXX	9999999999 00	8 Code XXX 9999999999 00								
10 Code XXX	9999999999 00	11 Code XXX 9999999999 00								
		12 Code XXX 9999999999 00								



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21TT1157

2021 Montana Pass-Through Entity Tax Return



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

Partnership ☒S corporation ☐Page 1 ☐ For calendar year 2021 or tax year beginning and ending

Mark all that apply: Name

<input type="checkbox"/>	Initial return	FORM APPROVAL CENTRAL	FEIN	789887788
<input type="checkbox"/>	Final return	Mailing Address	Federal Business Code/NAICS	987654
<input checked="" type="checkbox"/>	Amended return	2510 S CROATAN HIGHWAY	MT Secretary of State ID #	1234567
<input type="checkbox"/>	Refund return	City State ZIP Code + 4	Date of Registration in Montana	05052005
<input type="checkbox"/>	PTP	HERE MT 27959	State formed in	NC on 01012000

Enter Number of:

Schedules K-1 Included

5

Resident Owners

Nonresident Owners

Other Types of Owners

2

Schedules DE Included

Schedules K-1 Received

Owners' Distributive Share of Income Items (federal Schedule K)

Federal Schedule K

1	Ordinary business income (loss)	1	1546789	00
2	Net rental real estate income (loss) (include federal Form 8825)	2	234567	00
3a	Other gross rental income (loss)	3a	00	00
3b	Expenses from other rental activities (include detailed statement)	3b	65498	00
3	Subtract line 3b from line 3a.	This is your other net rental income or loss.		
4	Guaranteed payments (partnerships only)	4	-65498	00
5	Interest income	5		00
6	Ordinary dividends	6	12345	00
7	Royalties	7	5555	00
8	Net short-term capital gain (loss) (include federal Schedule D)	8		00
9	Net long-term capital gain (loss) (include federal Schedule D)	9		00
10	Net section 1231 gain (loss) (include federal Form 4797)	10		00
11	Other income (loss) (include detailed statement)	11		00
12	Add lines 1 through 11 and enter result.	12	1733758	00

Owners' Distributive Share of Deduction Items (include federal Schedule K)

13a	Section 179 deduction (include federal Form 4562)	13a	00	00
13b	Contributions	13b	00	00
13c	Investment interest expense	13c	00	00
13d	Section 59(e)(2) expenditures (include detailed statement)	13d	77777	00
13e	Other deductions (include detailed statement)	13e	00	00
13	Add lines 13a through 13e and enter result.	13	77777	00
14	Subtract line 13 from line 12.	14	1655981	00
15	Montana additions to the PTE's apportionable activities	15		00

Montana Source Income

16a	Montana subtractions from the PTE's apportionable activities	16a	00	00
16b	Total everywhere income (loss) from federal Schedules K-1	16b	00	00
16c	Total everywhere income (loss) from disregarded entities	16c	00	00
16d	Other nonapportionable income (loss) from the PTE's own activities	16d	00	00
16	Add lines 16a through 16d.	16		00
17	Add lines 14 and 15, then subtract line 16.	17	1655981	00
Schedule I not required. (See instructions) <input type="checkbox"/>				
18	Income (loss) apportioned to Montana. Multiply line 17 x 013.3543 %	18	221145	00
19a	Total Montana source income received from pass-through entities (Montana source income from MT Schedules K-1 issued to this entity)	19a	00	00
19b	Total Montana source income from Schedules VII	19b	00	00
19c	Nonapportionable income allocated to Montana. (See instructions)	19c	00	00
19	Add lines 19a through 19c.	19		00
20	Add lines 18 and 19; enter result.	20	221145	00

Office Use Only

Date Received

D7 11162021



21TT0157

PTE Liability	21	Enter your total composite tax from Schedule IV, column H	21	43447	00
	21a	Enter the PTE's tax liability resulting from an adjustment to partnership income. (See instructions)	21a	9876	00
	22	Enter the sum of pass-through withholding from all owners' MT Schedules K-1, Part 5, line 3a	22	27238	00
Withholding	23a	Total Montana mineral royalty tax from MT Schedules K-1 and federal Forms 1099 received by the PTE	23a		00
	23b	Mineral royalty tax allocated to owners on their MT Schedules K-1, Part 5, line 4	23b	8888	00
	23	Subtract line 23b from line 23a. This is the amount of Montana mineral royalty tax that the PTE can claim.	23	-8888	00
	24a	Total Montana pass-through withholding from MT Schedules K-1 received	24a		00
	24b	Montana pass-through withholding allocated to owners on their MT Schedules K-1, Part 5, line 3b	24b		00
	24	Subtract line 24b from 24a. This is the amount of Montana pass-through withholding the PTE can claim.	24		00
	25	Add lines 23 and 24. This is the total withholding payments that the PTE can claim.	25	-8888	00
Return Payments	26a	2020 overpayment applied to 2021	26a	12345	00
	26b	2021 estimated payments	26b		00
	26c	2021 tentative payments	26c		00
	26d	For amended returns only – payments made with original return	26d	15151	00
	26e	For amended returns only – previously issued refunds. (See instructions)	26e		00
	26	Add lines 26a through 26d, then subtract line 26e. This is your total return payments.	26	27496	00
	27	Add lines 21, 21a, and 22, then subtract lines 25 and 26. This is your amount due or (overpaid).	27	61953	00
Penalties and Interest	28a	PTE information return late filing penalty	28a		00
	28b	Interest on underpayment of estimated composite tax	28b		00
	28c	Composite income tax return late filing penalty	28c		00
	28d	Late payment penalty	28d		00
	28e	Interest	28e		00
Amount Owed or Refund	28	Add lines 28a through 28e. This is your total penalties and interest.	28		00
	29	Add lines 27 and 28	29	61953	00
	30	If line 29 results in an amount due, enter it here. This is the amount you owe. ▶	30	61953	00
	Why not e-pay? See your options at MTRevenue.gov. If writing a check, make it payable to MONTANA DEPARTMENT OF REVENUE.				
	31	If line 29 results in an overpayment, enter it here. This is your overpayment. Enter as a positive number.	31		00
	32	Enter the amount from line 31 that you want applied to your 2022 tax	32		00
33	Subtract line 32 from line 31 and enter the amount here. This is your refund. ▶	33		00	

Direct Deposit Your Refund

Complete 1, 2, 3, and 4. (See instructions)

1. RTN# 2. ACCT#

3. If using direct deposit, you are required to mark one box. ☐ Checking ☐ Savings

4. If this refund is going to an account that is located outside of the United States or its territories, 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 Title	Telephone Number
X <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Print/Type Preparer's Name	Preparer's Signature	Date	PTIN
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Firm's Name	Firm's Address	Telephone Number	Firm's FEIN
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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



21TT0257

Schedule I - Apportionment Factor for Multistate Pass-Through Entities

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.

1a Land	1a	99999999	00	88888888	00
1b Buildings	1b	9151515	00	898989	00
1c Machinery	1c	1414141	00	77777	00
1d Equipment	1d	16161616	00	66666	00
1e Furniture and fixtures	1e		00		00
1f Leases and leased property	1f	11181818	00	81818	00
1g Inventories	1g		00		00
1h Depletable assets	1h		00		00
1i Supplies and other	1i	155555	00	11444444	00
1j Multiply amount of rents by 8 and enter result	1j		00		00
1k Total Property Value. Add lines 1a through 1j	1k	138064644	00	21458582	00

Divide the total in column B by the total in column A. Multiply the result by 100.

This is your property factor. 1 015 . 5424**2 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	0	00	0	00

Divide the total in column B by the total in column A. Multiply the result by 100.

This is your payroll factor. 2 000 . 0000**3 Gross Receipts Factor:**

3a Gross Receipts, less returns and allowances	3a	9879879879	00		
3b Receipts delivered or shipped to Montana purchasers:					
(1) Shipped from outside Montana	3b(1)			999654654	00
(2) Shipped from within Montana	3b(2)			96546546	00
3c Receipts shipped from Montana to:					
(1) United States government	3c(1)			5465464	00
(2) Purchasers in a state where the taxpayer is not taxable	3c(2)			979879	00
3d Receipts other than receipts of tangible personal property (e.g., service income)	3d			565468	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	9879879879	00	1103212011	00

Divide the total in column B by the total in column A. Multiply the result by 100.

This is your receipts factor. 3 011 . 1662**4** For tax years beginning after June 30, 2021, enter the amount reported on line 3. (If the tax year begins before July 1, 2021 leave blank).**5** Add the percentages from lines 1, 2, 3, and 4 in column C.**This is the sum of your factors.****6** Divide the total percentage from line 5, column C, 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 column A (See instructions).

This is your apportionment factor. 6 013 . 3543

Schedule II – Montana Pass-Through Entity Tax Credits**Type of Credit****Amount of Credit**

1	Dependent care assistance credit (include Form DCAC)	1	9789	00
2	College contribution credit (include Form CC)	2	9898	00
3	Health insurance for uninsured Montanans credit (include Form HI)	3	7888	00
4	Recycle credit (include Form RCYL)	4	8666	00
5	Alternative energy production credit (include Form AEPC)	5	6555	00
6	Contractor's gross receipts tax credit. If the entity reports multiple CGR accounts, mark here. <input type="checkbox"/> CGR account id: <input type="text"/> C G R	6		00
7	Alternative fuel credit (include Form AFCR)	7	33444	00
8	Infrastructure user fee credit (include Form IUFC)	8	2333	00
9	Historic property preservation credit (include federal Form 3468)	9	11555	00
10	Mineral and coal exploration incentive credit (include Forms MINE-CERT and MINE-CRED)	10	111	00
11	Empowerment zone credit	11	222555	00
12	Biodiesel blending and storage credit (include Form BBSC)	12	8777	00
13	Innovative educational program credit	13		00
14	Student scholarship organization credit	14		00
15	Emergency lodging credit (include Form ELC)	15	33222	00
16	Unlocking public lands credit	16	22111	00
17	Apprenticeship tax credit	17		00
18	Media credit (include Form MEDIA-CLAIM and all supplemental information with Montana Schedules K-1)	18	11222	00
19	Trades education and training credit	19	9876	00

Type of Credit Recapture**Amount of
Credit Recapture**

20	Historic property preservation credit recapture	20		00
21	Biodiesel blending and storage credit recapture	21	4333	00
22	Oilseed crushing and biodiesel/biolubricant production credit recapture	22	55666	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.



21TT0457

Schedule IV – Montana Composite Income Tax Schedule**Part I. Eligible Participating Owners**

Enter the number of eligible participating owners.

2

See instructions for more information about eligible participants.

Part II. Composite Tax Ratio

Use the amount in column 3 to complete the calculation in column H below.

1	2	3
Enter the amount from page 1, line 14 of this form.	Enter the amount from page 1, line 20 of this form.	Divide column 2 by column 1. Do not enter more than 1.000000.
98989898 00	89898989 00	0.908163

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

	A	B	C	D	E	F	G	H
	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	ONE PERSON	123456789	123456 00	2500 00	2580 00	118376 00	7569 00	6874 00
2	TWO PEOPLE	234567890	234567 00	3500 00	2580 00	228487 00	15167 00	13774 00
3	THREE MORE	345678901	345678 00	2500 00	2580 00	340598 00	22902 00	20799 00
4	FOUR MORE	456789123	45678 00	2500 00	2580 00	40598 00	2202 00	2000 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 the total composite tax from all additional pages, if used							00
	Add column H, lines 1 through 11. This is your total composite income tax liability.							43447 00

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



21TT0557

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	

Schedule VI – Reporting of Special Transactions

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

- | | | | |
|---|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----|
| 1 | The entity filed federal Form 8918 – Material Advisor Disclosure Statement with the IRS | <input type="checkbox"/> | Yes |
| 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. | <input checked="" type="checkbox"/> | Yes |
| 3 | The entity filed federal Form 8865 – Return of U.S. Persons with Respect to Certain Foreign Partnerships with the IRS | <input type="checkbox"/> | Yes |
| 4 | The entity filed federal Form 8886 – Reportable Transaction Disclosure Statement with the IRS | <input type="checkbox"/> | Yes |
| 5 | For S corporations only: The S corporation filed federal Form 8023 – Elections Under Section 338 for Corporations Making Qualified Stock Purchases with the IRS | <input type="checkbox"/> | Yes |

Complete this section if the PTE is a partnership.

- 6 Mark the box if the partnership filed one or more of the following forms in 2021.
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)**

- 7 Mark the box if the partnership had Montana source income and paid an imputed underpayment. If applicable, provide a copy of your federal audit adjustment report. (See instructions) ☐

Complete this section if you made a disbursement to a related party.

- 8 During this tax year, the entity made payments to one or more related parties (excluding salary compensation) that exceeded \$100,000 per recipient.** ☒ Yes
- If you answered "Yes" to this question, please provide the name and federal employer identification number of each related party below and the amount that you paid to each related party:

[illegible]

21TT0657

Schedule VII – List of Disregarded Entities (DE)

	A Name	B FEIN	C Montana SOS Registration Number	D LLC	E Q Sub	F If Q Sub, enter election date	G DE has multistate activities	H DE is a segment of the PTE	I Montana Source Income from DE's own activities
1	COMPANY ONE	101010101	11011011	<input type="checkbox"/>	<input checked="" type="checkbox"/>	02022002	<input checked="" type="checkbox"/>	<input type="checkbox"/>	98765 00
2	COMPANY TWO	202020202	22022022	<input checked="" type="checkbox"/>	<input type="checkbox"/>	01012001	<input type="checkbox"/>	<input checked="" type="checkbox"/>	65465 00
3				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	00
4				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	00
5				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	00
6				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	00
7				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	00
8				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	00
9				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	00
10				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	00
11				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	00
12				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	00
13				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	00
14				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	00
15	Total								164230 00



21TT0757

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 COMPANY THREE**Disregarded Entity FEIN** 303030303

		Everywhere		Montana	
Business Income	1a Gross income	1a	9876543 00		
	1b Returns and allowances	1b	123456 00		
	1c Balance. Subtract line 1b from line 1a.	1c	9753087 00		
	1d Cost of goods sold (provide statement)	1d	00 00		
	1e Gross profit. Subtract line 1d from line 1c.	1e	9753087 00		
	1f Other income including gains (provide statement)	1f	00 00		
	1g Add lines 1e and 1f. This is your total income.	1g	9753087 00		
Deductions	1h Wages	1h	00 00		
	1i Rent	1i	00 00		
	1j Other deductions (provide statement)	1j	500500 00		
1k Add lines 1h through 1j. This is your total deductions.	1k	500500 00			
Other Income	1 Subtract line 1k from line 1g. This is your total income from trade or business.	1	9252587 00	1	9090909 00
	2 Net rental real estate income (loss)	2	00 00	2	00 00
	3 Other net rental income (loss)	3	00 00	3	00 00
	4 Guaranteed payments (partnerships only)	4	00 00	4	00 00
	5 Interest income	5	00 00	5	00 00
	6 Ordinary dividends	6	00 00	6	00 00
	7 Royalties	7	00 00	7	00 00
	8 Net short-term capital gain (loss) (include federal Schedule D)	8	00 00	8	00 00
	9 Net long-term capital gain (loss) (include federal Schedule D)	9	00 00	9	00 00
	10 Net section 1231 gain (loss) (include federal Form 4797)	10	00 00	10	00 00
	11 Other income (loss) (include detailed statement)	11	00 00	11	00 00
	12 Section 179 deduction (include federal Form 4562)	12	00 00	12	00 00
	13 Other deductions (include detailed statement)	13	00 00	13	00 00
	14 Add lines 1 through 11, then subtract lines 12 and 13	14	9252587 00	14	9090909 00
Adj.	15 Montana additions to income	15	00 00	15	00 00
	16 Montana subtractions from income	16	00 00	16	00 00
Total	17 Add lines 14 and 15, then subtract line 16. Mark this box if some income is apportionable. <input type="checkbox"/>	17	9252587 00	17	9090909 00
Apportionment Factor	1a Everywhere property	1a	8070908 00	1b	504030 00
	1b Montana property			1	006.2450
	1 Divide line 1b by line 1a.		This is your Property factor.		
	2a Everywhere payroll	2a	11223344 00	2b	987654 00
	2b Montana payroll			2	008.8000
	2 Divide line 2b by line 2a.		This is your Payroll factor.		
	3a Everywhere receipts	3a	987987987 00	3b	654654654 00
	3b Montana receipts			3	066.2614
	3 Divide line 3b by line 3a.		This is your Receipts factor.		
	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.		This is the sum of your factors.	5	081.3064	
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.	6	027.1021	



Montana Adjustments Worksheet

		A		B		C		D		E	
		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	
Montana Adjustments to Everywhere Income	1 Montana Additions to Everywhere Income										
	FIRST ONE	P	987654 00	876543 00	90909 00	80808 00	70707 00				
	SECOND ONE	P	987987 00	808080 00	80808 00	70707 00	60606 00				
			00	00	00	00	00				
			00	00	00	00	00				
			00	00	00	00	00				
			00	00	00	00	00				
			00	00	00	00	00				
			00	00	00	00	00				
			00	00	00	00	00				
2 Montana Subtractions to Everywhere Income	Total	1975641 00	1684623 00	171717 00	151515 00	131313 00					
Montana Adjustments to Montana Source Income	3 Montana Source Additions										
	SOME ONE	I	969696 00	858585 00	747474 00	414141 00	52525 00				
	SOMEONE ELSE	I	858585 00	747474 00	636363 00	252525 00	43434 00				
			00	00	00	00	00				
			00	00	00	00	00				
			00	00	00	00	00				
			00	00	00	00	00				
			00	00	00	00	00				
			00	00	00	00	00				
			00	00	00	00	00				
4 Montana Source Subtractions	Total	1828281 00	1606059 00	1383837 00	666666 00	95959 00					
Adjustments to Montana Source Income	OTHER ONE	I	987987 00	654654 00	321321 00	123123 00	11011 00				
			00	00	00	00	00				
			00	00	00	00	00				
			00	00	00	00	00				
			00	00	00	00	00				
			00	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	987987 00	654654 00	321321 00	123123 00	11011 00						



21TT0957

Montana Source Income ScheduleSum of Montana source income
per item of income (loss) and deduction.

		A	B	C	D	E
		Montana Source Income from Montana Schedules K-1	Montana Source Income from Schedules DE	Montana Source Income from Nonapportionable income	Montana Source income from PTE's apportionable activities	Total of columns A through D
1 Ordinary business income (loss)	1	987987 00	321321 00	10101 00	9876 00	1329285 00
2 Net rental real estate income (loss)	2	00	00	00	00	00
3 Other net rental income (loss)	3	00	00	00	00	00
4 Guaranteed payments	4	00	00	00	00	00
5 Interest income	5	00	00	00	00	00
6 Ordinary dividends	6	00	00	00	00	00
7 Royalties	7	00	00	00	00	00
8 Net short-term capital gain (loss)	8	654654 00	321321 00	123123 00	98765 00	45654 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	1642641 00	642642 00	133224 00	108641 00	1374939 00



21TT1057

Montana Schedule K-1 (PTE)

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

For the calendar year 2021, or tax year beginning [] and ending []

Part 1 PTE Information	Mark applicable boxes: <input type="checkbox"/> Amended Schedule K-1 <input type="checkbox"/> Final Schedule K-1	
	Pass-through Entity's Name MY OTHER COMPANY	
Part 2 Owner Information	Mailing Address 12 MAIN STREET	
	City BILLINGS State MY ZIP Code 123456789	
Part 3 Adj.	Name JOHN SMITH	
	Mailing Address 55 SECOND AVE	
Part 4 Montana Source Income	City MONROE State MY ZIP Code 10506	
	Owner Type <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Nonresident <input type="checkbox"/> The owner is included in a composite income tax return <input type="checkbox"/>	
Part 5 Information	Profit and loss percentage 005.5876	
	Capital/Ownership 011.9465	
Part 6 Tax Credits	The owner filed Form PT-AGR <input checked="" type="checkbox"/> Year 2018	
	Beneficial owner FEIN 875421986 OR 593648127 SSN 593648127	
Part 7 PTE Use	Montana Adjustments (See worksheet on page 9)	
	Distributive Share of Montana Source Income (Loss)	
Part 8 Tax Credits	Supplemental Information	
	Tax Credits and Recapture	
Part 9 PTE Use	Montana Adjustments Detail: Enter the amount and code of each adjustment entered on Part 3. (See instructions)	
	Montana Adjustments Detail: Enter the amount and code of each adjustment entered on Part 3. (See instructions)	

2021 Montana Pass-Through Entity Tax Return



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

Partnership ☒S corporation ☐

Page 1

For calendar year 2021 or tax year beginning 07012021 and ending 09302022

Mark all that apply: Name

FEIN 129879878

Initial return VACATIONS GALORE

Federal Business Code/NAICS 987654

Final return Mailing Address

MT Secretary of State ID # 1234567

Amended return 225 GREEN STREET

Date of Registration in Montana 05052005

X Refund return City State ZIP Code + 4

State formed in NC on 01012000

X PTP FAYETTEVILLE MT 28301

Enter Number of:

Schedules K-1 Included 22

Nonresident Owners

Resident Owners 11

Other Types of Owners 11

Schedules DE Included

Schedules K-1 Received

Owners' Distributive Share of Income Items (federal Schedule K)

Federal Schedule K

1 Ordinary business income (loss)	1	96789	00
2 Net rental real estate income (loss) (include federal Form 8825)	2	34567	00
3a Other gross rental income (loss)	3a	12121	00
3b Expenses from other rental activities (include detailed statement)	3b	23232	00
3 Subtract line 3b from line 3a.	This is your other net rental income or loss.		
4 Guaranteed payments (partnerships only)	4		00
5 Interest income	5		00
6 Ordinary dividends	6	34343	00
7 Royalties	7		00
8 Net short-term capital gain (loss) (include federal Schedule D)	8	45454	00
9 Net long-term capital gain (loss) (include federal Schedule D)	9		00
10 Net section 1231 gain (loss) (include federal Form 4797)	10	17357	00
11 Other income (loss) (include detailed statement)	11		00
12 Add lines 1 through 11 and enter result.	This is your total federal income or loss.		
	12	217399	00

Owners' Distributive Share of Deduction Items (include federal Schedule K)

13a Section 179 deduction (include federal Form 4562)	13a	28978	00
13b Contributions	13b		00
13c Investment interest expense	13c		00
13d Section 59(e)(2) expenditures (include detailed statement)	13d		00
13e Other deductions (include detailed statement)	13e	19789	00
13 Add lines 13a through 13e and enter result.	This is your total federal deductions.		
14 Subtract line 13 from line 12.	This is your federal income from all sources.		
	14	168632	00
15 Montana additions to the PTE's apportionable activities	15		00

Montana Source Income

16a Montana subtractions from the PTE's apportionable activities	16a		00
16b Total everywhere income (loss) from federal Schedules K-1	16b		00
16c Total everywhere income (loss) from disregarded entities	16c		00
16d Other nonapportionable income (loss) from the PTE's own activities	16d		00
16 Add lines 16a through 16d.	This is your deductions including nonapportionable income.		
17 Add lines 14 and 15, then subtract line 16.	17	168632	00
Schedule I not required. (See instructions) <input type="checkbox"/>			
18 Income (loss) apportioned to Montana. Multiply line 17 x 008.2152 %	18	13853	00
19a Total Montana source income received from pass-through entities (Montana source income from MT Schedules K-1 issued to this entity)	19a		00
19b Total Montana source income from Schedules VII	19b		00
19c Nonapportionable income allocated to Montana. (See instructions)	19c		00
19 Add lines 19a through 19c.	This is the total nonapportionable income (loss) sourced to Montana.		
20 Add lines 18 and 19; enter result.	This is your total Montana source income.		
	20	13853	00

Office Use Only

Date Received

D7 11162021



21TT0157

PTE Liability	21	Enter your total composite tax from Schedule IV, column H	21	20648	00
	21a	Enter the PTE's tax liability resulting from an adjustment to partnership income. (See instructions)	21a		00
	22	Enter the sum of pass-through withholding from all owners' MT Schedules K-1, Part 5, line 3a	22	5199	00
Withholding	23a	Total Montana mineral royalty tax from MT Schedules K-1 and federal Forms 1099 received by the PTE	23a	00	
	23b	Mineral royalty tax allocated to owners on their MT Schedules K-1, Part 5, line 4	23b	00	
	23	Subtract line 23b from line 23a. This is the amount of Montana mineral royalty tax that the PTE can claim.	23		00
	24a	Total Montana pass-through withholding from MT Schedules K-1 received	24a	00	
	24b	Montana pass-through withholding allocated to owners on their MT Schedules K-1, Part 5, line 3b	24b	54545	00
	24	Subtract line 24b from 24a. This is the amount of Montana pass-through withholding the PTE can claim.	24	-54545	00
	25	Add lines 23 and 24. This is the total withholding payments that the PTE can claim.	25	-54545	00
Return Payments	26a	2020 overpayment applied to 2021	26a	00	
	26b	2021 estimated payments	26b	66789	00
	26c	2021 tentative payments	26c	00	
	26d	For amended returns only – payments made with original return	26d	00	
	26e	For amended returns only – previously issued refunds. (See instructions)	26e	00	
	26	Add lines 26a through 26d, then subtract line 26e. This is your total return payments.	26	66789	00
	27	Add lines 21, 21a, and 22, then subtract lines 25 and 26. This is your amount due or (overpaid).	27	13603	00
Penalties and Interest	28a	PTE information return late filing penalty	28a	00	
	28b	Interest on underpayment of estimated composite tax	28b	00	
	28c	Composite income tax return late filing penalty	28c	00	
	28d	Late payment penalty	28d	00	
	28e	Interest	28e	00	
Amount Owed or Refund	28	Add lines 28a through 28e. This is your total penalties and interest.	28		00
	29	Add lines 27 and 28	29	13603	00
	30	If line 29 results in an amount due, enter it here. This is the amount you owe. ▶	30	13603	00
	Why not e-pay? See your options at MTRevenue.gov. If writing a check, make it payable to MONTANA DEPARTMENT OF REVENUE.				
	31	If line 29 results in an overpayment, enter it here. This is your overpayment. Enter as a positive number.	31		00
	32	Enter the amount from line 31 that you want applied to your 2022 tax	32	00	
33	Subtract line 32 from line 31 and enter the amount here. This is your refund. ▶	33		00	

Direct Deposit**Your Refund**

1. RTN# 654654654

2. ACCT# 98765498765498765

Complete 1, 2, 3, and 4. 3. If using direct deposit, you are required to mark one box. ▶ ☒ Checking ☐ Savings(See instructions) 4. If this refund is going to an account that is located outside of the United States or its territories, 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 Title	Telephone Number
X _____	02022021	JOHN DOE	321 654 9876

Print/Type Preparer's Name	Preparer's Signature	Date	PTIN
GEM JONES	_____	02022021	P88888777
Firm's Name	Firm's Address	Telephone Number	Firm's FEIN
GEM TAX PREP	1 HERE ST THERE, MT 65465	654 987 6547	321654321

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

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.

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	00	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 00	0 00

Divide the total in column B by the total in column A. Multiply the result by 100.

This is your property factor. 1 000 . 0000**2 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	0 00	0 00

Divide the total in column B by the total in column A. Multiply the result by 100.

This is your payroll factor. 2 000 . 0000**3 Gross Receipts Factor:**

3a Gross Receipts, less returns and allowances	3a	879879	00
3b Receipts delivered or shipped to Montana purchasers:			
(1) Shipped from outside Montana	3b(1)	4654	00
(2) Shipped from within Montana	3b(2)	6546	00
3c Receipts shipped from Montana to:			
(1) United States government	3c(1)	5464	00
(2) Purchasers in a state where the taxpayer is not taxable	3c(2)	9879	00
3d Receipts other than receipts of tangible personal property (e.g., service income)	3d	65468	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	879879	00

Divide the total in column B by the total in column A. Multiply the result by 100.

This is your receipts factor. 3 010 . 4572**4** For tax years beginning after June 30, 2021, enter the amount reported on line 3. (If the tax year begins before July 1, 2021 leave blank).

4 005 . 9731

5 Add the percentages from lines 1, 2, 3, and 4 in column C.**This is the sum of your factors.** 5 016 . 4303**6** Divide the total percentage from line 5, column C, 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 column A (See instructions).

This is your apportionment factor. 6 008 . 2152

Schedule II – Montana Pass-Through Entity Tax Credits

Type of Credit		Amount of Credit
1 Dependent care assistance credit (include Form DCAC)	1	00
2 College contribution credit (include Form CC)	2	9898 00
3 Health insurance for uninsured Montanans credit (include Form HI)	3	00
4 Recycle credit (include Form RCYL)	4	8666 00
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. <input type="checkbox"/>		
CGR account id: <input type="text"/> C G R	6	00
7 Alternative fuel credit (include Form AFCR)	7	444 00
8 Infrastructure user fee credit (include Form IUFC)	8	00
9 Historic property preservation credit (include federal Form 3468)	9	555 00
10 Mineral and coal exploration incentive credit (include Forms MINE-CERT and MINE-CRED)	10	00
11 Empowerment zone credit	11	00
12 Biodiesel blending and storage credit (include Form BBSC)	12	8777 00
13 Innovative educational program credit	13	00
14 Student scholarship organization credit	14	00
15 Emergency lodging credit (include Form ELC)	15	00
16 Unlocking public lands credit	16	00
17 Apprenticeship tax credit	17	00
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
Type of Credit Recapture		Amount of Credit Recapture
20 Historic property preservation credit recapture	20	33 00
21 Biodiesel blending and storage credit recapture	21	00
22 Oilseed crushing and biodiesel/biolubricant production credit recapture	22	4321 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.



Schedule IV – Montana Composite Income Tax Schedule**Part I. Eligible Participating Owners**

Enter the number of eligible participating owners.

2

See instructions for more information about eligible participants.

Part II. Composite Tax Ratio

Use the amount in column 3 to complete the calculation in column H below.

1

Enter the amount from page 1, line 14 of this form.

98989898 00

2

Enter the amount from page 1, line 20 of this form.

89898989 00

3

Divide column 2 by column 1. Do not enter more than 1.000000.

0.908163

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

A		B	C		D		E	F		G		H			
	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	ONE PERSON	123456789	123456	00	2500	00	2580	00	118376	00	7569	00	6874	00	
2	TWO PEOPLE	234567890	234567	00	3500	00	2580	00	228487	00	15167	00	13774	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 the total composite tax from all additional pages, if used									00	
					Add column H, lines 1 through 11. This is your total composite income tax liability.									20648	00

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



21TT0557

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	

Schedule VI – Reporting of Special Transactions

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

- | | | | |
|---|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-----|
| 1 | The entity filed federal Form 8918 – Material Advisor Disclosure Statement with the IRS | <input type="checkbox"/> | Yes |
| 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. | <input type="checkbox"/> | Yes |
| 3 | The entity filed federal Form 8865 – Return of U.S. Persons with Respect to Certain Foreign Partnerships with the IRS | <input type="checkbox"/> | Yes |
| 4 | The entity filed federal Form 8886 – Reportable Transaction Disclosure Statement with the IRS | <input type="checkbox"/> | Yes |
| 5 | For S corporations only: The S corporation filed federal Form 8023 – Elections Under Section 338 for Corporations Making Qualified Stock Purchases with the IRS | <input type="checkbox"/> | Yes |

Complete this section if the PTE is a partnership.

- 6 Mark the box if the partnership filed one or more of the following forms in 2021. ☒ X
 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)**

- 7 Mark the box if the partnership had Montana source income and paid an imputed underpayment. If applicable, provide a copy of your federal audit adjustment report. (See instructions) ☐

Complete this section if you made a disbursement to a related party.

- 8 During this tax year, the entity made payments to one or more related parties (excluding salary compensation) that exceeded \$100,000 per recipient.** ☒ Yes
- If you answered "Yes" to this question, please provide the name and federal employer identification number of each related party below and the amount that you paid to each related party:

[illegible]

FEIN



Schedule VII – List of Disregarded Entities (DE)

	A	B	C	D	E	F	G	H	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				
Business Income	1a Gross income	1a	00			
	1b Returns and allowances	1b	00			
	1c Balance. Subtract line 1b from line 1a.	1c	00			
	1d Cost of goods sold (provide statement)	1d	00			
	1e Gross profit. Subtract line 1d from line 1c.	1e	00			
	1f Other income including gains (provide statement)	1f	00			
	1g Add lines 1e and 1f. This is your total income.	1g	00			
Deductions	1h Wages	1h	00			
	1i Rent	1i	00			
	1j Other deductions (provide statement)	1j	00			
	1k Add lines 1h through 1j. This is your total deductions.	1k	00			
	1 Subtract line 1k from line 1g. This is your total income from trade or business.	1	00	1	Montana	
Other Income	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	
	6 Ordinary dividends	6	00	6	00	
	7 Royalties	7	00	7	00	
	8 Net short-term capital gain (loss) (include federal Schedule D)	8	00	8	00	
	9 Net long-term capital gain (loss) (include federal Schedule D)	9	00	9	00	
	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	
	Adj.	15 Montana additions to income	15	00	15	00
16 Montana subtractions from income		16	00	16	00	
Total	17 Add lines 14 and 15, then subtract line 16. Mark this box if some income is apportionable. <input type="checkbox"/>	17	00	17	00	
Apportionment Factor	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			
	2b Montana payroll			2b	00	
	2 Divide line 2b by line 2a.			This is your Payroll factor.	2	
	3a Everywhere receipts	3a	00			
	3b Montana receipts			3b	00	
	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.			This 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 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.	6	



Montana Adjustments Worksheet

		A		B		C		D		E	
		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	
Montana Adjustments to Everywhere Income	1 Montana Additions 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	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
	2 Montana Subtractions to Everywhere Income	Total	00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
		00	00	00	00	00	00	00	00	00	
		00	00	00	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	00	00	00	00	00	00
Adjustments to Montana Source Income	3 Montana Source Additions	Code	PTE's Apportionable Activities	Nonapportionable Income		From MT Schedules K-1, Part 3, Column II		From Schedules DE, Montana column, lines 15 and 16		Total Montana Source Income Adjustments	
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	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	00	00	00	00	00
4 Montana Source Subtractions		00	00	00	00	00	00	00	00	00	
		00	00	00	00	00	00	00	00	00	
		00	00	00	00	00	00	00	00	00	
		00	00	00	00	00	00	00	00	00	
		00	00	00	00	00	00	00	00	00	
		00	00	00	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	00	00	00	00	00	



21TT0957

Montana Source Income Schedule

		A		B		C		D		E	
Sum of Montana source income per item of income (loss) and deduction.		Montana Source Income from Montana Schedules K-1		Montana Source Income from Schedules DE		Montana Source Income from Nonapportionable income		Montana Source income from PTE's apportionable activities		Total of columns A through D	
1 Ordinary business income (loss)	1	6	7981234 00		00	8	99484 00	7	619225 00	7	6499943 00
2 Net rental real estate income (loss)	2		00		00		00		00		00
3 Other net rental income (loss)	3		00		00		00		00		00
4 Guaranteed payments	4		00		00		00		00		00
5 Interest income	5		00		00		00		00		00
6 Ordinary dividends	6		00		00		00		00		00
7 Royalties	7		00		00		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	6	7981234 00		00	8	99484 00	7	619225 00	7	6499943 00



21TT1057

Montana Schedule K-1

(PTE)

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

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

Part 1 PTE Information	Mark applicable boxes: <input type="checkbox"/> Amended Schedule K-1 <input type="checkbox"/> Final Schedule K-1	
	Pass-through Entity's Name	
	FEIN	
Part 2 Owner Information	Mailing Address	
	City State ZIP Code	
	Name	
	FEIN	
	OR	
	Mailing Address	
	SSN	
	Beneficial owner	
	City State ZIP Code	
	FEIN or SSN	
Part 3 Adj.	Owner Type <input type="checkbox"/> Resident <input type="checkbox"/> Nonresident <input type="checkbox"/> The owner is included in a composite income tax return <input type="checkbox"/>	
	Profit and loss percentage	
	Capital/Ownership	
Part 4 Montana Source Income	Montana Adjustments (See worksheet on page 9)	
	1 Additions	
	2 Subtractions	
	Distributive Share of Montana Source Income (Loss)	
	1 Ordinary business income (loss)	
	2 Net rental real estate income (loss)	
	3 Other net rental income (loss)	
	4 Guaranteed payments	
	5 Interest income	
	6 Ordinary dividends	
	7 Royalties	
	8 Net short-term capital gain (loss)	
	9 Net long-term capital gain (loss)	
Part 5 Information	Supplemental Information	
	1 Owner's share of Montana source income (loss)	
	2 Montana composite income tax paid on behalf of owner	
	3a Montana income tax withheld on behalf of owner. (See instructions)	
	3b Montana income tax withheld by a lower tier pass-through entity	
	3c Add lines 3a and 3b. This is your total Montana income tax withheld on your behalf.	
	4 Montana mineral royalty tax withheld	
	5 Other information. List type and amount	
	Tax Credits and Recapture	
	Part 6 Tax Credits	1 Contractor's gross receipts tax credit. If multiple CGR accounts, mark here.
CGR Account ID C G R		
Part 7 PTE Use	2 Other credit/recapture information. List type and amount	
	Montana Adjustments Detail: Enter the amount and code of each adjustment entered on Part 3. (See instructions)	
	1 Code 00 2 Code 00 3 Code 00	
	4 Code 00 5 Code 00 6 Code 00	
	7 Code 00 8 Code 00 9 Code 00	
	10 Code 00 11 Code 00 12 Code 00	



2021 Montana Pass-Through Entity Tax Return



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

Partnership ☐S corporation ☒

Page 1

For calendar year 2021 or tax year beginning and ending

Mark all that apply: Name

FEIN 789789789

Initial return AJ'S HOUSE OF MIRRORS

Federal Business Code/NAICS 987654

X Final return Mailing Address

MT Secretary of State ID # 1234567

Amended return RR 1 BOX 23

Date of Registration in Montana 05052005

Refund return City State ZIP Code + 4

State formed in NC on 01012000

PTP BILLINGS MT 987654321

Enter Number of:

Schedules K-1 Included

35

Nonresident Owners

13

Schedules DE Included

Resident Owners

14

Other Types of Owners

8

Schedules K-1 Received

Owners' Distributive Share of Income Items (federal Schedule K)

Federal Schedule K

1 Ordinary business income (loss)	1	987987	00
2 Net rental real estate income (loss) (include federal Form 8825)	2	76543	00
3a Other gross rental income (loss)	3a	00	
3b Expenses from other rental activities (include detailed statement)	3b	00	
3 Subtract line 3b from line 3a.			
4 Guaranteed payments (partnerships only)	4		00
5 Interest income	5		00
6 Ordinary dividends	6	87654	00
7 Royalties	7		00
8 Net short-term capital gain (loss) (include federal Schedule D)	8		00
9 Net long-term capital gain (loss) (include federal Schedule D)	9		00
10 Net section 1231 gain (loss) (include federal Form 4797)	10	12345	00
11 Other income (loss) (include detailed statement)	11		00
12 Add lines 1 through 11 and enter result.	12	1164529	00

Owners' Distributive Share of Deduction Items (include federal Schedule K)

13a Section 179 deduction (include federal Form 4562)	13a	00	
13b Contributions	13b	00	
13c Investment interest expense	13c	2345	00
13d Section 59(e)(2) expenditures (include detailed statement)	13d	00	
13e Other deductions (include detailed statement)	13e	00	
13 Add lines 13a through 13e and enter result.	13	2345	00
14 Subtract line 13 from line 12.	14	1162184	00
15 Montana additions to the PTE's apportionable activities	15		00

Montana Source Income

16a Montana subtractions from the PTE's apportionable activities	16a	00	
16b Total everywhere income (loss) from federal Schedules K-1	16b	00	
16c Total everywhere income (loss) from disregarded entities	16c	00	
16d Other nonapportionable income (loss) from the PTE's own activities	16d	00	
16 Add lines 16a through 16d.	16		00
17 Add lines 14 and 15, then subtract line 16.	17	1162184	00
Schedule I not required. (See instructions)			
18 Income (loss) apportioned to Montana. Multiply line 17 x 068.1825 %	18	792406	00
19a Total Montana source income received from pass-through entities (Montana source income from MT Schedules K-1 issued to this entity)	19a	00	
19b Total Montana source income from Schedules VII	19b	00	
19c Nonapportionable income allocated to Montana. (See instructions)	19c	00	
19 Add lines 19a through 19c.	19		00
20 Add lines 18 and 19; enter result.	20	792406	00

Office Use Only

Date Received

D7 11162021



21TT0157

PTE Liability	21	Enter your total composite tax from Schedule IV, column H	21	111480	00
	21a	Enter the PTE's tax liability resulting from an adjustment to partnership income. (See instructions)	21a		00
	22	Enter the sum of pass-through withholding from all owners' MT Schedules K-1, Part 5, line 3a	22	27547	00
Withholding	23a	Total Montana mineral royalty tax from MT Schedules K-1 and federal Forms 1099 received by the PTE	23a	888888	00
	23b	Mineral royalty tax allocated to owners on their MT Schedules K-1, Part 5, line 4	23b	7777	00
	23	Subtract line 23b from line 23a. This is the amount of Montana mineral royalty tax that the PTE can claim.	23	881111	00
	24a	Total Montana pass-through withholding from MT Schedules K-1 received	24a		00
	24b	Montana pass-through withholding allocated to owners on their MT Schedules K-1, Part 5, line 3b	24b		00
	24	Subtract line 24b from 24a. This is the amount of Montana pass-through withholding the PTE can claim.	24		00
	25	Add lines 23 and 24. This is the total withholding payments that the PTE can claim.	25	881111	00
Return Payments	26a	2020 overpayment applied to 2021	26a		00
	26b	2021 estimated payments	26b	545454	00
	26c	2021 tentative payments	26c		00
	26d	For amended returns only – payments made with original return	26d		00
	26e	For amended returns only – previously issued refunds. (See instructions)	26e		00
	26	Add lines 26a through 26d, then subtract line 26e. This is your total return payments.	26	545454	00
	27	Add lines 21, 21a, and 22, then subtract lines 25 and 26. This is your amount due or (overpaid).	27	-9217538	00
Penalties and Interest	28a	PTE information return late filing penalty	28a		00
	28b	Interest on underpayment of estimated composite tax	28b		00
	28c	Composite income tax return late filing penalty	28c		00
	28d	Late payment penalty	28d		00
	28e	Interest	28e		00
Amount Owed or Refund	28	Add lines 28a through 28e. This is your total penalties and interest.	28		00
	29	Add lines 27 and 28	29	-9217538	00
	30	If line 29 results in an amount due, enter it here. This is the amount you owe. ▶	30		00
	Why not e-pay? See your options at MTRevenue.gov. If writing a check, make it payable to MONTANA DEPARTMENT OF REVENUE.				
	31	If line 29 results in an overpayment, enter it here. This is your overpayment. Enter as a positive number.	31	9217538	00
	32	Enter the amount from line 31 that you want applied to your 2022 tax	32		00
33	Subtract line 32 from line 31 and enter the amount here. This is your refund. ▶	33	9217538	00	

Direct Deposit Your Refund

Complete 1, 2, 3, and 4. (See instructions)

1. RTN# 2. ACCT#

3. If using direct deposit, you are required to mark one box. ☐ Checking ☐ Savings

4. If this refund is going to an account that is located outside of the United States or its territories, 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 Title	Telephone Number
X _____			

Print/Type Preparer's Name	Preparer's Signature	Date	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. ☐



Schedule I - Apportionment Factor for Multistate Pass-Through Entities

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.

1a Land	1a	99999999	00	88888888	00
1b Buildings	1b	15151515	00	898989	00
1c Machinery	1c	1414141	00	77777	00
1d Equipment	1d	16161616	00	666666	00
1e Furniture and fixtures	1e		00		00
1f Leases and leased property	1f	181818	00	81818	00
1g Inventories	1g		00		00
1h Depletable assets	1h		00		00
1i Supplies and other	1i	55555	00	44444	00
1j Multiply amount of rents by 8 and enter result	1j		00		00
1k Total Property Value. Add lines 1a through 1j	1k	132964644	00	90658582	00

Divide the total in column B by the total in column A. Multiply the result by 100.

This is your property factor. 1 068 . 1825**2 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	0	00	0	00

Divide the total in column B by the total in column A. Multiply the result by 100.

This is your payroll factor. 2 000 . 0000**3 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)				00
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 income)	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	0	00	0	00

Divide the total in column B by the total in column A. Multiply the result by 100.

This is your receipts factor. 3 000 . 0000**4** For tax years beginning after June 30, 2021, enter the amount reported on line 3. (If the tax year begins before July 1, 2021 leave blank).

4

5 Add the percentages from lines 1, 2, 3, and 4 in column C.**This is the sum of your factors.**

5 068 . 1825

6 Divide the total percentage from line 5, column C, 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 column A (See instructions).

This is your apportionment factor. 6 068 . 1825

Schedule II – Montana Pass-Through Entity Tax Credits

Type of Credit		Amount of Credit
1 Dependent care assistance credit (include Form DCAC)	1	789789 00
2 College contribution credit (include Form CC)	2	8989898 00
3 Health insurance for uninsured Montanans credit (include Form HI)	3	777888 00
4 Recycle credit (include Form RCYL)	4	888666 00
5 Alternative energy production credit (include Form AEPC)	5	666555 00
6 Contractor's gross receipts tax credit. If the entity reports multiple CGR accounts, mark here. <input checked="" type="checkbox"/>		
CGR account id: 4445556666 C G R	6	444555 00
7 Alternative fuel credit (include Form AFCR)	7	333444 00
8 Infrastructure user fee credit (include Form IUFC)	8	222333 00
9 Historic property preservation credit (include federal Form 3468)	9	111555 00
10 Mineral and coal exploration incentive credit (include Forms MINE-CERT and MINE-CRED)	10	555111 00
11 Empowerment zone credit	11	222555 00
12 Biodiesel blending and storage credit (include Form BBSC)	12	999777 00
13 Innovative educational program credit	13	10506 00
14 Student scholarship organization credit	14	9876 00
15 Emergency lodging credit (include Form ELC)	15	333222 00
16 Unlocking public lands credit	16	222111 00
17 Apprenticeship tax credit	17	15786 00
18 Media credit (include Form MEDIA-CLAIM and all supplemental information with Montana Schedules K-1)	18	9876 00
19 Trades education and training credit	19	00
Type of Credit Recapture		Amount of Credit Recapture
20 Historic property preservation credit recapture	20	111222 00
21 Biodiesel blending and storage credit recapture	21	444333 00
22 Oilseed crushing and biodiesel/biolubricant production credit recapture	22	555666 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.



Schedule IV – Montana Composite Income Tax Schedule**Part I. Eligible Participating Owners**

Enter the number of eligible participating owners.

20

See instructions for more information about eligible participants.

Part II. Composite Tax Ratio

Use the amount in column 3 to complete the calculation in column H below.

1

Enter the amount from page 1, line 14 of this form.

98989898 00

2

Enter the amount from page 1, line 20 of this form.

89898989 00

3

Divide column 2 by column 1. Do not enter more than 1.000000.

0.908163

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

	A	B	C	D	E	F	G	H
	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	PORK E PIG	123456789	123456 00	2500 00	2580 00	118376 00	7569 00	6874 00
2	GEORGE JETSON	234567890	234567 00	3500 00	2580 00	228487 00	15167 00	13774 00
3	MICKEY C MOUSE	345678901	345678 00	2500 00	2580 00	340598 00	22902 00	20799 00
4	ELMER D FUDD	456789123	45678 00	2500 00	2580 00	40598 00	2202 00	2000 00
5	CHARLIE W BROWN	789456123	55555 00	4000 00	2580 00	548975 00	37280 00	33856 00
6	CHIP N DALE	321321321	93789 00	3500 00	2560 00	87729 00	5454 00	4953 00
7	TEST U PHROZINTOWES	400005008	12312 00	2500 00	2580 00	7232 00	131 00	119 00
8	CHER BONO	338244835	34567 00	2500 00	2580 00	29487 00	1436 00	1304 00
9	SANTA M CLAUS	987654321	56789 00	2500 00	2580 00	51709 00	2969 00	2696 00
10	POPEYE SMITH	032998334	22102 00	2500 00	2580 00	17022 00	591 00	537 00
11	Enter the total composite tax from all additional pages, if used							24568 00
	Add column H, lines 1 through 11. This is your total composite income tax liability.							111480 00

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	

Schedule IV – Montana Composite Income Tax Schedule**Part I. Eligible Participating Owners**

Enter the number of eligible participating owners.

20

See instructions for more information about eligible participants.

Part II. Composite Tax Ratio

Use the amount in column 3 to complete the calculation in column H below.

1

Enter the amount from page 1, line 14 of this form.

98989898 00

2

Enter the amount from page 1, line 20 of this form.

89898989 00

3

Divide column 2 by column 1. Do not enter more than 1.000000.

0.908163

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

	A	B	C	D	E	F	G	H
	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	DAGWOOD JONES	987654321	23456 00	2500 00	2580 00	18376 00	673 00	611 00
2	FRED W FLINTSTONE JR	654654654	34567 00	2500 00	2580 00	29487 00	1436 00	1304 00
3	DAFFY C DUCK	404040404	40404 00	2500 00	2580 00	35324 00	1838 00	1669 00
4	RONALD J BLACKBURN	515151515	454545 00	3500 00	2580 00	448465 00	30345 00	27558 00
5	TEST J CADEN	323232323	32323 00	4000 00	2580 00	25743 00	1177 00	1069 00
6	TEST L JONES	123123123	12312 00	2500 00	2560 00	7252 00	132 00	120 00
7	JOHN J LAMB	990005008	98765 00	4000 00	2580 00	92185 00	5762 00	5233 00
8	ONE T SCENARIO	887788998	88997 00	2500 00	2580 00	83917 00	5191 00	4714 00
9	PETER A PAN	123987654	98765 00	2500 00	2580 00	93685 00	5865 00	5326 00
10	TESS L LUCKY	010101010	10101 00	2500 00	2580 00	5021 00	69 00	63 00
11	Enter the total composite tax from all additional pages, if used							00
	Add column H, lines 1 through 11. This is your total composite income tax liability.							47667 00

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



21TT0557

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	

Schedule VI – Reporting of Special Transactions

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

- | | | | |
|---|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----|
| 1 | The entity filed federal Form 8918 – Material Advisor Disclosure Statement with the IRS | <input checked="" type="checkbox"/> | Yes |
| 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. | <input checked="" type="checkbox"/> | Yes |
| 3 | The entity filed federal Form 8865 – Return of U.S. Persons with Respect to Certain Foreign Partnerships with the IRS | <input checked="" type="checkbox"/> | Yes |
| 4 | The entity filed federal Form 8886 – Reportable Transaction Disclosure Statement with the IRS | <input checked="" type="checkbox"/> | Yes |
| 5 | For S corporations only: The S corporation filed federal Form 8023 – Elections Under Section 338 for Corporations Making Qualified Stock Purchases with the IRS | <input checked="" type="checkbox"/> | Yes |

Complete this section if the PTE is a partnership.

- 6 Mark the box if the partnership filed one or more of the following forms in 2021.
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)**

- 7 Mark the box if the partnership had Montana source income and paid an imputed underpayment. If applicable, provide a copy of your federal audit adjustment report. (See instructions)

Complete this section if you made a disbursement to a related party.

- 8 During this tax year, the entity made payments to one or more related parties (excluding salary compensation) that exceeded \$100,000 per recipient.** ☒ Yes
- If you answered "Yes" to this question, please provide the name and federal employer identification number of each related party below and the amount that you paid to each related party:

[illegible]

Schedule VII – List of Disregarded Entities (DE)

	A	B	C	D	E	F	G	H	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	COMPANY ONE	654987321	32016546	X			X	X	654654 00
2	CORP ONE	320105465	65790879		X	10102018	X		321032 00
3	COMPANY TWO	032106546	65798765		X	05052015		X	65406 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									1041092 00



21TT0757

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 COMPANY ONE**Disregarded Entity FEIN** 654987321

		Everywhere		Montana	
Business Income	1a Gross income	1a	32130213 00		
	1b Returns and allowances	1b	3210654 00		
	1c Balance. Subtract line 1b from line 1a.	1c	28919559 00		
	1d Cost of goods sold (provide statement)	1d	65406 00		
	1e Gross profit. Subtract line 1d from line 1c.	1e	28854153 00		
	1f Other income including gains (provide statement)	1f	00 00		
	1g Add lines 1e and 1f. This is your total income.	1g	28854153 00		
Deductions	1h Wages	1h	32103 00		
	1i Rent	1i	00 00		
	1j Other deductions (provide statement)	1j	36579 00		
1k Add lines 1h through 1j. This is your total deductions.	1k	68682 00			
Other Income	1 Subtract line 1k from line 1g. This is your total income from trade or business.	1	28785471 00	1	20202020 00
	2 Net rental real estate income (loss)	2	35465 00	2	32103 00
	3 Other net rental income (loss)	3	00 00	3	00 00
	4 Guaranteed payments (partnerships only)	4	00 00	4	00 00
	5 Interest income	5	8789879 00	5	510650 00
	6 Ordinary dividends	6	00 00	6	00 00
	7 Royalties	7	00 00	7	00 00
	8 Net short-term capital gain (loss) (include federal Schedule D)	8	00 00	8	00 00
	9 Net long-term capital gain (loss) (include federal Schedule D)	9	00 00	9	00 00
	10 Net section 1231 gain (loss) (include federal Form 4797)	10	78987 00	10	45654 00
	11 Other income (loss) (include detailed statement)	11	00 00	11	00 00
	12 Section 179 deduction (include federal Form 4562)	12	00 00	12	00 00
	13 Other deductions (include detailed statement)	13	1236549 00	13	987654 00
	14 Add lines 1 through 11, then subtract lines 12 and 13	14	36453253 00	14	19802773 00
Adj.	15 Montana additions to income	15	00 00	15	00 00
	16 Montana subtractions from income	16	00 00	16	00 00
Total	17 Add lines 14 and 15, then subtract line 16. Mark this box if some income is apportionable. <input checked="" type="checkbox"/>	17	36453253 00	17	19802773 00
Apportionment Factor	1a Everywhere property	1a	6540654 00		
	1b Montana property			1b	132132 00
	1 Divide line 1b by line 1a. This is your Property factor.	1	002.0202		
	2a Everywhere payroll	2a	3210321 00		
	2b Montana payroll			2b	106549 00
	2 Divide line 2b by line 2a. This is your Payroll factor.	2	003.3190		
	3a Everywhere receipts	3a	65465446 00		
	3b Montana receipts			3b	198765 00
	3 Divide line 3b by line 3a. This is your Receipts factor.	3	000.3036		
	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. This is the sum of your factors.	5	005.6428		
	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.	6	001.8809		



Montana Adjustments Worksheet

		A		B		C		D		E	
		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	
Montana Adjustments to Everywhere Income	1 Montana Additions 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	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
	2 Montana Subtractions to Everywhere Income	Total	00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
		00	00	00	00	00	00	00	00	00	
		00	00	00	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	00	00	00	00	00	00
Adjustments to Montana Source Income	3 Montana Source Additions	Code	PTE's Apportionable Activities	Nonapportionable Income		From MT Schedules K-1, Part 3, Column II		From Schedules DE, Montana column, lines 15 and 16		Total Montana Source Income Adjustments	
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	00	00	00	00	00	00
			00	00	00	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	00	00	00	00	00
4 Montana Source Subtractions		00	00	00	00	00	00	00	00	00	
		00	00	00	00	00	00	00	00	00	
		00	00	00	00	00	00	00	00	00	
		00	00	00	00	00	00	00	00	00	
		00	00	00	00	00	00	00	00	00	
		00	00	00	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	00	00	00	00	00	



21TT0957

Montana Source Income Schedule

		A		B		C		D		E	
Sum of Montana source income per item of income (loss) and deduction.		Montana Source Income from Montana Schedules K-1		Montana Source Income from Schedules DE		Montana Source Income from Nonapportionable income		Montana Source income from PTE's apportionable activities		Total of columns A through D	
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		00		00		00		00
4 Guaranteed payments	4		00		00		00		00		00
5 Interest income	5		00		00		00		00		00
6 Ordinary dividends	6		00		00		00		00		00
7 Royalties	7		00		00		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



21TT1057

Montana Schedule K-1

(PTE)

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

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

Part 1	PTE Information	Mark applicable boxes: <input type="checkbox"/> Amended Schedule K-1 <input type="checkbox"/> Final Schedule K-1			
		Pass-through Entity's Name			
		Mailing Address			
		City	State	ZIP Code	
Part 2	Owner Information	Name		FEIN	
		Mailing Address		OR	
		City		State	ZIP Code
		Owner Type		Resident	Nonresident
		The owner is included in a composite income tax return		Profit and loss percentage	Capital/Ownership
		The owner filed Form PT-AGR		Year	
Part 3	Adj.	Montana Adjustments (See worksheet on page 9)		I	II
				Everywhere	Montana
Part 4	Montana Source Income	1 Additions	1	00	00
		2 Subtractions	2	00	00
		Distributive Share of Montana Source Income (Loss)			
		1 Ordinary business income (loss)	1	00	00
		2 Net rental real estate income (loss)	2	00	00
		3 Other net rental income (loss)	3	00	00
		4 Guaranteed payments	4	00	00
		5 Interest income	5	00	00
		6 Ordinary dividends	6	00	00
		7 Royalties	7	00	00
		8 Net short-term capital gain (loss)	8	00	00
		9 Net long-term capital gain (loss)	9	00	00
		10 Net section 1231 gain (loss)	10	00	00
11 Other income (loss) (include detailed statement)	11	00	00		
12 Section 179 expense deduction	12	00	00		
13 Other expense deductions	13	00	00		
Part 5	Information	Supplemental Information			
		1 Owner's share of Montana source income (loss)	1	00	00
		2 Montana composite income tax paid on behalf of owner	2	00	00
		3a Montana income tax withheld on behalf of owner. (See instructions)	3a	00	00
		3b Montana income tax withheld by a lower tier pass-through entity	3b	00	00
		3c Add lines 3a and 3b. This is your total Montana income tax withheld on your behalf.	3c	00	00
4 Montana mineral royalty tax withheld	4	00	00		
5 Other information. List type and amount	5	00	00		
Part 6	Tax Credits	Tax Credits and Recapture			
		1 Contractor's gross receipts tax credit. If multiple CGR accounts, mark here.	1	00	00
Part 7	PTE Use	Montana Adjustments Detail: Enter the amount and code of each adjustment entered on Part 3. (See instructions)			
		1 Code	2 Code	3 Code	00
		4 Code	5 Code	6 Code	00
		7 Code	8 Code	9 Code	00
		10 Code	11 Code	12 Code	00

