

2010 Montana Individual Income Tax Return

Form 2

For the year Jan 1 – Dec 31, 2010 or the tax year beginning [], 2010, ending [], 20[]

- Check if this is an amended return.
- Check here if this is a NOL carryback.

First name and initial	Last name	Social security number	If deceased, date of death
			M M D D Y Y Y Y
Spouse's first name and initial	Last name	Spouse's social security number	If deceased, date of death
			M M D D Y Y Y Y
Mailing address		City	State Zip+4

Filing Status (check only one box)	<input type="checkbox"/> 1 Single	
	<input type="checkbox"/> 2 Married filing jointly	
	<input type="checkbox"/> 3a Married filing separately on the same form	
	<input type="checkbox"/> 3b Married filing separately on separate forms	Spouse's SSN ▶
	<input type="checkbox"/> 3c Married filing separately and spouse not filing	Spouse's SSN ▶
<input type="checkbox"/> 4 Head of household		

Residency Status (check only one box)	<input type="checkbox"/> 5a Resident full year	Resident part-year required information ▼	
	<input type="checkbox"/> 5b Nonresident full year	Date of change	M M D D Y Y Y Y
	<input type="checkbox"/> 5c Resident part-year	State moved to	State moved from



Did you know?
You can e-file this form.
revenue.mt.gov/efile

Dependents	First name	Last name	Social security number	Relationship	Disabled
					Yes ▶ <input type="checkbox"/>
					Yes ▶ <input type="checkbox"/>
					Yes ▶ <input type="checkbox"/>



Column A (for single, joint, separate, or head of household)
▼
Column B (for spouse when filing separately using filing status 3a)
▼

Exemptions	6a <input checked="" type="checkbox"/> Yourself <input type="checkbox"/> 65 or older <input type="checkbox"/> Blind	Enter number checked ▶	6a	
	6b <input type="checkbox"/> Spouse <input type="checkbox"/> 65 or older <input type="checkbox"/> Blind	Enter number checked ▶	6b	
	6c Enter the total number of dependents. If more than 4 dependents, see instructions on page 4	▶	6c	
	6d Add lines 6a thru 6c and enter total exemptions here	▶	6d	

Enter amounts on lines 7 through 38 corresponding to your federal return. Round to nearest dollar. If no entry, leave blank.

Federal Income	Line	Description	Amount	Taxable amount
	7	Wages, salaries, tips, etc. Attach federal Form(s) W-2.		00
8a	Taxable interest. Attach federal Schedule B if required.		00	00
8b	Tax-exempt interest. Do not include on line 8a.	8b	00	00
9	Ordinary dividends. Attach federal Schedule B if required.		00	00
10	Taxable refunds, credits, or offsets of state and local income taxes.		00	00
11	Alimony received.		00	00
12	Business income or (loss). Attach federal Schedule C or C-EZ. NAICS: ▶		00	00
13	Capital gain or (loss). Attach federal Schedule D if required.		00	00
14	Other gains or (losses). Attach federal Schedule 4797.		00	00
15a	IRA distributions.	15a	00	00
15b	Taxable amount.		00	00
16a	Pensions and annuities.	16a	00	00
16b	Taxable amount.		00	00
17	Rental real estate, royalties, partnerships, S corporations, trusts. Attach federal Schedule E.		00	00
18	Farm income or (loss). Attach federal Schedule F.		00	00
19	Unemployment compensation.		00	00
20a	Social security benefits.	20a	00	00
20b	Taxable amount.		00	00
21	Other income, list type. ▶		00	00
22	Add the amounts in columns A and B for lines 7 thru 21. This is your total income. ▶		00	00

State Income Tax Return Forms

You can prepare and efile this tax form on efile.com as part of your current Federal and/or State Tax Return on from:

Early January until mid October

[You can start, prepare, and efile your tax return now](#)

You will just need to answer a few tax questions and the efile.com tax preparation software will select the correct tax forms for you.



Attention

If you missed the mid October efile deadline for the current tax year you have the following options to prepare and file your tax return:

1. You can download the State Tax form here:

<http://www.efile.com/support-state-tax-agency-list/>

2. Work online on your tax return with an efile Tax Professional

[Start working with a LIVE TaxPRO](#)

3. Download Federal tax forms by tax year, complete and mail to the IRS

[Download Federal Tax Forms](#)

Free Tax Tools, Calculators and Educators

Head of Household Educator:

<http://www.efile.com/claim-head-of-household-single-qualifying-person-requirement-tax-tool/>

Qualifying Child Dependent Educator:

<http://www.efile.com/qualifying-child-test-qualified-dependent-tax-tool/>

Qualifying Relative Educator:

<http://www.efile.com/qualifying-relative-test-dependent-requirement-tax-tool/>

Earned Income Tax Credit Educator:

<http://www.efile.com/what-is-the-earned-income-tax-credit-eitc-eic-eligibility-schedule-calculator/>

Child Tax Credit Educator:

<http://www.efile.com/how-to-qualify-for-child-tax-credit-deduction-requirements-tool/>

Got Tax Questions? [Contact efile.com!](#)

SSN input boxes

Column A (for single, joint, separate, or head of household)

Column B (for spouse when filing separately using filing status 3a)

Payments and Refundable Credits

Table with 4 columns: Description, Line Number, Column A, Column B. Rows 54-65.

Penalties, Interest and Contributions

Table with 4 columns: Description, Line Number, Column A, Column B. Rows 66-69.

Amount You Owe or Your Refund

Table with 4 columns: Description, Line Number, Column A, Column B. Rows 70-74.

For Direct Deposit of your refund, complete 1, 2, 3, and 4. Please see instructions on page 14.

1. RTN# [input boxes]

2. ACCT# [input boxes]

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

4. Is this refund going to an account that is located outside of the United States or its territories? [] Yes [] No

If applicable, check appropriate box.

[] 2/3 farming gross income

[] Estimated payments were made using the annualization method

Name, address and telephone number of paid preparer

[] Do not mail forms and instructions next year

Paid preparer's PTIN, SSN or FEIN: [input boxes]

May the DOR discuss this tax return with your tax preparer? See instructions on page 41. [] Yes [] No

Signature table with columns: Your signature is required, Date, Daytime telephone number, Spouse's signature, Date. Includes 'X' marks.

I declare under penalty of false swearing that the information in this tax return and attachments is true, correct and complete.

