

No Staples

# 2011 Montana Individual Income Tax Return

# Form 2

For the year Jan 1 – Dec 31, 2011 or the tax year beginning       2 0 1 1 and ending       2 0 Y Y

Mark all that apply.

Amended Return

NOL Carryback

First Name and Initial	Last Name	Social Security Number	Deceased? Date of Death
			<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Spouse's First Name and Initial	Last Name	Spouse's Social Security Number	Deceased? Date of Death
			<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Mailing Address		City	State Zip+4

**Filing Status**  
 Mark only one box.

- 1 Single
- 2 Married filing jointly
- 3a Married filing separately on the same form
- 3b Married filing separately on separate forms Spouse's SSN
- 3c Married filing separately and spouse not filing
- 4 Head of household

**Residency Status**  
 Mark only one box.

- 5a Resident full year
  - 5b Nonresident full year
  - 5c Resident part-year
- | Resident Part-Year Required Information |   |
|---|---|
| Date of change ▶                        | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| State moved to ▶                        | <input type="text"/> <input type="text"/>   |
| State moved from ▶                      | <input type="text"/> <input type="text"/>   |



**Did you know?**  
You can e-file this form.  
[revenue.mt.gov/efile](http://revenue.mt.gov/efile)

Dependents

First Name	Last Name	Social Security Number	Relationship	Disabled
				<input type="checkbox"/> Yes
				<input type="checkbox"/> Yes
				<input type="checkbox"/> Yes
				<input type="checkbox"/> Yes

Exemptions

6a	<input checked="" type="checkbox"/> Yourself	<input type="checkbox"/> 65 or older	<input type="checkbox"/> Blind	Enter number marked ▶	6a	Column A (for single, joint, separate, or head of household)	Column B (for spouse when filing separately using filing status 3a)
6b	<input type="checkbox"/> Spouse	<input type="checkbox"/> 65 or older	<input type="checkbox"/> Blind	Enter number marked ▶	6b		
6c	Enter the total number of dependents. If more than 4 dependents, see instructions on page 3.				▶	6c	
6d	Add lines 6a through 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

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



\*11CE0101\*

## 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!](#)**

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Federal Adjusted Gross Income

Montana AGI

Taxable Income

Tax, Nonrefundable Credits and Recapture

	Column A (for single, joint, separate, or head of household)	Column B (for spouse when filing separately using filing status 3a)
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23	Your total income from line 22.	▶	23		00		00
24	Educator expenses.	▶	24		00		00
25	Certain business expenses of reservist, etc. Include federal Form 2106 or 2106-EZ.	▶	25		00		00
26	Health savings account deduction. Include federal Form 8889.	▶	26		00		00
27	Moving expenses. Include federal Form 3903.	▶	27		00		00
28	Deductible part of self-employment tax. Attach federal Schedule SE.	▶	28		00		00
29	Self-employed SEP, SIMPLE, and qualified plans.	▶	29		00		00
30	Self-employed health insurance deduction.	▶	30		00		00
31	Penalty on early withdrawal of savings.	▶	31		00		00
32a	Alimony paid.	▶	32a		00		00
32b	Recipient's SSN. ▶ 32b						
33	IRA deduction.	▶	33		00		00
34	Student loan interest deduction.	▶	34		00		00
35	Tuition and fees.	▶	35		00		00
36	Domestic production activities deduction. Include federal Form 8903.	▶	36		00		00
37	Add lines 24 through 36 and enter the result here. <input type="checkbox"/> Federal write-ins.	▶	37		00		00
38	Subtract line 37 from line 23 and enter the result here.	▶	38		00		00
38a	Combine amounts on line 38 columns A and B and enter here. <b>This is your federal adjusted gross income.</b> ▶		38a			00	
39	Enter Montana additions to federal adjusted gross income from Form 2, page 4, Schedule I, line 17.	▶	39		00		00
40	Enter Montana subtractions from federal adjusted gross income from Form 2, page 5, Schedule II, line 35.	▶	40		00		00
41	Add lines 38 and 39; subtract line 40. <b>This is your Montana adjusted gross income.</b> ▶		41		00		00
42	Deductions <input type="checkbox"/> Standard Deduction (see Worksheet V on page 46) <input checked="" type="checkbox"/> Itemized Deductions (from Form 2, Schedule III, line 32)	▶	42		00		00
43	Subtract line 42 from line 41 and enter the result here.	▶	43		00		00
44	Exemptions (All individuals are entitled to at least one exemption.) Multiply \$2,190 by the number of exemptions on line 6d and enter the result here.	▶	44		00		00
45	Subtract line 44 from line 43 and enter the result here. <b>This is your taxable income.</b> ▶		45		00		00
46	Tax from the tax table on page 7 or from Form 2, page 4. If line 45 is zero or less than zero, enter zero.	▶	46		00		00
47	2% capital gains tax credit.	▶	47		00		00
48	Subtract line 47 from line 46; enter the result here, but not less than zero. <b>This is your resident tax after capital gains tax credit.</b> ▶		48		00		00
48a	Nonresident, part-year resident tax after capital gains tax credit. Enter here the amount from Form 2, Schedule IV, line 22, but not less than zero.	▶	48a		00		00
49	Tax on lump-sum distributions. Include federal Form 4972.	▶	49		00		00
50	Add lines 48 or 48a and 49 and enter the result here. <b>This is your total tax.</b> ▶		50		00		00
51	Enter the amount from Form 2, Schedule V, line 23, but do not enter an amount larger than the amount on line 50. <b>This is your total nonrefundable credits.</b> ▶		51		00		00
52	Recapture tax(es) (see instructions on page 7). Code <input type="text"/> <input type="text"/> Code ▶		52		00		00
53	Add lines 50 and 52, then subtract the amount on line 51 and enter the result here. <b>This is your 2011 tax liability.</b> ▶		53		00		00

Questions? Call us toll free at (866) 859-2254 or in Helena at 444-6900 or TDD (406) 444-2830 for hearing impaired.



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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

54	Your 2011 tax liability from line 53.	▶	54		00		00
55	Montana income tax withheld. Include federal Form(s) W-2 and 1099.	▶	55		00		00
56	Montana mineral royalty tax withheld. Include federal Form(s) 1099 and supporting schedule, if any.	▶	56		00		00
57	Montana pass through entity withholding. Include Montana Schedule K-1 or Form PT-WH.	▶	57		00		00
58	2011 estimated tax payments and amount applied from your 2010 return.	▶	58		00		00
59	2011 extension payments from Form EXT-11.	▶	59		00		00
60	Refundable credits from Form 2, Schedule V, line 29.	▶	60		00		00
61	<b>If filing an amended return:</b> Payments made with original return.	▶	61		00		00
62	<b>If filing an amended return:</b> Previously issued refunds.	▶	62		00		00
63	Add lines 55 through 61. Subtract line 62, enter the result here. <b>This is your total payments.</b>	▶	63		00		00
64	If line 54 is greater than line 63, subtract line 63 from line 54. <b>This is your tax due.</b>	▶	64		00		00
65	If line 63 is greater than line 54, subtract line 54 from line 63. <b>This is your tax overpaid.</b>	▶	65		00		00

Penalties, Interest and Contributions

66	Interest on underpayment of estimated taxes (see instructions on page 9). If applicable, <input checked="" type="checkbox"/> mark appropriate box: <input type="checkbox"/> 2/3 farming gross income <input type="checkbox"/> Estimated payments were made using the annualization method	▶	66				00
67	Late file penalty, late payment penalty and interest (see instructions on page 10).	▶	67				00
68	Other penalties (see instructions on page 10).	▶	68				00
69	Total voluntary check-off contribution programs from lines 69a through 69d.	▶	69				00

69a	Nongame Wildlife Program	◀ \$5	◀ \$10		00	◀ other amount
69b	Child Abuse Prevention	◀ \$5	◀ \$10		00	◀ other amount
69c	Agriculture in Schools	◀ \$5	◀ \$10		00	◀ other amount
69d	Montana Military Family Relief Fund	◀ \$5	◀ \$10		00	◀ other amount

Amount You Owe or Your Refund

70	Add lines 66 through 69 and enter the result. <b>This is the sum of your total penalties, interest and contributions.</b>	▶	70				00
71	If you have tax due (amount on line 64), add lines 64 and 70 OR, if you have a tax overpayment (amount on line 65) and it is less than line 70, subtract line 65 from line 70. Enter the result here. If married filing separately and there are amounts on lines 64 and 65, please see instructions on page 11. <b>This is the amount you owe.</b>	▶	71				00
<p><b>Why not e-pay? See your options at revenue.mt.gov.</b> If writing a check, make it payable to MONTANA DEPARTMENT OF REVENUE.</p>							
72	If you have a tax overpayment (amount on line 65) and it is greater than line 70, subtract line 70 from line 65 and enter the result here. <b>This is your overpayment.</b>	▶	72				00
73	Enter the amount from line 72 that you want applied to your 2012 estimated taxes.	▶	73				00
74	Subtract line 73 from line 72 and enter the result here. <b>This is your refund.</b>	▶	74				00

For Direct Deposit of your refund, complete 1, 2, 3, and 4 (please see instructions on page 12).

1. RTN# 

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      2. ACCT# 

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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

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.  
Your Signature is Required      Date      Daytime Telephone Number      Spouse's Signature      Date

Paid Preparer's Signature      Paid Preparer's PTIN/SSN      Firm's FEIN

Third Party Designee      Third Party Designee's Printed Name

Do you want to allow your spouse and another person to discuss this return with us (see page 13)?  
 Yes     No

Third Party Designee's Phone Number

Mark this box if you do not want forms and instructions mailed to you next year.

