

2021 Montana Individual Income Tax Return

Form 2

Page 1 For the year Jan 1 - Dec 31, 2021 or the tax year beginning and ending

First name and initial Last name Social Security Number Deceased? Date of death

A A 490549999

Mark if this is Spouse's first name and initial Last name Spouse's Social Security Number Deceased? Date of death

an amended B A 490548888

return. Current mailing address City State ZIP Code + 4

(See page 2)

Filing Status

1 Single 3 Head of household 4 Married filing jointly **Residency Status** **X** 1 Resident full-year North Dakota reciprocity

X 2a Married filing separately on the same form. Mark only one box. 2 Nonresident full-year

2b Married filing separately on separate forms If using 2b or 2c, enter your spouse's SSN below. 3 Resident part-year (See instructions)

2c Married filing separately and spouse not filing

Dependents

First name	Last name	Social Security Number	Relationship	Mark if disabled
C	A	490547777	DAU	
C	A	490546666	DAU	
E	A	490545555	DAU	

				Column A	Column B (for spouse when filing separately using filing status 2a)
Exemptions	a X Yourself 65 or older Blind Enter number marked a	1			
	b X Spouse 65 or older Blind Enter number marked b	0		1	
	c Enter the total number of dependents. If more than 3 dependents, see instructions. c	3		0	
	d Add lines a through c. This is your total number of exemptions. d	4		1	
Federal Income	1 Wages, salaries, tips, etc. Include federal Form(s) W-2 1	84629 00		22733 00	
	2a Tax-exempt interest 2a 00 00 2b Taxable interest 2b	00		00	
	3a Qualified dividends 3a 00 00 3b Ordinary dividends 3b	00		00	
	4a IRA distributions 4a 00 00 4b Taxable amount 4b	00		00	
	5a Pensions and annuities 5a 00 00 5b Taxable amount 5b	00		00	
	6a Social Security benefits 6a 00 00 6b Taxable amount 6b	00		00	
	7 Capital gain or (loss). Attach Schedule D if required. If not required, mark here 7	00		00	
	8 Other income from Schedule 1, line 10 (See page 3) 8	00		00	
	9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income. 9	84629 00		22733 00	
	10 Adjustments to income from Schedule 1, line 25 (See page 3) 10	00		00	
Taxable Income	11 Subtract line 10 from line 9. This is your federal adjusted gross income. 11	84629 00		22733 00	
	12 Montana additions (See page 4) 12	00		00	
	13 Montana subtractions (See page 5) 13	00		00	
	14 Montana Adjusted Gross Income. Add lines 11 and 12, then subtract line 13. 14	84629 00		22733 00	
	15 Standard or itemized deductions. Mark this box and include page 7 if you elect to itemize. 15	4830 00		4547 00	
	16 Exemptions. Multiply \$2,580 by your total number of exemptions. 16	10320 00		2580 00	
	17 Taxable income. Subtract lines 15 and 16 from line 14. If zero or less, enter 0. 17	69479 00		15606 00	
	18 Tax liability before credits (See instructions) 18	4195 00		506 00	
	19 Nonrefundable credits (See page 9.) Do not enter an amount larger than line 18. 19	00		00	
	20 Tax after nonrefundable credits. Subtract line 19 from line 18. 20	4195 00		506 00	
Tax, Credits and Payments	21 Montana tax withheld on Forms W-2 and 1099 21	00		00	
	22 Other payments and refundable credits (See page 11) 22	00		00	
	23a Earned Income Tax Credit Enter your federal EITC 23a 00				
	23b Multiply line 23a by 3% (0.03) and enter the result (Status 2a filers: See instructions) 23b	00		00	
	24 Contributions, penalties, and interest (See page 11) 24	00		00	
	25 Total payments. Add lines 21, 22, and 23b, then subtract line 24. 25	00		00	
	26 If line 25 is less than line 20, subtract line 25 from line 20. This is your TAX DUE 26	4195 00		506 00	
	Pay online at https://tap.dor.mt.gov or make checks payable to Montana Department of Revenue				
	27 If line 25 is more than line 20, subtract line 20 from line 25. This is your TAX OVERPAID 27	00		00	

Go to Page 2 to complete your return and claim any refund.



Filing Status 2a Payment Schedule

If your filing status is 2a, you **must complete** this schedule **only if** there is an amount on page 1, line 26, **and** on page 1, line 27.

Under filing status 2a, your overpayment is applied to the amount owed by your spouse before you can claim the net overpayment on the Refund Schedule.

1 Enter the amount from line 26, tax due	1	00
2 Enter the amount from line 27, tax overpaid	2	00
3 Subtract line 2 from line 1, enter the result but not less than zero	This is your net amount due. 3	00
4 Subtract line 1 from line 2, enter the result but not less than zero	This is your net overpayment. 4	00

The amount on line 4 (above) must be entered on Refund Schedule, line 1 (below), and in the column of the spouse with an overpayment on page 1, line 27.

Refund Schedule

		A	B
1 Enter your overpayment from page 1, line 27 or from the Filing Status 2a Payment Schedule, line 4	1	00	00
2 Amount from line 1 you want applied to your 2022 estimated tax	2	00	00
3 Amount from line 1 you want deposited into a 529 or 529A account (See page 12)	3	00	00
4 Subtract lines 2 and 3 from line 1.	This is your REFUND ► 4	00	00

If you are filing a return in Montana for the first time, direct deposit is not available. Stop here and sign your return below.

If the direct deposit option is available and you wish to use it, provide your bank account information, and sign your return below.

**Your
Direct
Deposit
Account**

RTN#

ACCT#

If using direct deposit, you are required to mark one box.

Checking

Savings

If this deposit is going to an account located outside of the United States or its territories, mark this box.

REQUIRED**Signature, Paid Preparer, and Third-Party Designee**

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.

Spouse's signature

X _____
Taxpayer daytime phone number

Date
09172026

X _____
Date
09172026

Paid preparer's signature

Preparer's PTIN

Firm's FEIN

Mark if paid preparer is also a Third-Party Designee.

Preparer daytime phone number

Mark the box if you want to allow another person (other than a paid preparer) to discuss this return with us.

Name

Phone number

Farming business net operating loss carryback waiver. Mark this box if you do not want to carry back your 2021 farming business net operating loss.

Amended Return Information

Mark the appropriate box.

In the table below, indicate the reasons for the changes you made to your Montana tax return.

	Form or Schedule	Line or Box	Reason
a NOL carryback			
b Federal audit			
c Amended federal return			
d Filing status			
e Other			



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Resident Part-Year Required Information

Date of Change

State moved to

State moved from

Nonresident / Part-Year Resident Ratio Schedule

Enter your Montana source income that is included in Montana adjusted gross income on page 1, line 11.

		A	B
MT AGI Ratio	Enter your Montana source income that is included in Montana adjusted gross income on page 1, line 11.		
	1 Wages, salaries, tips, etc.	00	00
	2 Interest	00	00
	3 Ordinary dividends	00	00
	4 Refunds, credits, or offsets of local income taxes	00	00
	5 Alimony received	00	00
	6 Business income or (loss)	00	00
	7 Capital gain or (loss)	00	00
	8 Other gains or (losses)	00	00
	9 IRAs, pensions, and annuities	00	00
	10 Rental real estate, royalties, partnerships, S corporations, trusts, etc.		
	Mark this box if Montana source losses are carried over to next year. (See instructions)	00	00
	11 Farm income or (loss)	00	00
	12 Social Security benefits	00	00
	13 Other income and adjustments to income (See instructions)	00	00
	14 Montana source additions to income (See instructions)	00	00
	15 Montana source net operating loss (See instructions)	00	00
	16 Montana source income. Add lines 1 through 15.	00	00
17 Enter your Montana adjusted gross income from page 1, line 14	00	00	
18 Divide the amount on line 16 by the amount on line 17.			
Round to 6 decimal places and do not enter more than 1.000000.			
This is your nonresident or part-year resident ratio.			

Tax Liability Schedule

Full-year residents must skip lines 3a, 3b and 5. Nonresidents calculate their tax on lines 2 and 3a or compute the tax on their volume of sales on line 3b when eligible.

		A	B
Tax Liability	the tax on their volume of sales on line 3b when eligible.		
	1 Tax from the tax table below	1 4195 00	506 00
	2 Recapture taxes (See instructions) Code Code	2 00	00
	3a Nonresident tax. Multiply line 1 by the nonresident ratio above and add line 2. Enter the total on page 1, line 18.	3a 00	00
	3b Alternative tax method for certain nonresidents (See instructions)	3b 00	00
	4 Tax on lump-sum distributions. Include federal Form 4972.	4 00	00
	5 Part-year resident tax. Multiply line 1 by the part-year resident ratio above, and add lines 2 and 4. Enter the total on page 1, line 18.	5 00	00
	6 Resident tax. Add lines 1, 2 and 4, and enter the total on page 1, line 18.	6 4195 00	506 00

2021 Montana Individual Income Tax Rates

If your taxable income (page 1, line 17) is:

More than	But not more than	Then your tax rate is	Less
\$0	\$3,100	1% of taxable income	\$0
\$3,100	\$5,500	2% of taxable income	\$31
\$5,500	\$8,400	3% of taxable income	\$86
\$8,400	\$11,400	4% of taxable income	\$170
\$11,400	\$14,600	5% of taxable income	\$284
\$14,600	\$18,800	6% of taxable income	\$430
More than \$18,800		6.9% of taxable income	\$599

Example:

Your taxable income is \$25,000.
 $\$25,000 \times 6.9\% (0.069) = \$1,725$
 $\$1,725 - \$599 = \$1,126$ tax

