

2011 Montana Partnership Information and Composite Tax Return

Include a complete copy of federal Form 1065 and all related forms and schedules.

For calendar year 2011 or tax year beginning

MMDD2011

and ending

MMDDYYYY

Mark all that apply:

- Initial return
Final return
Amended return
Refund return
PTP
Technical Termination

Name, Mailing Address, City, State, Zip Code + 4, If new address, mark here.

FEIN, Enter number of Schedules K-1 Included, Resident Partners, Nonresident Partners, Other Types of Partners

Date Registered in Montana MMDDYYYY

MT Secretary of State ID #

State formed in on MMDDYYYY

Federal Business Code/NAICS

Partners' Distributive Share of Income Items (Form 1065, Schedule K)

Table with 3 columns: Description, Line Number, Amount. Rows include Ordinary business income, Net rental real estate income, etc.

Partners' Distributive Share of Deduction Items (Form 1065, Schedule K)

Table with 3 columns: Description, Line Number, Amount. Rows include Section 179 deduction, Contributions, etc.

Partners' Distributive Share of Montana Additions and Deductions to Income

Table with 3 columns: Description, Line Number, Amount. Rows include Interest and dividends not taxable, Taxes based on income, etc.

Partners' Distributive Share of Multistate Apportionment and Allocation

Table with 3 columns: Description, Line Number, Amount. Rows include Income apportioned to Montana, Income allocated to Montana, etc.



Calculation of Amount Owed or Refund

Table with 2 columns: Description and Amount. Row 22: Enter your Montana total composite tax from Schedule III, column E. Row 23: Enter the amount of total partner withholding from Schedule III, column F.

Partnership Montana Mineral Royalty Tax Withheld

Table with 2 columns: Description and Amount. Rows 24a-e: Total Montana mineral royalty tax withheld, breakdown by resident/nonresident, and total amount due after adjustments.

Return Payments

Table with 2 columns: Description and Amount. Rows 25a-f: 2010 overpayment, 2011 estimated payments, extension payment, income tax withheld, and total return payments.

Penalties and Interest (see instructions)

Table with 2 columns: Description and Amount. Rows 27a-f: Partnership information return late filing penalty, interest on underpayment, composite income tax return late filing penalty, late payment penalty, and total penalties and interest.

Amount Owed or Refund

Table with 2 columns: Description and Amount. Row 28: Add lines 26 and 27f. Row 29: If line 28 results in an amount due, enter it here.

Why not e-pay? See your options at revenue.mt.gov. If writing a check, make it payable to MONTANA DEPARTMENT OF REVENUE.

Table with 2 columns: Description and Amount. Rows 30-32: Overpayment entry, estimated tax applied, and final refund amount.

Form section for Direct Deposit of your refund, including fields for RTN#, ACCT#, and account type (Checking/Savings).

Form section for e-file options and preparer information, including 'Did you know?' and 'Mark if you do not need Form PR-1 sent next year.'

May the DOR discuss this tax return with your tax preparer? Yes No

This tax return has to be signed by a general partner or limited liability company member manager. Declaration - Under penalties of false swearing, I declare that I have examined this return...

Form section for signature and contact information: Signature of General Partner or LLC Member Manager, Date, Printed Name and Title, Telephone Number.

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



Schedule I - Apportionment Factors for Multistate Partnerships

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. Property of foreign subsidiaries included in combined unitary group	1j.		00		00
1k. Property of unconsolidated subsidiaries included in combined unitary group	1k.		00		00
1l. Property of pass-through entities included in combined unitary group	1l.		00		00
1m. Multiply amount of rents by 8 and enter result	1m.		00		00
Total Property Value add lines 1a through 1m			00		00

Divide the total in column B by the total in column A. Multiply the result by 100. **This is your property factor.** 1. %

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. Payroll of foreign subsidiaries included in combined unitary group	2e.		00		00
2f. Payroll of unconsolidated subsidiaries included in combined unitary group	2f.		00		00
2g. Payroll of pass-through entities included in combined unitary group	2g.		00		00
Total Payroll Value add lines 2a through 2g			00		00

Divide the total in column B by the total in column A. Multiply the result by 100. **This is your payroll factor.** 2. %

3. Sales (Gross Receipts) Factor:

3a. Gross sales, less returns and allowances	3a.		00		
3b. Sales delivered or shipped to Montana purchasers:					
(1) Shipped from outside Montana	3b.(1)				00
(2) Shipped from within Montana	3b.(2)				00
3c. Sales 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. Sales other than sales of tangible personal property (i.e. service income)	3d.				00
3e. Net gains reported on federal Schedule D and federal Form 4797	3e.		00		00
3f. Other gross receipts (rents, royalties, interest, etc)	3f.		00		00
3g. Sales (receipts) of foreign subsidiaries included in combined unitary group	3g.		00		00
3h. Sales (receipts) of unconsolidated subsidiaries included in combined unitary group	3h.		00		00
3i. Sales (receipts) of pass-through entities included in combined unitary group	3i.		00		00
3j. Less: All intercompany transactions	3j.		00		00
Total Sales Value add lines 3a through 3j			00		00

Divide the total in column B by the total in column A. Multiply the result by 100. **This is your sales factor.** 3. %

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

5. Divide the total percentage on line 4, column C, by the number of factors that can be included in the calculation. If there is a value in column A for a factor category (Property, Payroll, or Sales) you should include this factor as part of the calculation (see instructions). Enter the results here and also insert on Form PR-1, page 1, line 19. This is your apportionment factor. 5. %



Schedule II - Montana Partnership Tax Credits

Type of Credit	Amount of Credit
1. Dependent Care Assistance Creditinclude Form DCAC	00
2. College Contribution Creditinclude Form CC	00
3. Health Insurance for Uninsured Montanans Credit include Form HI	00
4. Recycle Credit include Form RCYL	00
5. Alternative Energy Production Credit include Form AEPC	00
6. Contractor's Gross Receipts Tax Credit. If multiple CGR accounts, please <input checked="" type="checkbox"/> mark here. <input type="checkbox"/>	
CGR Account ID: <input type="text"/> - <input type="text"/> - <input type="text"/> CGR	00
7. Alternative Fuel Credit include Form AFCR	00
8. Infrastructure Users Fee Credit include Form IUFC	00
9. Qualified Endowment Credit include Form QEC	00
10. Historic Property Preservation Credit include federal Form 3468	00
11. Increase Research and Development Activities Creditinclude Form RSCH	00
12. Mineral and Coal Exploration Incentive Creditinclude Forms MINE-CERT and MINE-CRED	00
13. Empowerment Zone Credit.....	00
14. Film Production Creditinclude Form FPC	00
15. Biodiesel Blending and Storage Credit..... include Form BBSC	00
16. Oilseed Crushing and Biodiesel/Biolubricant Production Credit..... include Form OSC	00
17. Insure Montana Small Business Health Insurance Credit.	
Business FEIN: <input type="text"/> - <input type="text"/>	00
18. Temporary Emergency Lodging Creditinclude Form TELC	00
Type of Credit Recapture	Amount of Credit Recapture
19. Qualified Endowment Credit Recapture	00
20. Historic Property Preservation Credit Recapture.....	00
21. Film Production Credit Recapture	00
22. Biodiesel Blending and Storage Credit Recapture	00
23. Oilseed Crushing and Biodiesel/Biolubricant Production Credit Recapture	00

Any credit or credit recapture from a partnership has to be attributable to its partners using the same proportion that is used when it reported that partner's income or loss for Montana income tax purposes. Please include a detailed breakdown that shows each partner's share of the credit or credit recapture.

Please notify each partner of the amount of credit available to that partner by using Montana Schedule K-1.



Schedule III – Montana Partnership Information

Summary Schedule and Supplemental Information

Complete columns E, F and G if the partner is a nonresident individual, estate, trust, foreign C corporation or second tier pass through entity.

Complete columns A through D for all partners.

A	B	C	D	E	F	G
Name Street Address or PO Box City State Zip Code	Entity Type and Identification Number (FEIN or SSN)	Residency Code (R/N)	Ownership %	Composite Income Tax (from Schedule IV, column H)	Partner Withholding (see instructions)	PT-AGR or PT-STM (year)
1.	Entity Type (see codes below)	<input type="checkbox"/> R				
	FEIN	<input type="checkbox"/> N		00	00	
	SSN					
2.	Entity Type (see codes below)	<input type="checkbox"/> R				
	FEIN	<input type="checkbox"/> N		00	00	
	SSN					
3.	Entity Type (see codes below)	<input type="checkbox"/> R				
	FEIN	<input type="checkbox"/> N		00	00	
	SSN					
4.	Entity Type (see codes below)	<input type="checkbox"/> R				
	FEIN	<input type="checkbox"/> N		00	00	
	SSN					
5.	Entity Type (see codes below)	<input type="checkbox"/> R				
	FEIN	<input type="checkbox"/> N		00	00	
	SSN					
6.	Entity Type (see codes below)	<input type="checkbox"/> R				
	FEIN	<input type="checkbox"/> N		00	00	
	SSN					
7.	Entity Type (see codes below)	<input type="checkbox"/> R				
	FEIN	<input type="checkbox"/> N		00	00	
	SSN					
8. Enter the totals of columns D, E and F from all additional pages, if used				00	00	
Enter the totals of columns D, E and F.....				00	00	

Transfer the total from column E to Form PR-1, line 22. Transfer the total from column F to Form PR-1, line 23.
Include all additional pages from line 8 with the tax return.

Column B Entity Type Codes:					
C – C corporation	E – Estate	F – Foreign C corporation	I – Individual	P – Partnership	T – Trust



Schedule IV – Montana Partnership Composite Income Tax Schedule

Part I Only include eligible participating partners (see instructions). Enter the number of participating partners.

Part II Composite Tax Ratio

	1	2	3	4
Complete either line a or line b below.	Enter the amount from Form PR-1, line 15	Enter the amount from Form PR-1, line 18	Enter the amount from Form PR-1, line 21	Divide either column 2 or 3 by column 1
a. If the entity is doing business only in Montana.....				
b. If the entity is a multistate partnership.....				

Part III Enter below in columns A through H the required information and amounts for each eligible participating partner.

A	B	C	D	E	F	G	H	
Name	Social security number or federal employer identification number	Partner's share of federal income from entity	Standard deduction	Exemption \$2,190	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 times composite tax ratio from Part II.	
1.		00	00	00	00	00	00	
2.		00	00	00	00	00	00	
3.		00	00	00	00	00	00	
4.		00	00	00	00	00	00	
5.		00	00	00	00	00	00	
6.		00	00	00	00	00	00	
7.		00	00	00	00	00	00	
8.		00	00	00	00	00	00	
9.		00	00	00	00	00	00	
10.		00	00	00	00	00	00	
11. Enter the total composite tax from all additional pages, if used							11. 00	
							Add column H, lines 1 through 11. This is your total composite income tax liability.	00



11DY0601

Transfer the amounts from column H to Form PR-1, Schedule III, column E.

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	\$2,700	1% (0.010)	\$0	
\$2,700	\$4,700	2% (0.020)	\$27	
\$4,700	\$7,200	3% (0.030)	\$74	
\$7,200	\$9,700	4% (0.040)	\$146	

If Your Taxable Income Is More Than	But Not More Than	Multiply Your Taxable Income By	And Subtract	This Is Your Tax
\$9,700	\$12,500	5% (0.050)	\$243	
\$12,500	\$16,000	6% (0.060)	\$368	
More Than \$16,000		6.9% (0.069)	\$512	

Schedule VI – Reporting of Special Transactions

Complete Schedule VI only if your partnership 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 for this tax year. If your answer is “Yes” to one or more of these forms, you will need to include a complete copy of your federal tax return Form 1065.

1. The partnership filed federal Form 8918 – Material Advisor Disclosure Statement with the Internal Revenue Service. Yes

Form 8918 is required to be filed by material advisors to any reportable transactions.

2. The partnership filed federal Form 8824 – Like-Kind Exchanges with the Internal Revenue Service. Yes

NOTE: Mark the box if your like-kind exchange includes Montana property. Nonresidents do not have to report a like-kind exchange if the properties involved do not include Montana property.

Form 8824 is used to report each exchange of business or investment property for property of a like-kind.

3 The partnership filed federal Form 8865 – Return of U.S. Persons With Respect to Certain Foreign Partnerships with the Internal Revenue Service. Yes

Form 8865 is used to report the information required under 26 USC 6038 (reporting with respect to controlled foreign partnerships), Section 6038B (reporting of transfers to foreign partnerships), or Section 6046A (reporting of acquisitions, dispositions and changes in foreign partnership interest).

4. The partnership filed federal Form 8886 – Reportable Transaction Disclosure Statement with the Internal Revenue Service. Yes

Form 8886 is used to disclose information for each reportable transaction in which you participated.

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

5. During this tax year, the partnership made payments to one or more related parties (excluding salary compensation) that exceed \$100,000 per recipient. Yes

If your answer is “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:

Name	FEIN	Amount of Payment
		00
		00
		00

