File, pay, and view your past returns and transactions online
TAXPAYER ACCESS POINT | https://tap.dor.mt.gov

Montana Annual Wage Withholding Tax Reconciliation Instructions

General Information

- We can only accept the Montana MW-3, not the federal W-3.
- All W-2s **with or without** withholding and all Forms 1099 **with** Montana withholding must be submitted to support the MW-3.
- Do not submit 1099s **without** withholding with this form.
- Employers who are in a *Not Required* pay frequency still need to submit an MW-3 and W-2s, even if Montana income taxes have not been withheld from their employees' wages.
- The due date for the MW-3, W-2s and Forms 1099 is February 28, 2015.
- If your address has changed and needs to be updated in our records, please mark the *address change* box.
- If this return reflects adjustments to and replaces the original return, please mark the *amended* box.
- If you would like your account closed, please mark the *account closed* box and enter closed date.

Line by Line Instructions

Line 1 Enter the total number of W-2s with or without Montana wage withholding submitted to support the MW-3 reconciliation. Mark the appropriate box for the filing method you are using for the W-2s.

Line 2 Enter the total number of Forms 1099 with Montana withholding submitted to support the MW-3. Mark the appropriate box for the filing method you are using for the Forms 1099.

Line 3 Enter the total Montana income paid.

Line 4 Enter the total Montana withholding tax withheld per W-2s and Forms 1099.

Line 5 Enter the total amount of Montana withholding tax remitted to the department.

Line 6 Enter the difference between line 4 and line 5 (4 minus 5). If the difference is negative, please use a minus sign.

Column A Deposit period end date is based on your filing frequency.

Accelerated filers: If your payday is Saturday, Sunday, Monday or Tuesday, your deposit is due by the following Friday. If your payday is Wednesday,Thursday or Friday, your deposit is due by the following Wednesday.

Monthly filers: Deposit period end date is the last day of each month.

Annual filers: Deposit period end date for all deposits is December 31, 2014.

Not Required filers: Do not have a withholding requirement.

Column B Enter the date payment was made to the Department of Revenue.

Column C Enter the total Montana tax withheld for each deposit period end date. The total of this column should match the amount on line 4.

Column D Enter the total Montana tax paid for each deposit period end date. The total of this column should match the amount on line 5.

Column E Enter any difference between columns C and D (column C minus column D). The total of this column should match the amount on line 6. If the difference is negative, please use a minus sign.

Unless otherwise requested in writing, credit amounts will be refunded. If paying by check, please include your account ID or FEIN and deposit period.

Sign up to access your Montana tax information, file your MW-3, pay your tax, and much more at Taxpayer Access Point (TAP) https://tap.dor.mt.gov. For more information about online services, as well as electronic filing of W-2s and Forms 1099, visit revenue.mt.gov.

If you choose not to file electronically, please send the MW-3, W-2s, Forms 1099 and applicable payment to:

Montana Department of Revenue
PO Box 5835
Helena, MT 59604-5835

Clear Form

MONTANA
MW-3
Rev 05 14

2014
Montana Annual Wage Withholding Tax Reconciliation

Name _____

Address _____

City _____

State _____ Zip _____ ☐ Address Change

FEIN ☐☐ – ☐☐☐☐☐☐☐

Account ID ☐☐☐☐☐☐☐☐☐☐ W T H

Pay Frequency

Due Date 0 2 2 8 2 0 1 5

☐ If this is an amended return, mark this box.

☐ If your business has ceased and you would like your account closed, mark this box and indicate cease date. ___/___/_____.

1. Number of W-2s submitted to Montana ☐☐☐☐☐☐ ☐ Paper ☐ Electronic
2. Number of Forms 1099 with Montana withholding reported and submitted to Montana ☐☐☐☐☐☐ ☐ Paper ☐ Electronic
3. Total Montana income paid per W-2s and Forms 1099 _____ . ___
4. Total Montana withholding tax withheld per W-2s and Forms 1099 _____ . ___
5. Total Montana withholding tax paid _____ . ___
6. Difference (line 4 minus line 5) _____ . ___

May we discuss this return with your tax preparer? ☐ Yes ☐ No If *yes*, provide preparer name and telephone number below:

_____

Please complete columns below as described in instructions.

A Deposit Period End Date(s)	**B** Date(s) Paid to MT DOR	**C** Montana Tax Withheld	**D** Montana Tax Paid	**E** Difference
No slashes or dashes in dates please.				
MMDDYYYY	MMDDYYYY			
MMDDYYYY	MMDDYYYY			
MMDDYYYY	MMDDYYYY			
MMDDYYYY	MMDDYYYY			
MMDDYYYY	MMDDYYYY			
MMDDYYYY	MMDDYYYY			
MMDDYYYY	MMDDYYYY			
MMDDYYYY	MMDDYYYY			
MMDDYYYY	MMDDYYYY			
MMDDYYYY	MMDDYYYY			
MMDDYYYY	MMDDYYYY			
MMDDYYYY	MMDDYYYY			

14EH0101

FEIN ☐☐ – ☐☐☐☐☐☐☐ **Account ID** ☐☐☐☐☐☐☐☐☐☐ W T H

Please complete columns below as described in instructions.

A Deposit Period End Date(s)	**B** Date(s) Paid to MT DOR	**C** Montana Tax Withheld		**D** Montana Tax Paid		**E** Difference	
No slashes or dashes in dates please.							
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						

Page _____ of_____

14EH0201

FEIN ☐☐ – ☐☐☐☐☐☐☐ **Account ID** ☐☐☐☐☐☐☐☐☐☐ W T H

Please complete columns below as described in instructions.

A Deposit Period End Date(s)	**B** Date(s) Paid to MT DOR	**C** Montana Tax Withheld		**D** Montana Tax Paid		**E** Difference	
No slashes or dashes in dates please.							
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						

Page _____ of_____

14EH0201

FEIN ☐☐ – ☐☐☐☐☐☐☐ **Account ID** ☐☐☐☐☐☐☐☐☐☐ W T H

Please complete columns below as described in instructions.

A Deposit Period End Date(s)	**B** Date(s) Paid to MT DOR	**C** Montana Tax Withheld		**D** Montana Tax Paid		**E** Difference	
No slashes or dashes in dates please.							
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						
MMDDYYYY	MMDDYYYY						

Page _____ of_____

14EH0201