



2007 Montana S Corporation Information and Composite Tax Return

Attach a copy of federal Form 1120S and Schedule K-1(s)

S
MONTANA
CLT-4S
Rev. 7-07

For calendar year 2007 or tax year beginning (MM-DD) ____ - ____ - **07** and ending (MM-DD-YY) ____ - ____ - ____

| | | | |
|---------|---|---------|--|
| Name | Check box if this is a change of address. <input type="checkbox"/> | | FEIN: _____ |
| Address | | | Federal Business Code: _____ |
| City | State | Zip + 4 | Incorporated in State of: _____ Date: _____ Date Qualified in Montana: _____ |

Check here, if you do not need the Montana S Corporation Information Return and Instructions sent to you next year.

Check here, if you are filing Schedule V, Backup Withholding Payments with this return.

Check here, if you are requesting a refund with this return.

Check if this is an initial return

Check here if this is an amended return

If you check the box above, check all that apply below:

- Reason for final return
- a. Withdrawn
 - b. Dissolved
 - c. Merged
 - d. Reorganized

- a. Federal Revenue Agent Report (a complete copy of this report is required)
- b. Apportionment factor changes (attach a statement explaining adjustments)
- c. Amended federal return
- d. Amended composite return
- e. Other (attach a statement explaining all adjustments in detail)

- a.
- b.
- c.
- d.
- e.

Shareholders' Pro Rata Share Items (Form 1120S, Schedule K)

| | | |
|---|-----|--|
| 1. Ordinary business income (loss) | 1. | |
| 2. Net rental real estate income (loss) (attach federal Form 8825) | 2. | |
| 3. a. Other gross rental income (loss)..... | 3a. | |
| b. Expenses from other rental activities (attach schedule) | 3b. | |
| c. Subtract line 3b from line 3a. This is your other net rental income or loss. | 3c. | |
| 4. Interest income..... | 4. | |
| 5. Ordinary dividends..... | 5. | |
| 6. Royalties..... | 6. | |
| 7. Net short-term capital gain (loss) (attach federal Schedule D, Form 1120S) | 7. | |
| 8. Net long-term capital gain (loss) (attach federal Schedule D, Form 1120S) | 8. | |
| 9. Net section 1231 gain (loss) (attach federal Form 4797) | 9. | |
| 10. Other income (loss) | 10. | |
| 11. Add lines 1 through 10 and enter result. This is your total share of income or loss. | 11. | |

Shareholders' Shares of Deduction (Form 1120S, Schedule K)

| | | |
|---|------|--|
| 12. Section 179 deduction (attach federal Form 4562) | 12. | |
| 13. a. Contributions..... | 13a. | |
| b. Investment interest expense..... | 13b. | |
| c. Section 59(e)(2) expenditures (attach detailed schedule) | 13c. | |
| d. Other deductions (attach detailed schedule) | 13d. | |
| 14. Add lines 12 through 13d and enter result. This is your total share of deductions. | 14. | |

Shareholders' Distributive Shares of Montana Additions and Exclusions to Income

| | | |
|--|------|-----|
| 15. a. Interest and dividends not taxable under the Internal Revenue Code (see instructions) | 15a. | |
| b. Taxes based on income or profits | 15b. | |
| c. Other additions (attach a detailed breakdown) | 15c. | |
| Add lines 15a, 15b, and 15c and enter result. This is your total Montana additions to income. | | 15. |
| 16. a. Interest on U.S. Government obligations (attach schedule) | 16a. | |

| | | |
|---|------|-----|
| b. Deduction for purchasing recycled material (attach Form RCYL) | 16b. | |
| c. Other deductions (attach detailed breakdown) | 16c. | |
| Add lines 16a, 16b, and 16c and enter result. This is your total Montana deductions to income. | | 16. |

| | | |
|---|-----|--|
| 17. Subtract line 14 from line 11. Add the result to line 15, then subtract line 16 from that result..... | 17. | |
|---|-----|--|

Shareholders' Distributive Shares of Multi-state Apportionment and Allocation

| | | |
|---|-----|--|
| 18. Multi-state taxpayers: Enter line 17 X _____ % from Montana Schedule I, line 5..... | 18. | |
| 19. Multi-state taxpayers: Enter here income or loss allocated directly to Montana..... | 19. | |

Entity name _____ Tax period ending _____ FEIN _____

Calculation of Net Amount Due**S Corporation Information Return Late Filing Penalty**

20. S corporation information return late filing penalty (see instructions)..... 20. _____

S Corporation Composite Return Tax

21. Enter your Montana total composite tax from Schedule IV, column J 21. _____

Return Payments

| | |
|--|----------------|
| 22. a. 2006 overpayment applied to 2007 | 22a. _____ |
| b. 2007 estimated payments..... | 22b. _____ |
| c. 2007 extension payment..... | 22c. _____ |
| d. Other payments | 22d. _____ |
| e. Previously issued refunds (amended returns only - see instructions) | 22e. () _____ |
| f. Add lines 22a through 22e and enter the result here. This is the total of your return payments. 22f. _____ | |
| 23. Subtract line 22f from line 21 and enter the result here..... 23. _____ | |

This is your Montana net composite tax due or overpaid.**Composite Return Penalties and Interest Calculation**

| | |
|---|-----------|
| 24. Interest on underpayment of estimated taxes | 24. _____ |
| 25. Composite income tax return late filing penalty..... | 25. _____ |
| 26. Composite income tax return late payment penalty | 26. _____ |
| 27. Interest (see instructions) | 27. _____ |
| 28. Add lines 24 through 27 and enter the result here 28. _____ | |

This is your Montana composite penalties and interest.**Refund or Amount Owed**

| | |
|---|-----------|
| 29. Add lines 20, 23 and 28 and enter the result here | 29. _____ |
| 30. If line 29 results in a net amount due, enter it here. This is the amount you owe. | 30. _____ |
| 31. If the amount on line 29 results in an overpayment, enter it here. This is your overpayment. | 31. _____ |
| 32. Enter the amount on line 31 you want applied to your 2008 composite estimated tax .32. _____ | |
| 33. Subtract line 32 from line 31 and enter the amount here. This is your refund. | 33. _____ |

S Corporation Backup Withholding Payment from Schedule V

| | |
|--|---------------|
| 34. Enter your Montana corporation license tax withheld from Schedule V, column D | 34. _____ |
| 35. Enter your Montana individual income tax withheld from Schedule V, column E | 35. _____ |
| 36. Payments previously made for tax withheld | 36. () _____ |
| 37. Add lines 34 through 36. This is your total S corporation backup withholding due. 37. _____ | |
| 38. Add lines 30 and 37. This is your total due. | 38. _____ |

This return has to be signed by one of the following: president, vice president, treasurer, assistant treasurer, or chief accounting officer.

Declaration

I, the undersigned officer of the corporation for which this return is made, hereby declare that this return, including all accompanying schedules and statements, is to the best of my knowledge and belief a true, correct and complete return, made in good faith for the income period stated, pursuant to the Montana statutes and regulations.

| | | |
|---|------------------|------------------------|
| Signature of officer | Date | |
| Print name | Title | Telephone number, ext. |
| Name of person or firm preparing return | Date | |
| Preparer's identification number | Telephone number | |

- Check this box and attach a copy of your federal Form 7004 to receive your Montana extension.
 Check here to authorize the Montana Department of Revenue to discuss your return with the individual/preparer listed above.

Schedule I

Entity name _____ Tax period ending _____ FEIN _____

Tax period ending

FEIN

Apportionment Factors for Multi-state S Corporations

Enter amounts in columns A and B. Enter percentages in column C.

- 1. Property Factor:** Use average value for real and tangible personal property

Total Property Value add lines 1a through 1l....

Take the total in column B and divide it by the total in column A. Multiply the result by 100. **This is your property factor.**

- ## **2. Payroll Factor:**

Total Payroll Value add lines 2a through 2h

Take the total in column B and divide it by the total in column A. Multiply the result by 100. **This is your payroll factor.**

- ### **3. Sales (Gross Receipts) Factor:**

Total Sales Value add lines 5a through 5K.....

Take the total in column B and divide it by the total in column A. Multiply the result by 100. This is your sales factor.

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

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 in page 1 of Form CLT-4S. **This is your apportionment factor.**

Schedule II

Entity name _____ Tax period ending _____ FEIN _____

Montana S Corporation Tax Credits

| Type of Credit | Amount of Credit |
|---|----------------------------|
| 1. Montana Dependent Care Assistance Credit | attach Form DCAC |
| 2. Montana College Contribution Credit | attach Form CC |
| 3. Health Insurance for Uninsured Montanans Credit | attach Form HI |
| 4. Montana Recycle Credit..... | attach Form RCYL |
| 5. Alternative Energy Production Credit | attach Form AEPC |
| 6. Contractor's Gross Receipts Tax Credit | attach supporting schedule |
| 7. Alternative Fuel Credit..... | attach Form AFCR |
| 8. Infrastructure Users Fee Credit | |
| 9. Qualified Endowment Credit..... | attach Form QEC |
| 9a. Qualified Endowment Credit Recapture | () |
| 10. Historical Buildings Preservation Credit | attach federal Form 3468 |
| 11. Increase Research and Development Activities Credit..... | attach Form RSCH |
| 12. Mineral Exploration Incentive Credit..... | attach Form MINE-CRED |
| 13. Developmental Disability Account Contribution Credit | |
| 14. Empowerment Zone Credit | |
| 15. Film Production Credit..... | attach Form FPC |
| 15a. Film Production Credit Recapture | () |
| 16. Biodiesel Blending and Storage Credit..... | attach Form BBSC |
| 16a. Biodiesel Blending and Storage Credit Recapture | () |
| 17. Oilseed Crushing and Biodiesel Production Credit..... | attach Form OSC |
| 17a. Oilseed Crushing and Biodiesel Production Credit Recapture | () |
| 18. Geothermal System Credit | attach Form ENRG-A |
| 19. Insure Montana small business health insurance credit. Business FEIN: _____ | |
| Add lines 1 through 19 and enter result. This is the amount of your total credits. | |

Any credit allowed to an S corporation has to be attributable to its shareholders using the same proportion that is used when it reported that S corporation's income or loss for Montana income tax purposes. Please provide a detailed breakdown that shows each shareholder's share of the credit.

In order to receive these credits, all shareholders will have to attach their applicable credit forms to their individual income or corporation license tax returns.

Schedule III

Entity name _____ Tax period ending _____ FEIN _____

Montana S Corporation Information

 Enter the total number of
shareholders that own this corporation. _____

| All Shareholders | | | | Nonresident or Pass-through Entity Shareholders Additional Information | | | | |
|--|------|-----------------------|-------------|--|--|---|--|--|
| A | B | C | D | E | F | G | H | |
| Name and address of shareholder Name Street Address City State Zip Code | | Identification Number | Ownership % | Montana source income | Federal income from entity (from federal Schedule K-1) | Composite income tax (from Schedule IV, column J) | Shareholder withholding (from Schedule V, column D or E) | Consent agreement or statement (enter year signed) |
| 1. | SSN | | | | | | | |
| | FEIN | | | | | | | |
| 2. | SSN | | | | | | | |
| | FEIN | | | | | | | |
| 3. | SSN | | | | | | | |
| | FEIN | | | | | | | |
| 4. | SSN | | | | | | | |
| | FEIN | | | | | | | |
| 5. | SSN | | | | | | | |
| | FEIN | | | | | | | |
| 6. | SSN | | | | | | | |
| | FEIN | | | | | | | |
| 7. | SSN | | | | | | | |
| | FEIN | | | | | | | |
| Column Totals | | | | | | | | |

Use additional sheets if necessary or you may create your own schedule if you use the exact same format used here.

Schedule IV

Entity name _____ Tax period ending _____ FEIN _____

Montana S Corporation Composite Income Tax Schedule

Eligible Participating Shareholders: An eligible participant is a shareholder who is a nonresident individual or a pass-through entity whose only Montana source income for the tax year is from this entity and from other pass-through entities who have elected to file a composite return and pay a composite tax on behalf of the eligible participating shareholder. The entity must retain an executed power of attorney signed by the eligible participating shareholder, authorizing the S corporation to file a composite return and act on the shareholder's behalf.

Enter the number of participating shareholders. _____

Enter below in columns A through J the required information and amounts for each eligible participating shareholder.

| A | B | C | D | E | F | G | H | I | J |
|----------------|--|----------------------------|--------------------|-------------------|---|---|-----------------------|--|--|
| Name | Social Security Number or Federal Employer Identification Number | Federal income from entity | Standard deduction | Exemption \$2,040 | Calculate Montana taxable income. Subtract column D from column C then subtract column E from the result. | Enter the appropriate tax from the tax table below. | Montana source income | Ratio. Divide column H by column C and enter result. | Montana composite income tax. Multiply column G times column I and enter result. |
| 1. | | | | | | | | | |
| 2. | | | | | | | | | |
| 3. | | | | | | | | | |
| 4. | | | | | | | | | |
| 5. | | | | | | | | | |
| 6. | | | | | | | | | |
| 7. | | | | | | | | | |
| 8. | | | | | | | | | |
| 9. | | | | | | | | | |
| 10. | | | | | | | | | |
| 11. | | | | | | | | | |
| 12. | | | | | | | | | |
| 13. | | | | | | | | | |
| Column J Total | | | | | | | | | |

Transfer the total from column J to CLT-4S, page 2, line 21.

Use additional sheets if necessary or you may create your own schedule if you use the exact same format used here.

| If your Taxable Income is Over | but not Over | Multiply your Taxable Income by | and Subtract | equals your Tax | If your Taxable Income is Over | but not Over | Multiply your Taxable Income by | and Subtract | equals your Tax |
|--------------------------------|--------------|---------------------------------|--------------|-----------------|--------------------------------|--------------|---------------------------------|--------------|-----------------|
| \$0 | \$2,500 | 0.010 | \$0 | | \$9,000 | \$11,600 | 0.050 | \$225 | |
| \$2,500 | \$4,400 | 0.020 | \$25 | | \$11,600 | \$14,900 | 0.060 | \$341 | |
| \$4,400 | \$6,600 | 0.030 | \$69 | | \$14,900 | or more | 0.069 | \$475 | |
| \$6,600 | \$9,000 | 0.040 | \$135 | | | | | | |

Schedule V

Entity Name _____ Tax period ending _____ FEIN _____

Pass-through Entity Backup Withholding Schedule

Enter the appropriate information below.

| Total number of shareholders subject to Schedule V _____ | | | | |
|--|-----------------------|---|---|---------------------------------------|
| A | B | C | D | E |
| Name and address of nonresident individual, foreign C corporation and second tier pass-through entity | Identification number | Income and backup withholding | | |
| | | Montana source income reported on Form PT-WH, line 1 | Montana corporation tax withheld | Montana individual tax withheld |
| 1. | SSN | Multiply column C by 6.75% and enter result. | Multiply column C by 6.9% and enter result. | |
| | FEIN | | | |
| 2. | SSN | | | |
| | FEIN | | | |
| 3. | SSN | | | |
| | FEIN | | | |
| 4. | SSN | | | |
| | FEIN | | | |
| 5. | SSN | | | |
| | FEIN | | | |
| 6. | SSN | | | |
| | FEIN | | | |
| 7. | SSN | | | |
| | FEIN | | | |
| Column totals (transfer to Form CLT-4S, page 2, lines 34 and 35 respectively) | | | | |
| Add totals from column D and column E and enter the result here. This is your total backup withholding. | | | | |

Use additional sheets if necessary or you can create your own schedule if you use the exact format used here.

Schedule VI

Entity Name _____ Tax period ending _____ FEIN _____

Reporting of Special Transactions

Complete Schedule VI only if your small business corporation filed for federal income tax purposes any of the federal forms described below. Check the appropriate box indicating which form(s) you filed with your federal income tax return. If your answer is "Yes" to one or more of these forms, you will need to attach a complete copy of your federal income tax return Form 1120S.

- 1. I filed federal Form 8264 – Application for Registration of a Tax Shelter with the Internal Revenue Service.**

 Yes

Form 8264 is required to be filed to register a tax shelter.

- 2. I filed federal Form 8271 – Investor Reporting of Tax Shelter Registration Number with the Internal Revenue Service.**

 Yes

Form 8271 is used to report the tax shelter registration number that the Internal Revenue Service assigns to certain tax shelters required to be registered under 26 USC 6111 and to report the name and identifying number of the tax shelter.

- 3. I filed federal Form 8824 – Like-Kind Exchanges with the Internal Revenue Service.**

 Yes

NOTE: Check this box if your like-kind exchange includes Montana property. Non-residents 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.

- 4. I 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).

- 5. I 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.

- 6. I filed federal Form 13657 - Notice of Election by Corporation to Participate in Announcement 2005-19 Settlement Initiative with the Internal Revenue Service.**

 Yes

Form 13657 is an election to participate in the settlement initiative as described in Announcement 2005-19 and as contained in Internal Revenue Bulletin 2005-11 dated March 14, 2005.

- 7. I filed federal Form 13750 – Election to Participate in Announcement 2005-80 Settlement Initiative with the Internal Revenue Service.**

 Yes

Form 13750 is an election to participate in the settlement initiative as described in Announcement 2005-80 and as contained in Internal Revenue Bulletin 2005-46 dated November 14, 2005.

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

- 8. During this tax year I have made payments to 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 _____

