



Change of Address

Do not attach this form to your tax return.

Complete this form if you filed individual income tax Forms 2, 2EZ or 2EC.

If your last tax return was a joint return and you are now establishing a separate residence, check this box

Taxpayer's Name		Social Security Number	
Spouse's Name		Spouse's Social Security Number	
Prior Name(s) (see instructions)			
Taxpayer		Spouse	

Taxpayer's Old Additional Information (see instructions)				
Taxpayer's Old Mailing Address (number and street or PO Box) (see instructions)		City	State	Zip
Foreign Country Name	Foreign Province/State/County	Foreign Postal Code		

Spouse's Old Additional Information (see instructions)				
Spouse's Old Mailing Address (number and street or PO Box) (see instructions)		City	State	Zip
Foreign Country Name	Foreign Province/State/County	Foreign Postal Code		

New Additional Information (see instructions)				
New Mailing Address (number and street or PO Box) (see instructions)		City	State	Zip
Foreign Country Name	Foreign Province/State/County	Foreign Postal Code		

Provide a copy of a valid photo ID and a copy of a piece of mail that shows your current mailing address (e.g., a utility bill).

By signing below, I certify that the information provided on this form is true and correct and direct the department to update its records accordingly.

Sign Here	Taxpayer's Signature	Date
	X	
	Spouse's Signature (if joint return)	Telephone
	X	

Form ADD-CH Instructions

Change of Address

General Information

If you moved after you filed your tax return and you are expecting a refund, notify the department as soon as possible to make sure we mail your check to the new address.

Complete this form only if you file any of the following individual income tax returns: Forms 2, 2EZ or 2EC.

This form permanently changes your mailing address with the department. If your mailing address changes again, complete this form or provide the new address on your next tax return.

This form is optional. File this form at any time to alert the department to your change of address. Do not attach this form to your tax return.

If you file using the filing status married filing separately, complete a separate form for each spouse.

Purpose

Use Form ADD-CH, Change of Address, to change your home mailing address. We will use only the new mailing address for future correspondence. Generally, complete only one Form ADD-CH to change your home address. If this change also affects the mailing address for your children who filed separate tax returns, complete a separate Form ADD-CH for each child. If you are a representative filing for the taxpayer, go to revenue.mt.gov and search for POA.

Name and Address

Enter your first name, middle initial, last name, social security number (SSN) or individual taxpayer identification number (ITIN), and address in the spaces provided. If a joint tax return, enter the name and SSN of your spouse.

Prior Name(s)

If you or your spouse changed your name because of marriage, divorce, etc., enter the prior last name only in the "Prior Name(s)" field.

Additional Information

Use the Additional Information field for "In Care-Of" name or other supplemental address information only.

PO Box

If your post office does not deliver mail to your street address, list your PO Box number instead of your street address.

Foreign Address

If you have a foreign address, follow the country's practice for entering the city, county, province, state, country and postal code, as applicable, in the appropriate boxes. Do not abbreviate the country name.

Verify Your Identity

Provide a copy of a valid photo ID and provide a copy of a piece of mail that shows your current mailing address (e.g., a utility bill). If you file a joint return, provide identification for both spouses.

Signature

You must sign in the space provided. If you filed a joint tax return and this change of address is also for your spouse, your spouse must also sign the form.

Where to File

Send this form and proof of address change through one of these options.

Mail:

MONTANA DEPARTMENT OF REVENUE
PO BOX 5805
HELENA MT 59601-5805

Fax:

406-444-7723
Attn Registration

Secure Messaging:

TransAction Portal TAP
<https://tap.dor.mt.gov>
Log into your tax account to
Send us a message