



***Montana Annual Wage Withholding  
Reconciliation (MW-3) FSET Specifications and  
Testing Scenarios for Software Developers***

**Tax Year**

**2015**

Final  
9-25-2015

Montana Department of  
**REVENUE**

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## **General Information**

Starting in TY2014 the Montana Department of Revenue will use the FSET schema to enable the electronic filing of the Annual Wage Withholding Reconciliation Form MW-3. The FSET schema will allow individual businesses and payroll service providers the ability to submit individual returns as well as the bulk upload of multiple returns. The use of this schema has been incorporated into our departments Taxpayer Access Point (TAP) service. TAP is an online service that allows taxpayers and authorized providers to file returns and submit payments for a variety of tax accounts. Please see the Transmitting MW-3 Returns section of this document for additional information on how to create a TAP account and submit MW-3 returns.

The Montana MW-3 return was created utilizing the State Annual section of the FSET schema version 5.1. Our schema has been approved by TIGERS and has been internally tested to verify all data elements are correctly mapped to our processing system. We will also be using information contained in the TransmissionHeader, ReturnHeaderState, and ReturnDataState sections of the schema. Additional information regarding data elements can be found in the Required Information section of this document.

The Montana Department of Revenue is willing to work with any software providers interested in developing this E-Filing solution. We will make available a Software Vendor Registration form that must be completed prior to development and testing. The information contained on the vendor registration form will provide our department with the contact information for each software vendor.

## **Financial Transactions**

For this initial release we will not be utilizing the Financial Transaction section of the schema. The use of the Financial Transaction schema will be included in future releases of the schema. We want to encourage the use of our other electronic payment methods. For software vendors/payroll providers interested in submitting bulk payments we offer an ACH Credit payment option. The registration and file specifications for this program can be found under the ACH Credit Payments section on our website at [http://revenue.mt.gov/home/online\\_services.aspx](http://revenue.mt.gov/home/online_services.aspx). The ACH Credit program allows for payments of most of the taxes administered by our department.

In addition to the ACH Credit program our department offers taxpayers and authorized third parties the ability to submit payments on our TAP application. TAP allows users to submit either ACH Debit or Credit Card payments. There are no charges for ACH Debit payments submitted on TAP. These payments can also be warehoused and if need be can be deleted if the payment has not already been processed.

## **Binary Attachments**

Montana is not requiring or asking for any supporting documentation to be attached to the MW-3 return as a Binary Attachment. At this time we cannot accept any Binary Attachments submitted with the MW-3 return. There may be a time in future releases that will allow for this functionality.

## FSET Schema Information

This section contains specific information on what we expect in the FSET data elements. Additional information regarding these data elements is contained in the X Path section of this document.

- **TransmissionHeader**
  - **recordCount** Attribute – This is a required element and should contain the total number of MW-3 returns contained in the submission.
  - **Jurisdiction** – This is a required element. Please submit MT, for Montana, in this element.
  - **TransmissionID** – This is a required element. At this time we have not developed a format for this element. Any unique ID number that meets the schema requirements will be processed.
  - **Timestamp** – This is a required element. This is the time the return was transmitted to our department.
  - **Transmitter** – This is a required element. This is a choice of either ETIN, EFIN or StateEIN. StateEIN format is 13 total characters. The choice of which option to include in the file will be left up to the vendor. The only formatting requirement we have is if the StateEIN option is submitted in the file. The format for the StateEIN element is as follows. The first seven numeric digits are the Montana account number, the next three numeric digits are the profile number and the last three alpha characters are the account type. Example 4000001-002-WTH, the dashes have been added to differentiate the parts of the Montana Account ID. The StateEIN for this example should be formatted 4000001002WTH.
  - **ProcessType** – This is a required element. The enumeration value “T” would indicate a test file. The enumeration value of “P” would indicate a production file. Please make sure this indicator is set correctly.
  - **AgentIdentifier** – This is an optional element and we are not expecting any information in this element. Please format per the schema specification if information will be sent in this element.
  - **ReportingAgentSignature** - This is an optional element and we are not expecting any information in this element. Please format per the schema specification if information will be sent in this element.
  - **AckAddress** – Montana will not be sending acknowledgements by email. The acknowledgement for file success or failure will be given when uploading files in TAP. This is an optional element and we are not expecting any information in this element. Please format per the schema specification if information will be sent in this element.
  
- **ReturnState**
  - **stateSchemaVersion** – This is a required element. Please make sure this matches the schema specification. The enumeration for this element will be updated each time the schema requires a change.
  - **SubmissionID** – This is a required element. At this time we have not developed a format for this element. Any unique ID number that meets the schema requirements will be processed.

- **ReturnHeaderState**
  - **Jurisdiction** – This is a required element. Please submit MT, for Montana, in this element.
  - **Timestamp** – This is a required element. This is the time the return was transmitted to our department.
  - **TaxPeriodBeginDate** – Should be the formatted per the schema specification (YYYYMMDD). Needs to be the first day of the return year.
  - **TaxPeriodEndDate** – Should be the formatted per the schema specification (YYYYMMDD). Needs to be the last day of the return year.
  - **TaxYear** – Four digit year for the tax year being filed.
  - **Quarter** – This element will not be used for the Montana MW-3 return.
  - **DisasterRelief** - This element will not be used for the Montana MW-3 return.
  - **ISPNumber** - This element will not be used for the Montana MW-3 return.
  - **PaidPreparerInformation** – Please format per the schema specifications.
  - **Originator** – These elements will not be used for the Montana MW-3 return.
  - **SoftwareID** – Please provide the Name of the software used to preparer the return. This element only allows for 10 characters.
  - **SoftwareVersion** – Please provide the software version used to create the return.
  - **InternetProtocol** – Both the parent and child elements are required for Montana MW-3 returns.
  - **SignatureOption** – These elements will not be used for the Montana MW-3 return.
  - **AmendedReturnIndicator** – Montana will support the ability to file amended MW-3 returns. If the return is amended, the checkbox must be formatted correctly.
  - **OriginalSubmissionID** – Please format per the schema specifications.
  - **OriginalSubmissionDate** – Please format per the schema specifications.
  - **Filer**
    - **TIN** – Format per the schema specifications. This will primarily be the filer’s FEIN.
    - **OtherTIN** – This element will not be used for the Montana MW-3 return.
    - **StateEIN** – StateEIN format is 13 total characters. The first seven numeric digits are the Montana account number, the next three numeric digits are the profile number and the last three alpha characters are the account type. Example 4000001-002-WTH, the dashes have been added to differentiate the parts of the Montana Account ID. The StateEIN for this example should be formatted 4000001002WTH.
    - **StateEINExtension** – This element will not be used for the Montana MW-3 return.
    - **Name** – Format per the schema specifications.
    - **InCareOfName** – Format per the schema specification.
    - **NameControl** – Format per the schema specification.
    - **CheckDigit** – This element will not be used for the Montana MW-3 return.
    - **USAddress/ForeignAddress** – Format per the schema specifications.
  - **ReturnQuarter** – This element will not be used for the Montana MW-3 return.
  - **DueDate** – This date should be February 28<sup>th</sup> of the tax year, YYYY0228. For example 20150228.
  - **Form** – This should be formatted MW3.

- **FilingAction** – Send only one of the enumeration values. The two most common would be Amended and Original. Supplemental will most likely never be used.
  - **FinalReturnElect** – If the return being filed is the final return include a correctly formatted date in this element. This date being present will automatically mark the checkbox located on our MW-3 return. The correct format for this element is YYYYMMDD.
  - **ThirdPartyAuthorization** – Complete these elements if the taxpayer authorizes a third party to discuss this return with our department.
  - **AckAddress** – This element will not be used for the Montana MW-3 return.
- **ReturnDataState**
    - **StateGeneralInformation**
      - **AddressChangeElect** – This will be the only element from this section that will be used for the Montana MW-3 return. If the address for the taxpayer (filer) has changed in the previous year format this element per the schema specifications.
    - **StateAnnual** - This portion of the schema will be used for the Montana Form MW-3.
      - **TaxYear** – Please indicate the tax year for the return being filed. This is formatted YYYY.
      - **SubmitW2** – Indicates how the Form W2's will be submitted to our department. Options 2 and 3 will be considered electronic and will cause the Electronic box to be marked on the MW-3 return. Enumeration options:
        - 1 = Paper
        - 2 = Magnetic Media
        - 3 = Internet
      - **Submit1099** – Indicates how the Form 1099s will be submitted to our department. Options 2 and 3 will be considered electronic and will cause the Electronic box to be marked on the MW-3 return. Enumeration options:
        - 1 = Paper
        - 2 = Magnetic Media
        - 3 = Internet
      - **NumberOfRecords** – This element will indicate how many form W2 and/or 1099s will be submitted with the Form MW-3. Montana will be using the W2 and 1099 enumerations. The options of **Other** and **Total** will not be used for the Montana Form MW-3.
      - **TotalWagesYear** – This element should be the Total Montana Income paid per W2s and Forms 1099. This is Line 3 on the Montana Form MW-3.
      - **TotalIncomeTaxWithheld** – This element should be the Total Montana withholding tax withheld per W2s and Form 1099. This is Line 4 on the Montana Form MW-3. This is the total of all values in Column C.
      - **TaxWithheldYear** – This element should be the Total Montana withholding tax paid. This is Line 5 on the Montana Form MW-3. This is the total of all values in Column D.

- **WHBalanceDue** – This element should be the difference between the amount withheld and the amount paid. This is Line 6 on the Montana Form MW-3.
- **WHTOverpayment** - This element should be the difference between the amount withheld and the amount paid. This is Line 6 on the Montana Form MW-3. The elements CreditElect and RefundElect will not be utilized for processing of the Montana Form MW-3. These elements are required on the FSET schema and one or the other must be sent, however they will not be used in the process of issuing a refund.
- **TaxRemittedPeriodAmount** – This repeating element will be used to provide information on each withholding payment that has been submitted to the department during the tax year. The elements listed below are Columns A through D on the Montana Form MW-3.
  - **TaxRemittedPeriodEnd** – This element is the appropriate period end date determined by the taxpayer’s filing frequency. For **Annual** and **Not Required** filers this date would be December 31 of the tax year. For **Monthly** filers this date is the last day of the each month. For **Accelerated** filers this is the date that the money was withheld not the date the payment was submitted to our department. This is Deposit Period End Date (Column A) on the Montana Form MW-3.
  - **TaxRemittedPaymentDate** – This element is the date the withholding payment was submitted to the department. This is Date Paid to MT DOR (Column B) on the Montana Form MW-3.
  - **TaxRemittedTaxWithheld** – This element is the amount of tax withheld for that specific period. This is Montana Tax Withheld (Column C) on the Montana Form MW-3.
  - **TaxRemittedTaxPaid** – This element is the amount of withholding tax paid for that specific period. This is Montana Tax Paid (Column D) on the Montana Form MW-3.
  - There is no element that will be used to report the amount in Column E on the Montana Form MW-3. This column will be calculated from the information provided in Columns C and D. However, any printed copies that are created should include this information.

## Filing Frequencies and Deposit Period End Dates

Montana supports the following filing frequencies for withholding tax: Accelerated, Monthly, Annual and Not Required. Please note Montana does not have a Quarterly filing frequency for withholding tax. In October of each year we perform a “Lookback” that determines the filing frequency for the following year. This Lookback process calculates the total withholding paid from July 1<sup>st</sup> of the previous year to June 30<sup>th</sup> to the current year. The total amount of withholding paid will determine what the filing frequency will be going forward. Please see the table below for the dollar thresholds for each of the filing frequencies.

Filing Frequency	Minimum Withholding Paid	Maximum Withholding Paid
Annual	\$0	\$1,199
Monthly	\$1,200	\$11,999
Accelerated	\$12,000	

Notification will be sent prior to November 1<sup>st</sup> of each year to all businesses that will have a change in their remittance schedule. If during the Lookback process there is a change to the filing frequency that change will be effective January 1<sup>st</sup> of the following year. It is very important for any business that has had a change in filing frequency to submit their payments according to their new frequency. Since our department performs a reconciliation only once a year there could be penalty and interest assessed because payments were not submitted timely due to a change in frequency.

All new businesses in Montana, with the exception of agricultural and domestic, will be assigned a Monthly filing frequency.

### **Annual Filers**

Annual filers are those businesses that have less and \$1,200 dollars of withholding tax paid during the Lookback period. The only valid Deposit Period End Dates for an Annual filer is the last day of the year being filed. Example 12/31/2015. Any other date will cause the return to error on our processing system. Payments, returns and W2s for Annual filers are due to the department by February 28<sup>th</sup> of the following year. Payments can be submitted to our department more often than annually. However, any additional payments must have the last day of the year as the Deposit Period End Date.

### **Monthly Filers**

Monthly Filers are those businesses that have paid between \$1,200 and \$11,999 in withholding during the Lookback period. All new businesses registered will be given a Monthly filing frequency until a Lookback can be performed. The only valid Deposit Period End Dates for Monthly filers is the last day of each month. Any other date will cause the return to error on our processing system. Payments for Monthly filers are due to our department by the 15<sup>th</sup> of the following month. The Form MW3 and W2s are due to our department by February 28<sup>th</sup> of each year.

### **Accelerated Filers**

Accelerated filers are those businesses that pay in excess of \$12,000 in withholding. Montana follows the same schedule for payment due dates as the IRS. Deposit Period End Dates on the Montana Form MW3 would be the date the money was withheld not the date paid. The Form MW3 and W2s are due to our department February 28<sup>th</sup> of each year.

### **Not Required**

Those businesses that have a Not Required filing frequency do not have an expectance to make a payment to our department but they all must file the Form MW3 and W2s. New businesses that indicate on the registration form their primary business is agricultural or domestic will be given a Not Required filing frequency. If payments are submitted to our department they should be treated the same way as an Annual filer. The Deposit Period End Date would be the last day of the year. Any other date will cause the return to error on our processing system.

## **Testing/Approval Process**

The test packet must include a total of two test files containing four test returns. Each test file will need to be submitted independently from each other. A short overview of the files and

returns we would expect to see tested is below. Examples of test cases will also be included for your reference starting on page 13. You can use the information in the test cases provided or you can create your own test cases as long as all the information contained in the scenarios below is included. When the tests files (there should be two) are ready to be submitted save the files with a .ZIP file extension. Email the files along with PDF copies of the returns to [DORMeF@mt.gov](mailto:DORMeF@mt.gov). Once the ZIP files and PDF copies are received they will be loaded into our test environment and scheduled for review. Any corrections that might be required after the testing is complete will be communicated back to the software vendor. Corrections should then be made to the test files and those files should be resubmitted for review using the same process already mentioned. After all tests have passed the software product will be approved to submit production returns for the tax year that was tested. No production returns should be submitted by any vendor prior to being approved by our department. This testing/approval process will need to be completed on an annual basis to verify any changes to the form/schema have been updated correctly. The testing process described above will take place outside of the normal process of transmitting the MW-3 return.

### **Scenario One**

The first test file should contain one test return for an Accelerated filer. This file will test the ability to submit a single return to our department. This test return should include a minimum of 24 payments with the correct Deposit Period End Dates. Both the number and submission type for W2s and 1099s should be included. A number of the payments should include either an over payment or an under payment but the total withheld should equal the total withholding paid. Other information required in this test case is the amended return indicator box should be checked as well as the address indicator. Lines one through five should also be completed. The Discuss with Preparer indicator should be set to yes and the name and phone number of the preparer included.

### **Scenario Two**

The second test file must contain three returns, one each for a Monthly, Annual and Not Required filer. This will test the ability to submit multiple returns in one file.

The Monthly filer test return must contain 12 payments with the correct Deposit Period End Dates. The ceased date indicator should be checked and the cease date included. Both the number and submission type for W2s and 1099s should be included. The Discuss with Preparer indicator should be set to NO and the name and phone number of the preparer should not be included. Lines one through six should also be completed. A number of the payments should include either an over payment or an under payment. The return should have either additional tax due or a refund amount.

The Annual filer test case must include at least one payment with the correct Deposit Period End Dates. Additional payments can be submitted on the Annual Filer test case if desired but all payments must have the correct Deposit Period End Date. Both the number and submission type for W2s only should be included.

The Not Required test case must include at least four payments with the correct Deposit Period End Dates. Both the number and submission type for W2s and 1099s should be included. The Discuss with Preparer indicator should be set to yes and the name and phone number of the preparer included. The return should have either additional tax due or a refund amount.

## **Transmitting MW-3 Returns**

After approval has been received for your software, production returns can start being submitted through our TAP service. Once the files have been created using the schema they must be saved as ZIP file to be uploaded into our processing system. Files that are to be uploaded using TAP will be validated before being accepted. Files that do not pass schema validation will need to be corrected and resubmitted.

## **Acknowledgments**

Acknowledgement of receipt of the return will not be handled through the schema. Instead, acknowledgements will be given after files have successfully been uploaded into TAP. The confirmation given in TAP will for be for each submission. A submission could be a single return or a bulk upload of multiple returns.

## **Developer Expectations and Responsibilities**

The Montana Department of Revenue is pleased to work with any software companies interested in developing E-Filing of Montana returns. Our department has expectations for the developers supporting the various Montana returns. These expectations are listed below.

- Complete the vendor registration form for all the tax types that will be supported.
- Comply with all state requirements per the specification documents.
- Provide complete and accurate tax returns for the taxpayers of Montana.
- Participate and successfully complete the testing and approval process with the Department of Revenue.
- Submit well-formed XML information to the department during testing and production.
- Provide and perform schema validation on all returns prior to submitting them to the department during testing and production.
- Be responsive to department requests for correction of software issues during testing and production.
- Provide timely software updates to the preparer community.
- Only submit production returns after your software has successfully completed ATS testing and approval has been received from the Montana Department of Revenue.
- Notify the Montana Department of Revenue if any issues arise that might delay the submission and processing of returns.
- The Montana Department of Revenue will not be able to process XML files that are corrupt, do not meet the required specifications, or do not represent complete and accurate tax returns and information.
- The Montana Department of Revenue is not liable for data loss or data destruction related to returns submitted to the Department through the FSET schema.

## Contact Information

David Berg  
Montana Department of Revenue  
Phone 406-444-4070  
Fax 406-444-1505  
[daberg@mt.gov](mailto:daberg@mt.gov) or [DORMeF@mt.gov](mailto:DORMeF@mt.gov)

Montana Department of Revenue website  
[www.revenue.mt.gov](http://www.revenue.mt.gov)

Montana Department of Revenue Online Services website  
[www.revenue.mt.gov/home/online\\_services.aspx](http://www.revenue.mt.gov/home/online_services.aspx)



ef #	Line #	Description	X Path	Required/Optional	Element Type	Element Requirements
<b>X Path</b>						
All X Path references start with Transmission/ReturnState/...						
100		Name	.../ReturnHeaderState/Filer/Name/BusinessNameLine1	<b>Required</b>	BusinessNameLine1Type	75 characters maximum
110		Address	.../ReturnHeaderState/Filer/USAddress/AddressLine1	<b>Required</b>	StreetAddressType	35 characters maximum
120		City	.../ReturnHeaderState/Filer/USAddress/City	<b>Required</b>	CityType	22 characters maximum
130		State	.../ReturnHeaderState/Filer/USAddress/State	<b>Required</b>	StateType	2 character postal abbreviation
140		Zip Code	.../ReturnHeaderState/Filer/USAddress/ZIPCode	<b>Required</b>	ZIPCodeType	
150		Address Change Indicator	.../ReturnDataState/StateGeneral/AddressChangeElect	Optional	CheckBoxType	X or Blank
160		FEIN	.../ReturnHeaderState/Filer/TIN/TypeTIN	<b>Required</b>	String	Choice of FEIN or SSN - enumeration
170		FEIN	.../ReturnHeaderState/Filer/TIN/TINTypeValue	<b>Required</b>	String	FEIN or SSN number 9 Numeric digits
180		Account ID	.../ReturnHeaderState/Filer/StateEIN	<b>Required</b>	String20Type	13 alphanumeric characters
190		Payment Frequency	Not captured in the schema			
200		Due Date	.../ReturnHeaderState/DueDate	<b>Required</b>	DateType	YYYY0228
210		Amended return checkbox	.../ReturnHeaderState/AmendedReturnIndicator	Optional	CheckBoxType	X or blank
220		Cease business checkbox	Not captured in the schema			
230		Cease date	.../ReturnHeaderState/FinalReturnElect/DateFinalWagesPaid	Optional	DateType	YYYYMMDD
240	Line 1	Number of W-2s submitted	.../ReturnDateState/StateAnnual/NumberOfRecords/W2	Optional		Enumeration
250	Line 1	W2 submission method	.../ReturnDateState/StateAnnual/SubmitW2	Optional	StringType	Enumeration 1=Paper 2=Mag Media 3=Internet
260	Line 2	Number of 1099s submitted	.../ReturnDateState/StateAnnual/NumberOfRecords/1099	Optional		Enumeration
270	Line 2	1099 submission method	.../ReturnDateState/StateAnnual/Submit1099	Optional	StringType	Enumeration 1=Paper 2=Mag Media 3=Internet
280	Line 3	Total MT income per w2/1099	.../ReturnDateState/StateAnnual/TotalWagesYear	Optional	AmountType	Include 2 decimal places
290	Line 4	Total MT withholding	.../ReturnDateState/StateAnnual/TotalIncomeTaxWithheld	Optional	AmountType	Include 2 decimal places
300	Line 5	Total MT withholding paid	.../ReturnDateState/StateAnnual/TaxWithheldYear	Optional	AmountType	Include 2 decimal places
310	Line 6	Difference	.../ReturnDateState/StateAnnual/WHBalanceDue	Optional	DecimalNNType	Include 2 decimal places
310	Line 6	Difference	.../ReturnDateState/StateAnnual/WHOverpayment/AmountOfOverpayment	Optional		
320		Authorization to discuss	.../ReturnHeaderState/ThirdPartyAuthorization/AuthorizeThirdPartyElect	Optional	CheckBoxType	X or Blank
330		Discuss with prepare name	.../ReturnHeaderState/ThirdPartyAuthorization/DesigneeName	Optional	PersonNameType	35 characters max
340		Discuss phone number	.../ReturnHeaderState/ThirdPartyAuthorization/DesigneePhone	Optional	PhoneNumberType	10 digits max
Withholding payment table (Limited to 365 payment entries)						
350		Deposit period end (Col A)	.../ReturnDateState/StateAnnual/TaxRemittedPeriodAmount/TaxRemittedPeriodEnd	Optional	DateType	YYYYMMDD
360		Date paid to DOR (Col B)	.../ReturnDateState/StateAnnual/TaxRemittedPeriodAmount/TaxRemittedPaymentDate	Optional	DateType	YYYYMMDD
370		MT tax withheld amount (Col C)	.../ReturnDateState/StateAnnual/TaxRemittedPeriodAmount/TaxRemittedTaxWithheld	Optional	AmountType	Include 2 decimal places
380		MT tax paid (Col D)	.../ReturnDateState/StateAnnual/TaxRemittedPeriodAmount/TaxRemittedTaxPaid	Optional	AmountType	Include 2 decimal places
390		Difference (Col E)	Not captured in the schema			

# Montana MW3 with Reference Numbers

## 2015

### Montana Annual Wage Withholding Tax Reconciliation

MONTANA  
MW-3  
Rev 05 15

Name **100** FEIN **160/170**  
 Address **110** Account ID **180**  
 City **120** Pay Frequency **190**  
 State **130** Zip **140** **150** Address Change Due Date **200**

**210** If this is an amended return, mark this box.  
**220** If your business has ceased and you would like to close your account, mark this box and indicate date **230**

1. Number of W-2s submitted to Montana **240** Paper **250** Electronic  
 2. Number of Forms 1099 with Montana withholding reported and submitted to Montana **260** Paper **270** Electronic  
 3. Total Montana income paid per W-2s and Forms 1099 **280**  
 4. Total Montana withholding tax withheld per W-2s and Forms 1099 **290**  
 5. Total Montana withholding tax paid **300**  
 6. Difference (line 4 minus line 5) **310**

May we discuss this return with your tax preparer? Yes **320** No **330** If yes, provide preparer name and telephone number below  
**340** Name **340** Phone

Please complete columns below as described in instructions.

A Deposit Period	B Date(s) Paid to End Date(s) MT DOR	C Montana Tax Withheld	D Montana Tax Paid	E Difference
<i>No slashes or dashes in dates please.</i>				
<b>350</b>	<b>360</b>	<b>370</b>	<b>380</b>	<b>390</b>



File online at  
revenue.mt.gov



\*15EH01XX\*

# Test Scenarios

## Scenario One

### Accelerated Filer

MONTANA  
MW-3  
Rev 05 15

## 2015 Montana Annual W-2 1099 Withholding Tax Reconciliation

Name Accelerated Industries FEIN 03-1234567  
 Address 1736 Front Street Account ID 4123456002 W T H  
 City Helena Pay Frequency Accelerated  
 State MT Zip 59601  Address Change Due Date 02282016

If this is an amended return, mark this box.  
 If your business or payroll has ceased and you would like to close your account, mark this box and indicate 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:  
Ima Countant 406-444-4070

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
<i>No slashes or dashes in dates please.</i>				
01012015	01032015	756.00	756.00	
01152015	01182015	825.00	820.00	5.00
02012015	02032015	825.00	830.00	-5.00
02152015	02182015	432.00	432.00	
03012015	03032015	689.88	689.88	
03152015	03182015	700.00	700.00	
04012015	04032015	725.25	725.25	
04152015	04182015	855.00	855.00	
05012015	05032015	990.00	990.00	
05152015	05182015	1256.00	1256.00	
06012015	06032015	1525.36	1525.36	
06152015	06182015	995.31	995.31	



FEIN 03-1234567

Account ID 4123456002 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
<i>No slashes or dashes in dates please.</i>				
07012015	07032015	844.00	840.00	4.00
07152015	07152015	850.47	854.47	-4.00
08012015	08032015	900.00	900.00	
08152015	08182015	1563.22	1563.22	
08262015	08292015	251.00	251.00	
09012015	09032015	754.66	754.66	
09152015	09182015	1250.00	1250.00	
10012015	10032015	999.00	999.00	
10152015	10182015	745.11	745.11	
11012015	11032015	500.00	500.00	
11152015	11182015	689.00	689.00	
12012015	12032015	1456.00	1456.00	
12152015	12182015	981.12	981.12	
12312015	01032016	888.20	888.20	
MMDDYYYY	MMDDYYYY			



\*15EH0201\*

**Scenario Two**  
**Monthly Filer**

**2015**

MONTANA  
MW-3  
Rev 05 15

**Montana Annual W-2 1099 Withholding Tax Reconciliation**

Name Monthly Enterprises  
Address PO Box 1256  
City Billings  
State MT Zip 59101  Address Change

FEIN 03-4567890  
Account ID 4123457003 W T H  
Pay Frequency Monthly  
Due Date 02282016

If this is an amended return, mark this box.  
 If your business or payroll has ceased and you would like to close your account, mark this box and indicate date 12/31/2015.

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
<i>No slashes or dashes in dates please.</i>				
<input type="text" value="01312015"/>	<input type="text" value="02152015"/>	156.00	156.00	
<input type="text" value="02282015"/>	<input type="text" value="03152015"/>	125.00	125.00	
<input type="text" value="03312015"/>	<input type="text" value="04152015"/>	235.33	200.00	35.33
<input type="text" value="04302015"/>	<input type="text" value="05152015"/>	221.05	221.05	
<input type="text" value="05312015"/>	<input type="text" value="06152015"/>	145.00	145.00	
<input type="text" value="06302015"/>	<input type="text" value="07152015"/>	98.25	98.25	
<input type="text" value="07312015"/>	<input type="text" value="08152015"/>	125.25	125.25	
<input type="text" value="08312015"/>	<input type="text" value="09152015"/>	82.35	82.35	
<input type="text" value="09302015"/>	<input type="text" value="10152015"/>	56.00	56.00	
<input type="text" value="10312015"/>	<input type="text" value="11152015"/>	50.00	50.00	
<input type="text" value="111302015"/>	<input type="text" value="12152015"/>	35.88	35.88	
<input type="text" value="12312015"/>	<input type="text" value="01152016"/>	0.00	0.00	



\*15EH0101\*

**Annual Filer**

**2015**

MONTANA  
MW-3  
Rev 05 15

**Montana Annual W-2 1099 Withholding Tax Reconciliation**

Name Annual Filers  
Address 8966 Casper Drive  
City Missoula  
State MT Zip 59802  Address Change

FEIN 03-5678901  
Account ID 4123678003 W T H  
Pay Frequency Annual  
Due Date 02282016

If this is an amended return, mark this box.

If your business or payroll has ceased and you would like to close your account, mark this box and indicate 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.**

<b>A</b> Deposit Period End Date(s)	<b>B</b> Date(s) Paid to MT DOR	<b>C</b> Montana Tax Withheld	<b>D</b> Montana Tax Paid	<b>E</b> Difference
<i>No slashes or dashes in dates please.</i>				
<input type="text" value="1"/> <input type="text" value="2"/> <input type="text" value="3"/> <input type="text" value="1"/> <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="5"/>	<input type="text" value="0"/> <input type="text" value="2"/> <input type="text" value="2"/> <input type="text" value="8"/> <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="6"/>	350.00	350.00	
<input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>	<input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>			
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\*15EH0101\*

**Not Required Filer**

**2015**

MONTANA  
MW-3  
Rev 05 15

**Montana Annual W-2 1099 Withholding Tax Reconciliation**

Name Not Required Ranch  
Address 458 Hunters Place  
City Bozeman  
State MT Zip 59715  Address Change

FEIN 03-6789012  
Account ID 4567678003WTH  
Pay Frequency Not Required  
Due Date 02282016

- If this is an amended return, mark this box.  
 If your business or payroll has ceased and you would like to close your account, mark this box and indicate 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:  
Justin Time 406-444-4070

**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
<i>No slashes or dashes in dates please.</i>				
<input type="text" value="1"/> <input type="text" value="2"/> <input type="text" value="3"/> <input type="text" value="1"/> <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="5"/>	<input type="text" value="0"/> <input type="text" value="3"/> <input type="text" value="3"/> <input type="text" value="1"/> <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="5"/>	<input type="text" value="100.00"/>	<input type="text" value="100.00"/>	
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