l Sta	Vo ples			2016	6 Montana In	dividual	Income Tax	Retu	rn		Fo	rm 2	
	Fo	r the year Jan	1 – Dec 31,	, 2016 or the tax y	ear beginning	M D D 2	0 1 6 and e	ending	MM	D D 2 0 Y	Υ		
	Mark all that apply		lame and Ir	nitial				Social Se	cial Security Number			Deceased? Date of Death	
	Amer		e's First Na	ame and Initial				Spouse's	Spouse's Social Security Number			Deceased? Date of Death	
	Retu											D D 2 0 Y Y	
	NOL Carry		Mailing Address		City				State Zip+	4			
	Filing S Mark on box.	tatus Iy one	3a Marrie 3b Marrie 3c Marrie	ed filing jointly ed filing separate ed filing separate	ely on the same form ely on separate forms ely and spouse not filing Spouse's SSN (for lines 3b ar			b and 3c)	3c)			File online at revenue.mt.gov	
	Residen	ncy	5a Resident full-year Resident Part-Year Required Information										
	Status Mark on box.	ly one	5b Nonre	sident full-year ent part-year	Date of change M M D Y Y State moved to State moved from			Y			akota reciprocity ructions on page 3)		
		First Name			Last Name	Last Name Social Security Number			per Relationship		Mark if Disabled		
Dependents													
	6a X Yourself 65 or older							joir	olumn A (for single, ht, separate, or hear of household)	C W	olumn B (for spouse hen filing separately		
ons					Blind Enter number marked				6a		u	sing filing status 3a)	
Exemptions	6b Spouse 65 or older 6c Enter the total number of dependents. If m 6d Add lines 6a through 6c and enter total ex				Blind Enter number marked				6b		_		
Exel									6c		_		
	6d Add lines 6a through 6c and enter total exemptions here												
	Enter amounts on lines 7 through 38 corresponding to your federal return. Round to nearest									-			
				I Form(s) W-2 e B if required				7		00	00		
									8a	(00	00	
		-		ot include on lin		00			0				
		-			lule B if required				9		00	00	
					e and local income ta				10		00	00	
		•				NAICS:			11 12		00	00	
me					chedule C or C-EZ. edule D if required				12		00	00	
lnco					chedule 4797				14		00	00	
Federal Income		A distributions		15a	00	0.0	Taxable amount		5b		00	00	
Fed		nsions and a		15a	00	00	Taxable amount		6b		00	00	
		 17 Rental real estate, royalties, partnerships, S corporations, trusts. Include federal Schedule E 							17		00	00	
			-		-				18		00	00	
	18 Farm income or (loss). Include federal Schedule F19 Unemployment compensation								19		00	00	
		cial security b		20a	00	0.0	Taxable amount		0b		00	00	
		-		200	00	00	Amount		21		00	00	
		her income; li	• •		inoo 7 thm: 04 Th:- !	a va t-t-!							
	22 Ad	u me amount	s in colum	ins A and B tor I	ines 7 thru 21. This i	s your total	income		22		00	00	



	I	Form 2, Page 2 – 2016 Social Security Number:			111		Column A (for single, joint, separate, or head of household)	Column B (for spouse when filing separately using filing status 3a)
	23	Your total income from line 22				23	00	00
	24	Educator expenses (Caution – see instructions on page 5)				24	00	00
	25	5 Certain business expenses of reservist, etc. Include federal Form 2106 or 2106-EZ					00	00
	26	6 Health savings account deduction. Include federal Form 8889					00	00
	27	Moving expenses. Include federal Form 3903	27	00	00			
Federal Adjusted Gross Income	28	Deductible part of self-employment tax. Attach federal Schedule S	28	00	00			
	29	Self-employed SEP, SIMPLE, and qualified plans	29	00	00			
	30	Self-employed health insurance deduction	30	0 0	00			
	31	Penalty on early withdrawal of savings	31	0 0	00			
	32a	Alimony paid	32a	0 0	00			
	32b	Recipient's SSN 32b						
	33	IRA deduction	33	0 0	00			
	34	Student loan interest deduction		34	0 0	00		
-	35	Tuition and fees (Caution – see instructions on page 6)				35	0 0	00
	36	Domestic production activities deduction. Include federal Form 89	903			36	0 0	00
	37	Add lines 24 through 36 and enter the result here.	Federa	l write-i	ns	37	0 0	00
	38	Subtract line 37 from line 23 and enter the result here				38	00	00
	38a	Combine amounts on line 38 columns A and B and enter here. This is your federal adjusted gross inco					e. 38a 00	
Montana AGI	39	Enter Montana additions to federal adjusted gross income from Form 2, page 4, Schedule I, line 16					00	00
	40	0 Enter Montana subtractions from federal adjusted gross income from Form 2, page 5, Schedule II, line 36					00	00
<	41	Add lines 38 and 39; subtract line 40. This is your Montana adjusted gross income				41	00	00
e	42	Deductions Must mark one box. Standard Deduction (see Worksh						
		Itemized Deductions (from Form 2	42	00	00			
	43	Subtract line 42 from line 41 and enter the result here	43	00	00			
laxable income	44	Exemptions (All individuals are entitled to at least one exemption. number of exemptions on line 6d and enter the result here	44	00	00			
	45	Subtract line 44 from line 43 and enter the result here. This is yo	45	00	00			
lax, Nonretundable Credits and Recapture	46	Tax from the tax table on page 7 or from Form 2, page 4. If line 45 enter zero	46	00	00			
	47	2% capital gains tax credit	47	00	00			
	48	Subtract line 47 from line 46; enter the result here, but not less than zero. This is your resident tax after capital gains tax credit					00	0.0
'edits ai	48a	Nonresident, part-year resident tax after capital gains tax credit. Enter here the amount from Form 2, Schedule IV, line 25, but not less than zero				48a	00	0.0
E E	49	Tax on lump-sum distributions. Include federal Form 4972	49	00	00			
ndap	50	Add lines 48 or 48a and 49 and enter the result here. This is you	50	00	00			
onretur	51	Enter the amount from Form 2, Schedule V, line 23, but do not en amount on line 50. This is your total nonrefundable credits	51	00	0.0			
X, Z	52	Recapture taxes (see instructions on page 7)	Code		Code	. 52	00	00
	53	Add lines 50 and 52, then subtract the amount on line 51 and enter This is your 2016 tax liability				53	00	00

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

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	Fo	rm 2, Page 3 – 2016 Social Security Number:					
				Column A (for single, joint, separate, or head of household)	Column B (for spouse when filing separately using filing status 3a)		
	54	Your 2016 tax liability from line 53	54	00	00		
ts	55	Montana income tax withheld. Include federal Forms W-2 and 1099	55	00	00		
redi	56	Montana mineral royalty tax withheld. Include federal Forms 1099-MISC and Montana Schedules K-1	56	00	00		
e C	57	Montana pass through entity withholding. Include Montana Schedules K-1	57	00	00		
ndab	58	2016 estimated tax payments and amount applied from your 2015 return	58	00	00		
efur	59	2016 extension payments from Form EXT-16	59	00			
Jd R	60	Refundable credits from Form 2, Schedule V, line 27	60	00			
ts ai	61	If filing an amended return: Payments made with original return	61	00			
Payments and Refundable Credits	62	If filing an amended return: Previously issued refunds	00				
Payl		Add lines 55 through 61. Subtract line 62, enter the result here. This is your total payments	00				
	64	If line 54 is greater than line 63, subtract line 63 from line 54. This is your tax due.	63 64	00			
	65	If line 63 is greater than line 54, subtract line 54 from line 63. This is your tax overpaid.	00				
	66	Interest on underpayment of estimated taxes (see instructions on page 10)		00			
ons	00	If applicable, mark appropriate box: 2/3 farming gross income Estimated pay					
Penalties, Interest and Contributions	67	Late file penalty, late payment penalty and interest (see instructions on page 10)			00		
ontr	68				00		
Jd C		Total voluntary check-off contribution programs from lines 69a through 69d			00		
st aı		69a Nongame Wildlife Program \$5 \$10		r amount			
Itere		69bChild Abuse Prevention\$5\$1000		r amount			
s, Ir		69c Agriculture Literacy in Montana Schools \$5 \$10 00		r amount			
altie		69d Montana Military Family Relief Fund \$5 \$10 00		r amount			
Pen	70	Add lines 66 through 69 and enter the result. This is the sum of your total penalties, interest an			0.0		
	70	If you have tax due (amount on line 64), add lines 64 and 70 OR, if you have a tax overpayment (ar		00			
	11	and it is less than line 70, subtract line 65 from line 70. Enter the result here. If married filing separa					
Dwe nd		amounts on lines 64 and 65, see instructions on page 12 This is the	unt you owe. ► ⁷¹	00			
ou C Refu		Pay online at revenue.mt.gov. Or make checks payable to MONTANA DEF	MENT OF REVENUE.				
Amount You Owe or Your Refund	72	If you have a tax overpayment (amount on line 65) and it is greater than line 70, subtract line 70 fro the result here. This is your overpayment.		0.0			
A o	73	Enter the amount from line 72 that you want applied to your 2017 estimated taxes		00			
	74	Subtract line 73 from line 72 and enter the result here	your refund. ► 74	00			
	Yo	act Deposit 1. RTN# 2. ACCT# ar Refund 3. If using direct deposit, you are required to mark one box. Check	kina	Savings			
		ctions on page 12).	U				
		4. Is this refund going to an account that is located outside of the United States			Yes No		
		of false swearing, I declare that I have examined this return, including accompanying schedules and statements, and to the ture is Required Date Daytime Telephone Number Spouse's			it is true, correct and complete. Date		
X X							
Paid Preparer's Signature Paid Preparer's PTIN/SSN Firm's FEIN							
	•						
Third F		Mark this box if you do not					
Do you	-		want forms and				
discuss			instructions mailed to you next year.				
Yes No							

