



2018 Montana Partnership Information and Composite Tax Return

Include a complete copy of federal Form 1065 and all related forms and schedules.

For calendar year 2018 or tax year beginning MMDD2018 and ending MMDDYYYY

Mark all that apply:

- Initial return
Final return
Amended return
Refund return
PTP

Name, Mailing Address, City, State, Zip Code + 4

FEIN, Enter number of Schedules K-1 Included, Resident Partners, Nonresident Partners, Other Types of Partners

Date Registered in Montana, State formed in

MT Secretary of State ID #, Federal Business Code/NAICS

Partners' Distributive Share of Income Items (Form 1065, Schedule K)

Table with 12 rows for income items: Ordinary business income, Net rental real estate income, Other gross rental income, Expenses from other rental activities, Guaranteed payments, Interest income, Ordinary dividends, Royalties, Net short-term capital gain, Net long-term capital gain, Net section 1231 gain, Other income.

Partners' Distributive Share of Deduction Items (Form 1065, Schedule K)

Table with 5 rows for deduction items: Section 179 deduction, Contributions, Investment interest expense, Section 59(e)(2) expenditures, Other deductions.

Partners' Distributive Share of Montana Additions and Deductions to Income

Table with 4 rows for Montana additions and deductions: Interest and dividends not taxable, Taxes based on income or profits, Interest on U.S. government obligations, Deduction for purchasing recycled material.

Apportioned and Allocated Montana Source Income Schedule I Not Required (see instructions)

Table with 3 rows for apportioned and allocated Montana source income.

Office Use Only, Date Received



File online at revenue.mt.gov



\*18DY0101\*

**Calculation of Amount Owed or Refund**

22. Enter your Montana total composite tax from Schedule IV, column H ..... 22.  00
23. Enter the sum of pass-through withholding from all Montana Schedules K-1, part 5, line 2a ..... 23.  00

**Withholding**

- 24 a. Total Montana mineral royalty tax withheld on your behalf (see instructions) 24a.  00
- b. Mineral royalty tax withheld distributed to partners..... 24b.  00
- c. Subtract 24b from 24a. **Montana mineral royalty tax withheld attributable to partnership.** ..... 24c.  00
- 25 a. Total Montana pass-through withholding paid on your behalf (see instructions)..25a.  00
- b. Montana pass-through withholding distributed to partners ..... 25b.  00
- c. Subtract line 25b from 25a. **Montana pass-through withholding attributable to partnership.**..... 25c.  00
26. Add lines 24c and 25c. **This is the total withholding payments attributable to partnership.** ..... 26.  00

**Return Payments**

- 27 a. 2017 overpayment applied to 2018 ..... 27a.  00
- b. 2018 estimated payments..... 27b.  00
- c. 2018 extension payment..... 27c.  00
- d. For amended returns only—payments made with original return ..... 27d.  00
- e. For amended returns only—previously issued refunds (see instructions) 27e.  00
- f. Add lines 27a through 27d, then subtract line 27e. **This is your total return payments.** ..... 27f.  00
28. Add lines 22 and 23, then subtract lines 26 and 27f. **This is your amount due or (overpaid).** ..... 28.  00

**Penalties and Interest (see instructions)**

- 29 a. Partnership information return late filing penalty ..... 29a.  00
- b. Interest on underpayment of estimated composite tax ..... 29b.  00
- c. Composite income tax return late filing penalty ..... 29c.  00
- d. Late payment penalty ..... 29d.  00
- e. Interest..... 29e.  00
- f. Add lines 29a through 29e. **This is your total penalties and interest.** ..... 29f.  00

**Amount Owed or Refund**

30. Add lines 28 and 29f..... 30.  00
31. If line 30 results in an amount due, enter it here. **This is the amount you owe.** ..... 31.  00
- Pay online at revenue.mt.gov.** If writing a check, make it payable to MONTANA DEPARTMENT OF REVENUE.
32. If line 30 results in an overpayment, enter it here. **This is your overpayment. Enter as a positive number.** 32.  00
33. Enter the amount from line 32 that you want applied to your 2019 composite estimated tax ..... 33.  00
34. Subtract line 33 from line 32 and enter the amount here. **This is your refund.** ..... 34.  00

**Direct Deposit**

**Your Refund**

1. RTN#  2. ACCT#

- Complete 1, 2, 3 and 4 (see instructions). 3. If using direct deposit, you are required to mark one box.  Checking  Savings
4. Is this refund going to an account that is located outside of the United States or its territories?  Yes  No

Under penalties of false swearing, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of Officer  Date  Printed Name and Title  Telephone Number

Print/Type Preparer's Name  Preparer's Signature  Date  PTIN

Firm's Name  Firm's Address  Telephone Number  Firm's FEIN

May the DOR discuss this tax return with your tax preparer?  Yes  No



### Schedule I - Apportionment Factors for Multistate Partnerships

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

| A. Everywhere | B. Montana. | C. Factor |
|---------------|-------------|-----------|
|---------------|-------------|-----------|

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

|   |     |    |    |
|---|-----|----|----|
| 1a. Land.....   | 1a. | 00 | 00 |
| 1b. Buildings.....  | 1b. | 00 | 00 |
| 1c. Machinery.....  | 1c. | 00 | 00 |
| 1d. Equipment.....  | 1d. | 00 | 00 |
| 1e. Furniture and fixtures.....                                       | 1e. | 00 | 00 |
| 1f. Leases and leased property.....                                   | 1f. | 00 | 00 |
| 1g. Inventories.....  | 1g. | 00 | 00 |
| 1h. Depletable assets.....  | 1h. | 00 | 00 |
| 1i. Supplies and other.....   | 1i. | 00 | 00 |
| 1j. Property of foreign subs included in combined group.....          | 1j. | 00 | 00 |
| 1k. Property of unconsolidated subs included in combined group.....   | 1k. | 00 | 00 |
| 1l. Property of pass-through entities included in combined group..... | 1l. | 00 | 00 |
| 1m. Multiply amount of rents by 8 and enter result.....               | 1m. | 00 | 00 |
| <b>Total Property Value</b> add lines 1a through 1m.....              |     | 00 | 00 |

Divide the total in column B by the total in column A. Multiply the result by 100. **This is your property factor.** ..... 1.  %

**2. Payroll Factor:**

|  |     |    |    |
|--|-----|----|----|
| 2a. Compensation of officers.....                                    | 2a. | 00 | 00 |
| 2b. Salaries and wages.....  | 2b. | 00 | 00 |
| Payroll included in:   |     |    |    |
| 2c. Costs of goods sold.....   | 2c. | 00 | 00 |
| 2d. Other expenses and deductions.....                               | 2d. | 00 | 00 |
| 2e. Payroll of foreign subs included in combined group.....          | 2e. | 00 | 00 |
| 2f. Payroll of unconsolidated subs included in combined group.....   | 2f. | 00 | 00 |
| 2g. Payroll of pass-through entities included in combined group..... | 2g. | 00 | 00 |
| <b>Total Payroll Value</b> add lines 2a through 2g.....              |     | 00 | 00 |

Divide the total in column B by the total in column A. Multiply the result by 100. **This is your payroll factor.** ..... 2.  %

**3. Gross Receipts Factor:**

|   |        |    |    |
|---|--------|----|----|
| 3a. Gross Receipts, less returns and allowances.....                                      | 3a.    | 00 |    |
| 3b. Receipts delivered or shipped to Montana purchasers:                                  |        |    |    |
| (1) Shipped from outside Montana.....   | 3b.(1) |    | 00 |
| (2) Shipped from within Montana.....  | 3b.(2) |    | 00 |
| 3c. Receipts shipped from Montana to:   |        |    |    |
| (1) United States government.....   | 3c.(1) |    | 00 |
| (2) Purchasers in a state where the taxpayer is not taxable.....                          | 3c.(2) |    | 00 |
| 3d. Receipts other than receipts of tangible personal property (e.g. service income)..... | 3d.    |    | 00 |
| 3e. Net gains reported on federal Schedule D and Form 4797.....                           | 3e.    | 00 | 00 |
| 3f. Other gross receipts (rents, royalties, interest, etc.).....                          | 3f.    | 00 | 00 |
| 3g. Receipts of foreign subs included in combined group.....                              | 3g.    | 00 | 00 |
| 3h. Receipts of unconsolidated subs included in combined group.....                       | 3h.    | 00 | 00 |
| 3i. Receipts (pro-rata share) of pass-through entities included in combined group.....    | 3i.    | 00 | 00 |
| 3j. Less: All intercompany transactions.....  | 3j.    | 00 | 00 |
| <b>Total Receipts Value</b> add lines 3a through 3j.....                                  |        | 00 | 00 |

Divide the total in column B by the total in column A. Multiply the result by 100. **This is your receipts factor.** ..... 3.  %

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

**5. Divide the percentage on line 4 by the number of factors included in the calculation of line 4. If a property, payroll or receipts factor is 0%, it is included in the calculation of line 4 if there's is a value in column A (see instructions).**

Enter the result here and also on page 1, line 19 of this form. **This is your apportionment factor.** ..... 5.  %





### Schedule II - Montana Partnership Tax Credits

| Type of Credit   | Amount of Credit |
|--|------------------|
| 1. Dependent Care Assistance Credit .....include Form DCAC   | 00               |
| 2. College Contribution Credit .....include Form CC  | 00               |
| 3. Health Insurance for Uninsured Montanans Credit ..... include Form HI                                 | 00               |
| 4. Recycle Credit ..... include Form RCYL  | 00               |
| 5. Alternative Energy Production Credit .....include Form AEPC   | 00               |
| 6. Contractor's Gross Receipts Tax Credit. If multiple CGR accounts, mark here. <input type="checkbox"/> |                  |
| CGR Account ID: <input type="text"/> C G R   | 00               |
| 7. Alternative Fuel Credit.....include Form AFCR   | 00               |
| 8. Infrastructure User Fee Credit.....include Form IUFC  | 00               |
| 9. Historic Property Preservation Credit .....include federal Form 3468                                  | 00               |
| 10. Mineral and Coal Exploration Incentive Credit .....include Forms MINE-CERT and MINE-CRED             | 00               |
| 11. Empowerment Zone Credit.....   | 00               |
| 12. Biodiesel Blending and Storage Credit.....include Form BBSC  | 00               |
| 13. Innovative Educational Program Credit.....   | 00               |
| 14. Student Scholarship Organization Credit.....   | 00               |
| 15. Emergency Lodging Credit.....include Form ELC  | 00               |
| 16. Unlocking Public Lands Credit.....   | 00               |
| 17. Apprenticeship Tax Credit.....   | 00               |

| Type of Credit Recapture   | Amount of Credit Recapture |
|--|----------------------------|
| 18. Historic Property Preservation Credit Recapture.....                         | 00                         |
| 19. Film Production Credit Recapture.....  | 00                         |
| 20. Biodiesel Blending and Storage Credit Recapture.....                         | 00                         |
| 21. Oilseed Crushing and Biodiesel/Biolubricant Production Credit Recapture..... | 00                         |

When attributing any credit or credit recapture from a partnership to its partners, use the same proportion the partnership used to report each partner's income or loss for Montana tax purposes. Include a detailed breakdown that shows each partner's share of the credit or credit recapture.

Use Montana Schedule K-1 to notify each partner of the amount of credit available to the partner.



### Schedule IV – Montana Partnership Composite Income Tax Schedule

**Part I. Eligible Participating Partners**

Enter the number of eligible participating partners.   
 See instructions for more information about eligible participating partners.

**Part II. Composite Tax Ratio**

Use the amount in column 3 to complete the calculation in column H below.

| 1   | 2   | 3  |
|---|---|--|
| Enter the amount from page 1, line 15 of this form. | Enter the amount from page 1, line 21 of this form. | Divide column 2 by column 1. Do not enter more than 1.000000 |
| 00  | 00  |  |

**Part III.** Enter below in columns A through H the required information and amounts for each eligible participating partner.

|   | A   | B  | C   | D                  | E                 | F  | G   | H   |    |
|---|---|--|---|--------------------|-------------------|--|---|---|----|
|   | Name  | Social security number or federal employer identification number | Partner's share of federal income from entity | Standard deduction | Exemption \$2,440 | Montana taxable income – Subtract columns D and E from column C. | Enter the appropriate tax from the tax table below. | Montana composite income tax. Multiply column G times composite tax ratio from Part II. |    |
| 1.  |   |  | 00  | 00                 | 00                | 00   | 00  | 00  |    |
| 2.  |   |  | 00  | 00                 | 00                | 00   | 00  | 00  |    |
| 3.  |   |  | 00  | 00                 | 00                | 00   | 00  | 00  |    |
| 4.  |   |  | 00  | 00                 | 00                | 00   | 00  | 00  |    |
| 5.  |   |  | 00  | 00                 | 00                | 00   | 00  | 00  |    |
| 6.  |   |  | 00  | 00                 | 00                | 00   | 00  | 00  |    |
| 7.  |   |  | 00  | 00                 | 00                | 00   | 00  | 00  |    |
| 8.  |   |  | 00  | 00                 | 00                | 00   | 00  | 00  |    |
| 9.  |   |  | 00  | 00                 | 00                | 00   | 00  | 00  |    |
| 10.   |   |  | 00  | 00                 | 00                | 00   | 00  | 00  |    |
| 11.   | Enter the total composite tax from all additional pages, if used..... |  |   |                    |                   |  |   |   | 00 |
| Add column H, lines 1 through 11. <b>This is your total composite income tax liability.</b> |   |  |   |                    |                   |  |   | 00  |    |

Transfer the amounts from column H to each partner's Montana Schedule K-1, Part 5, Line 1.



\*18DY0501\*

If additional space is needed, make copies of this page. Include all additional pages from line 11 with the tax return.

| If Your Taxable Income Is More Than | But Not More Than  | Multiply Your Taxable Income By | And Subtract | This Is Your Tax |
|-------------------------------------|--------------------|---------------------------------|--------------|------------------|
| \$0                                 | \$3,000            | 1% (0.010)                      | \$0          |                  |
| \$3,000                             | \$5,200            | 2% (0.020)                      | \$30         |                  |
| \$5,200                             | \$8,000            | 3% (0.030)                      | \$82         |                  |
| \$8,000                             | \$10,800           | 4% (0.040)                      | \$162        |                  |
| \$10,800                            | \$13,900           | 5% (0.050)                      | \$270        |                  |
| \$13,900                            | \$17,900           | 6% (0.060)                      | \$409        |                  |
|                                     | More Than \$17,900 | 6.9% (0.069)                    | \$570        |                  |

### Schedule VI – Reporting of Special Transactions

Complete Schedule VI only if your partnership filed any of the federal income tax forms described below. Mark the appropriate box indicating which form(s) you filed with the Internal Revenue Service for this tax year. If your answer is "Yes" to one or more of these forms, you need to include a complete copy of your federal tax return Form 1065.

1. The partnership filed federal **Form 8918 – Material Advisor Disclosure Statement** with the Internal Revenue Service.  Yes

Material advisors to any reportable transactions must file Form 8918.

2. The partnership filed federal **Form 8824 – Like-Kind Exchanges** with the Internal Revenue Service.  Yes

NOTE: Mark the box if your like-kind exchange includes Montana property. Nonresidents do not have to report a like-kind exchange if the properties involved do not include Montana property. Use Form 8824 to report each exchange of business or investment property for property of a like-kind.

3. The partnership filed federal **Form 8865 – Return of U.S. Persons With Respect to Certain Foreign Partnerships** with the Internal Revenue Service.  Yes

Use Form 8865 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).

4. The partnership filed federal **Form 8886 – Reportable Transaction Disclosure Statement** with the Internal Revenue Service.  Yes

Use Form 8886 to disclose information for each reportable transaction in which you participated.

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

5. **During this tax year, the partnership made payments to one or more related parties (excluding salary compensation) that exceed \$100,000 per recipient.**  Yes

If you answer "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       |
|----------------------|----------------------|-------------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> 00 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> 00 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> 00 |

