

Montana Estate or Trust Tax (80) Payment Instructions Attention: Montana Department of Revenue Cashier

Complete the ir	nformation below to ensure proper cre	edit of your payme	nt.	
Name				
Mailing Address	s			
City, State, Zip	Code			
Phone				
Box 5 – Box 6 – Box 7 –	h 4 – Print an "X" in one box only for Check box 1, if your payment is Check box 2, if your payment is Check box 3, if your payment is Check box 4, if your payment is Enter the tax year for which this Enter your federal employer ide Enter the amount you are remit	s for the current yes for estimated tax. s for an extension. s for an amended r s payment applies entification number	ar. eturn. (period ending date).	
separate check	money order payable to the Departm or money order and a separate vouc nt ID and the tax year for which the pa	ther for each year.		
Mail this form Department of PO Box 8021 Helena, MT 596		pplicable) to:		
If you have que	estions, please call us toll free at (866) 859-2254 (in Hel	ena, 444-6900).	
		na Estate or Tru Payment Form		
Substitute Fo	orm FID			
1. Current y	/ear	5.	Period ending	month day year
2. Estimate			Federal employer identification	
3. Extension	n		number (FEIN)	
4. Amended	d return	7.	Amount paid	