

Resource Indemnity Trust Tax Industrial Mineral Producers

(All minerals except coal, garnet, quicklime, talc, and vermiculite)

	Name Address Address City, ST Zip					
	1. FEIN:		2. Account ID:			
:	3. Period: Due: 5. If you are no longer in business and want your account cancelled, check box and enter final date.		4. If this is an amended return, check here. 6. If your address has changed, check the box and print new address below:			
7. N	line Operator:		8. Mine Name:			
9. C	ounty:	Section:	Township:	Range:		
	Type of Miner	al	Quantity	Gross Value		
10.	Sand and gravel		cubic yds	\$		
11.	Silica		tons	\$		
12.	Precious stones		carats	\$		
13.	Travertine/building stone		tons	\$		
14.	Bentonite		tons	\$		
15.	Limestone		tons	3		
16.	Other (indicate weight measurement)					
17.	Total Gross Value			. \$		
Calculation of Resource Indemnity Trust Tax:						
18.	Tax (line 17 X .005 with a minimum tax of \$25)			. \$		
19.	Penalties			\$		
20.	Interest			\$		
21.	Total Amount Due (add lines 18, 19, and 20)			\$		
I hereby swear or affirm under penalty of perjury that the statements contained herein are true to the best of my knowledge. Signature						
Title		Ph	one	Date		

Resource Indemnity Trust Tax Industrial Mineral Producers

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Account Information:

- Line 3: This Report is due on or before the 60th day following the end of the calendar year.
- Line 4: If you are filing an amended return, this box must be checked.
- Line 5: If you are no longer in business, enter your final day of business here.
- Line 6: If your mailing address has changed, check the box and provide your new address in the space provided.
- Line 7: Enter mine operator.
- Line 8: Enter the mine name.
- Line 9: Enter the county where the mine is located and the legal description.

Total Gross Value:

- Line 10: Enter the quantity and gross value of product at the time of extraction.
- Line 11: Enter the quantity and gross value of product at the time of extraction.
- Line 12: Enter the quantity and gross value of product at the time of extraction.
- Line 13: Enter the quantity and gross value of product at the time of extraction.
- Line 14: Enter the quantity and gross value of product at the time of extraction.
- Line 15: Enter the quantity and gross value of product at the time of extraction.
- Line 16: Enter the quantity and gross value of product at the time of extraction.
- Line 17: Enter Total Gross Value by adding lines 10 through 16.

Calculation of Resource Indemnity Trust Tax:

- Line 18: Tax Due: multiply line 17 by .005 (.5%); with a minimum tax of \$25.00.
- Line 19: If payment is delinquent you are subject to penalty of 1.5% per month, not to exceed 18% of the tax due, for tax periods beginning on or before December 31, 2006. For tax periods beginning after December 31, 2006, the late payment penalty continues to accrue at 1.2% a month but cannot exceed 12% of the tax due. In addition, a late filing penalty of \$50 or the amount of the tax due, whichever is less, also applies if the return is filed late. Enter the Penalty on line 19.
- Line 20: If payment is delinquent you are subject to interest of 12% per year, calculated daily, from the original due date of this report until paid. Enter the interest on line 20.
- Line 21: Total Amount Due: add lines 18, 19, and 20. This should be the amount submitted with this return. Please reference your Account ID from line 2 of the return on the memo line of your check.

Sign the return and provide the title and phone number (where the person signing this return can be reached during business hours).

Please call (406) 444-6900 if you have any questions regarding the completion of this return.

Make check payable to the Department of Revenue. Mail this return and payment to:
Department of Revenue, PO Box 5805, Helena MT 59604-5805



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Payment Instructions

Attention: Montana Department of Revenue Cashier

Complete the payment coupon below to ensure proper credit of your payment. If you are paying taxes for multiple periods, submit a separate check or money order and a separate coupon for each period. On the memo line of your check, please note your FEIN or account ID and the reporting period for which the payment applies.

Boxes 1 and 2 – Print an "X" in **one** box only for the type of payment you are remitting:

Check box 1, if your payment is for an original return for any period.

on line 21 of your return).

Check box 2, if your payment Box 3 – Enter the reporting period for Box 4 – Enter your federal employer i Box 5 – Enter the amount you are rer	which this payment applies.
Name:	
Address:	
City, ST, Zip Code	
Phone	
Mail this entire form with your checonomy checonomy control of Revenue PO Box 5805 Helena, MT 59604-5805	ck or money order and return to:
Questions? Call (406) 444-6900	
Make checks payable to the Departm	ent of Revenue
	Montana Resource Indemnity Trust Tax Industrial Mineral Producers All minerals except coal, garnets, talc, and vermiculite) Payment Form
1. Original return	
2. Amended return	month day year
	3. Period Ending / /
	4. Federal Employer Identification Number (FEIN)
	5. Amount Paid