

Employee Certificate of North Dakota Residence

Use this form to terminate withholding of Mor Montana-North Dakota Reciprocity Agreeme		espect to comper	sation which is exempt under the
l,State of North Dakota for purposes of state ir	ndividual income tax, ar		ify that I am a legal resident of the ess in North Dakota is:
Address	City	State	Zip
swear that the statements I have made in the	nis certificate are true a	nd correct.	
Signature	Date		Social Security Number

Statement of Explanation

Pursuant to statutory authority 15-30-306 Montana and North Dakota have executed a reciprocal income tax agreement whereby Montana will not tax North Dakota residents on income from personal services rendered in Montana, and North Dakota will not tax Montana residents on income from personal services rendered in North Dakota. The exemption is specifically limited to compensation for personal or professional services which is subject to withholding of federal income tax.

Withholding of Montana income tax will not be required for the above described compensation paid to an employee who is a North Dakota resident, provided, the employee has furnished his/her employer with Certificate of Residence Form NR-2.

Instructions to Employee

Complete two copies of this form. File one copy with your employer, and mail the other copy to the Montana Department of Revenue. PO Box 5835, Helena, MT 59604-5835.