

W-2 Withholding Declaration

Please print or type

Name of taxpayer (employee)	
Social Security Number	
Complete address	
Name of employer	
Business name	
Complete address	
Type of business	
Federal Employer Identification Number (FEIN)	
Tax Year	
Total wages paid \$	
Federal income tax withheld \$	
Montana income tax withheld \$	
I hereby declare under penalty of perjury that the above named emplo	oyer,
Circle one: failed to furnish refused to furnish	
me with copies of Federal Form W-2 showing the Montana income tax stated above as Montana income tax withheld was calculated in the foused to make your calculation):	• •
Signature of taxpayer is required	 Date

Questions? Please call us at (406) 444-6900 or TDD (406) 444-2830 for hearing impaired.

When you file your Montana income tax return electronically, you represent that you have retained all documents required as a tax record and that you will provide a copy to the department upon request.