

W-2 Withholding Declaration

Please print or type			
Taxpayer Name (em	oloyee)		
	oer		
Employer Name			
Type of Business			
Federal Employer Ide	entification Number (FEIN)		
Tax Year		•	
Total Wages Paid			
Federal Income Tax Withheld (attach supporting documentation)		\$	
Montana Income Tax Withheld (attach supporting documentation)		\$	
I hereby declare und	er penalty of perjury that the above named employer		

(check one) did not furnish refused to furnish

Federal Form W-2 showing the Montana income tax withheld from my wages. The amount stated above as Montana income tax withheld was calculated as described in the documents I have attached to this form.

Signature of taxpayer (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.