## **EMPLOYEE CERTIFICATE OF** NORTH DAKOTA RESIDENCE

	nholding of Montana income tax wit	•	•	
I, of North Dakota for purposes	of state individual income tax, and		at I am a legal resident of t h Dakota is:	he State
Address I swear that the statements I is	City nave made in this certificate are tru	State and correct.	Zip	
Signature		Date		
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## 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.

Questions? Please call 1-406-444-6900 or TDD 1-406-444-2830 for hearing impaired.

