

Attention Montana Department of Revenue Cashier

Pass-Through Entity Payment Form

Complete the payment coupon below to ensure proper credit of your payment. If you are paying taxes for multiple years, submit a separate check or money order and a separate coupon for **each** tax year.

Boxes 1 through 4- Print an "X" in **one** box only for the type of payment being remitted:

- Box 1, if your payment is for the current year.
- Box 2, if your payment is for estimated tax.
- Box 3, if your payment is a tentative payment.
- Box 4, if your payment is for an amended return.

- Box 5, is the year your payment is for.
- Box 6, is for your Federal Identification # (FEIN).
- Box 7, is the amount paid.

Name _____

Address _____

Phone _____

Mail this entire form with your check and return to:

Department of Revenue
PO Box 8021
Helena, MT 59604-8021
Make checks payable to the Department of Revenue

Questions? Call (406) 444-6900

Form PT

Montana Pass-Through Entity Payment Form

1. Current Year
Pass-Through Entity

2. Estimated Tax

3. Tentative

4. Amended

5. Year Ending Date month day year
_____ / _____ / _____

6. Federal Employer
Identification
Number (FEIN) _____ - _____

7. Amount Paid _____ cents
_____, _____, _____.