



**Montana Withholding Tax
(75)
Payment Instructions**

Attention: Montana Department of Revenue Cashier

Complete the payment voucher below to ensure proper credit of your payment. If you are paying taxes for multiple periods, submit a separate check or money order and a separate voucher for each period. On the memo line of your check, please note your FEIN or account ID and the tax period for which the payment applies.

Boxes 1 through 3 – Print an “X” in one box only for the type of payment you are remitting:

Check box 1, if your payment frequency is accelerated.

Check box 2, if your payment frequency is monthly.

Check box 3, if your payment frequency is annual.

Box 4 – Enter the period end date for which this payment applies.

Box 5 – Enter your federal employer identification number (FEIN).

Box 6 – Enter the amount you are remitting.

Name _____

Address _____

City, State, Zip Code _____

Phone _____

Mail this form with your payment and return (if applicable) to:

Department of Revenue
PO Box 5805
Helena, MT 59604-5805

If you have questions, please call us toll free at (866) 859-2254 (in Helena, 444-6900).

Make check or money order payable to the Department of Revenue.

**Montana Withholding Tax
Payment Form**

Substitute Form MW-1

Payment Frequency

1. Accelerated

2. Monthly

3. Annual

4. Period ending date

month	day	year
/	/	

5. Federal Employer Identification Number (FEIN)

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6. Amount paid

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