Last Name			1 25 - Individu		Your Social Secur		2002 Full Y
				ased			Resid
Spouse's Last Nam	ne if Different	Spous	se's First Name & Middle Initial	Deceased	Spouse's Social Se	curity No.	ONL Filing fr
Mailing Address	(Montana Address	noo Only)	City			Zip Code + 4	Montana A
Ivialility Address	(Worldana Address	ses Offiy)	Oity		MT 59	Zip Codo i 4	
Filing Status	1. Single 2. N	larried filing	Head of Household	For Tax Due		of Revenue	All Other Roand Refunds
Check One	joir	it return	(see Instructions)		PO Bo	k 6308	Dept. of Re
Exemptions	Regular	65 or C	Over Blind A	│ I filers are entitled to	Helena at least one exemp	ı <u>, MT 59604-</u> ı <u>tion</u>	6308 PO Box 6 Helena, MT 59
1 Vouroelf	V				Enter number che	cked 1.	
Yourself Spouse	=				Enter number che		File on or Before April 15, 2003
Dependents	Name					CREU 2.	April 13, 2003
o. Dopondonio	Do not claim yourself	or spouse	Dependents social security number	Relationship			
					3. Dependents	3.	Round To
					Handicapped Dependence	dent 4.	nearest dollar
					Attach Doctor's Certifi		If no entry
		<u>'</u>	s, see instructions)		umber Exemptio		leave blank
			A				
			A			_	
	•		uities			٠. 🗀	
						10. tal 11	
			ent loan interest, etc., specif			_	
			12 from line 11)				
	-		(non-Montana) and/or feder			14.	
Subtract:		'		•		14.	
	seion and annuity i	ncome - see M	orksheet IV, page 13			15	
						I .	
	•		cify)			I .	
	•						
			to page 5 of instructions			I .	
20. Total adjustm	ents decreasing inco	me (add lines 15 t	thru 19)		То	tal 20.	
21. Montana Ad	justed Gross Incon	ne (add lines 13	and 14, subtract line 20)			21.	
22. (A) Standard	d deduction-see Wo	orksheet V, page	Check one only 13 (A)				
(B) Federal	or income taxes paid	or withheld in 20					
			Box 5 above				
			han zero enter zero)				
			of this form ouse would like to contribute			26.	
Nongame Wildl		Child AbusePrevention			.		
28.	CHILDREN'S	29.	Agriculture in MT Sch		amounts in boxes.	27.	
31. Total Tax — A							
32. Montana tax	withheld		Attach withho	lding statements	W-2(s), 1099(s)	etc. 32.	
•			EC with your receipts			I .	
			erence (refunds of more than			nd 35.	
If you wish to use	direct deposit enter y	our RTN# and AC	CCT# below. See instruction	Direct De	Checking	7	
RTN#		ACCT#			Savings		
36. I	f line 31 is larger tha	n line 34 enter diff	erencevisit our website at <u>www.d</u>		Tax [Oue 36.	
new if you chose and enter you	e to pay your tax du our confirmation nu	e by credit card mber here	visit our wedsite at <u>www.d</u>	scoveringmonta See ii	<u>na.com/revenue</u> nstructions on pag	e 11.	
	e instructions for calc		s)		1 - 3		
Under P	ay Pen.	Late File	Late Pay	nterest	Total of Box	ces 37.	
		ach check or mone	ey order for full amount if \$1.	00 or more.	_		
			9		TOTAL	DUE 38.	
	ur payment with the pay						
			May the DOR discuss thi	s return with the pre	parer shown?		do not need state income
Name, Ado	dress & Telephone Num	ber of Preparer	Yes No				ms and instructions mailed next year, check box.
V		1	1	V			1
A				Λ			

I declare under penalty of false swearing that the information in this return and attachments is true, correct and complete.

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

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MONTANA

If Taxable Income is:			TaxTable			If Taxable Income is:		
Over Bu	t not over	Multiply by and Su	ıbtract = Tax	Over	But not over	Multiply by	and Subt	ract = Tax
\$ 0	\$ 2,200.	X 2 %\$ (0	\$17,400	\$21,800	X 7 %	\$	458
\$ 2,200	\$ 4,400.	X 3 %\$ 2	22	\$21,800	\$30,500	X 8 %	\$	676
\$ 4,400	\$ 8,700.	X 4 %\$ 6	66	\$30,500	\$43,500	X 9 %	\$	981
\$ 8,700	\$13,100.	X 5 %\$ 15	3	\$43,500	\$76,200	X 10 %	\$ 1	,416
\$13,100	\$17,400 .	X 6 % \$ 28	34	\$76,200		X 11 %	\$2	2,178
Example = taxable income \$2,400 x 3% (.03) = \$72 subtract \$22 = \$50 tax								

Standard Deduction Worksheet



1. Enter amount from line 21 of Fo	1	
2. Enter 20% of line 1.		2
3. Enter the amount from below	that corresponds to your filing status:	
	Single (filing status 1): \$3,260	
	Joint or head of household (filing status 2 or 3):\$6,520	3
4. Enter the amount from line 2	4	
5. Enter the amount from below	that corresponds to your filing status:	
	Single (filing status 1) \$1,450	
	Joint or head of household (filing status 2 or 3): \$2,900	5
6. Enter the amount from line 4 your standard deduction. Tra	6	

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