



# 2005 Corporation License Tax Return

**C**  
**MONTANA**  
 Form CLT-4  
 Rev. 9-05

For calendar year 2005 or tax year beginning (MM-DD) \_\_\_ - \_\_\_ - **05** and ending (MM-DD-YY) \_\_\_ - \_\_\_ - \_\_\_

- Check if applicable:
- Initial Return
  - Final Return
  - Amended Return

Corporation Name		
Address		If new address check here <input type="checkbox"/>
City	State	Zip + 4

FEIN \_\_\_\_\_  
 Federal Business Code \_\_\_\_\_  
 Incorporated in State of \_\_\_\_\_  
 Date \_\_\_\_\_  
 Date Qualified in Montana \_\_\_\_\_

Check this box if you do not need these Montana corporation license tax return and instructions sent to you next year

## Copy of signed Federal Form 1120 as filed with the Internal Revenue Service has to be attached

**Part I - Filing Method - Check applicable filing method (see instructions)**

- a. Separate Company.....  a.
- b. Separate Accounting.....  b.
- c. Worldwide Combination.....  c.
- d. Domestic Combination.....  d.
- e. Limited Combination.....  e.
- f. Water's Edge (must have a valid election and Schedule WE must be attached).....  f.
- g. Exempt from tax under provisions of Public Law 86-272 (Schedule K must still be completed).....  g.

**Part II - Amended Return Only - Check all that apply**

- a. Federal Revenue Agent Report, a complete copy of this report is required.....  a.
- b. NOL carryback/carryforward; year of loss \_\_\_\_\_.....  b.
- c. Apportionment factor changes (attach a statement explaining all adjustments in detail).....  c.
- d. Amended federal return (Form 1120X); a complete copy of this return is required.....  d.
- e. Application and/or change in tax credit; type of credit being claimed \_\_\_\_\_.....  e.
- f. Other - Attach a statement explaining all adjustments in detail.....  f.

**Part III - General Questions - All questions have to be answered**

a. Describe in detail the nature and location(s) of your Montana activities (if necessary, provide the description on an additional page)  
 \_\_\_\_\_

b. Is this your corporation's first Montana return?..... Yes  No   
 If this corporation is a successor to your previously existing business, enter name and FEIN of your previous business: \_\_\_\_\_

c. Is this your corporation's final Montana return? ..... Yes  No   
 If so, indicate whether it has been:  
 Withdrawn  Merged (please attach detailed statement)  
 Dissolved (please attach detailed statement)  Reorganized (please attach detailed statement)  
 Date of withdrawal, dissolution, merger, or reorganization \_\_\_\_\_

d. For any periods, has the Internal Revenue Service issued an official notice of change or correction that you filed with the Montana Department of Revenue? If "yes," indicate the most recent taxable year for which an official notice has been issued by the Internal Revenue Service. \_\_\_\_\_ Yes  No

e. Are any statute of limitation waivers currently in force that have been executed with the Internal Revenue Service?..... Yes  No   
 If "yes," which taxable years are covered and what are the expiration dates of the waivers? \_\_\_\_\_

f. Have you filed an amended federal return for any of the last five (5) taxable periods?  
 If "yes," for which years have you filed amended Montana returns? \_\_\_\_\_ Yes  No

g. Was your corporation included as a member of a consolidated group for Internal Revenue Service filing purposes?..... Yes  No   
 If "yes," you will need to provide support for your consolidated taxable income by attaching pages 1 through 4 of the consolidated U.S. Corporation Income Tax Return (Form 1120) that you filed with the Internal Revenue Service.  
 Enter the ultimate U.S. parent's FEIN: \_\_\_\_\_  
 Enter the ultimate U.S. parent's name: \_\_\_\_\_

Form CLT-4, Page 2 - **Part III - continued**

- h. Did an individual at the end of the taxable year own, directly or indirectly, 50% or more of the voting stock of this corporation?.....Name: \_\_\_\_\_ % of ownership: \_\_\_\_\_ Yes  No
- i. Did a partnership, corporation, estate or trust at the end of the taxable year own, directly or indirectly, 50% or more of the voting stock of this corporation?..... Yes  No
- j. If the answer to question (h) or (i) is yes, did the same individual, partnership, corporation, estate or trust at the end of the taxable year also own, directly or indirectly, 50% or more of the voting stock of another (brother-sister) corporation?..... Yes  No
- k. Did this corporation or any member of the consolidated group own, directly or indirectly, 50% or more of the outstanding voting stock of a domestic corporation that is not included in the consolidated group referenced in (g) above?..... Yes  No
- l. Did this corporation or any member of the consolidated group own, directly or indirectly, 50% or more of the outstanding voting stock of a controlled foreign corporation?..... Yes  No

**If you answered "yes" to any of the above questions (i - l), you will need to complete Schedule M.**

**NEW Part IV - Reporting of Special Transactions**

Check "yes" if the Internal Revenue Service required you to file any of the following forms. You will need to attach to your Montana return a complete copy of any of these applicable forms.

	Transaction
<p><b>a. I am required to file federal Form 8264 – Application for Registration of a Tax Shelter with the Internal Revenue Service.</b></p> <p>The IRS requires investors to file a Form 8264 in order to register for a tax shelter. Upon filing Form 8264, you receive a tax shelter registration number from the Internal Revenue Service. This tax shelter number is provided to investors in the tax shelter.</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p><b>b. I am required to file federal Form 8271 – Investor Reporting of Tax Shelter Registration Number with the Internal Revenue Service.</b></p> <p>Form 8271 is used to report the tax shelter registration number that the Internal Revenue Service assigns to certain tax shelters required to be registered under 26 USC 6111 and to report the name and identifying number of the tax shelter.</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p><b>c. I am required to file federal Form 8824 – Like-Kind Exchanges with the Internal Revenue Service.</b></p> <p><b>Check "yes" if your like-kind exchange includes Montana property.</b></p> <p>Form 8824 is used to report each exchange of business or investment property for property of a like-kind.</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p><b>d. I am required to file federal Form 8865 – Return of U.S. Persons With Respect to Certain Foreign Partnerships with the Internal Revenue Service.</b></p> <p>Form 8865 is used to report the information required under 26 USC 6038 (reporting with respect to controlled foreign partnerships), section 6038B (reporting of transfers to foreign partnerships), or section 6046A (reporting of acquisitions, dispositions, and changes in foreign partnership interest).</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p><b>e. I am required to file federal Form 8886 – Reportable Transaction Disclosure Statement with the Internal Revenue Service.</b></p> <p>Form 8886 is used to disclose information for each reportable transaction in which you participated.</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p><b>f. I am required to file federal Form 13657 - Notice of Election by Corporation to Participate in Announcement 2005-19 Settlement Initiative with the Internal Revenue Service.</b></p> <p>Form 13657 is an election to participate in the settlement initiative as described in Announcement 2005-19 and as contained in Internal Revenue Bulletin 2005-11 dated March 14, 2005.</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>

**Declaration**

Under penalties of perjury, I, the undersigned officer of the corporation, declare that to the best of my knowledge and belief, this return and accompanying schedules are a true, correct, and complete return made in good faith for the income period stated above, pursuant to Montana corporation license tax law and regulations.

Signature of officer	Date
Print name	Telephone number, ext.
Name of person or firm preparing return	Date
Preparer's identification number	Telephone number

Check here to authorize the Montana Department of Revenue to discuss your return with the individual/preparer listed above.

**Computation of Montana Taxable Income and Net Amount Due** FEIN \_\_\_\_\_

1. Enter the taxable income that you reported on your federal return (line 28) (a copy of signed federal Form 1120 has to be attached).		1.
2a. Enter your Montana corporation license tax (attach breakdown of federal Form 1120 line 17).....	2a	
2b. Enter your other state, local, foreign, and franchise taxes based on income.....	2b	
2c. Enter your federal tax exempt interest.....	2c	
2d. Enter your contributions used to compute qualified endowment credit.....	2d	
2e. Enter your income/loss of foreign subsidiaries for worldwide combined filers.....	2e	
2f. Enter your income/loss of unitary corporations not included in federal consolidated return.....	2f	
2g. Enter your extraterritorial income exclusion.....	2g	
2h. Enter your deemed dividends (Water's Edge filers only) You need to attach Schedule WE.....	2h	
2i. Enter your federal capital loss carry-over utilized on federal return.....	2i	
2j. Enter all of your other additions (you will need to provide a detailed breakdown).....	2j	
Add lines 2a through 2j and enter the result. <b>This is the total of your additions</b> .....		2.
3a. Enter your IRC Section 243 dividend received deduction.....	3a	
3b. Enter your non-business income (you will have to attach a detailed breakdown).....	3b	
3c. Enter your Montana recycling deduction (attach Form RCYL).....	3c	
3d. Enter your income/loss of nonunitary corporations included in federal consolidated return.....	3d	
3e. Enter your capital loss incurred in current year (attach federal Schedule D).....	3e	
3f. Enter all of your other reductions (a detailed breakdown has to be attached).....	3f	
Add lines 3a through 3f and enter the result. <b>This is the total of your reductions</b> .....		3.
4. Add line 1 and line 2, then subtract line 3 from that total and enter the result. <b>This is your adjusted taxable income</b> .....		4.
5. Calculate your income apportioned to Montana (multiply line 4 X _____% from Schedule K, line 5) and enter the result....		5.
6. Enter the income that you allocated directly to Montana (multi-state taxpayers have to attach a detailed breakdown).....		6.
7. Montana taxable income before net operating loss (line 5 + line 6 or enter amount reported on line 4).....		7.
If line 7 is a loss, do you wish to forego the net operating loss carry-back provision? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Note: If you have reported a loss on line 7 and have checked neither box, the loss first has to be carried back		
8. Enter your Montana net operating loss carried over to this period (a detailed schedule has to be attached).....		8.
9. Subtract line 8 from line 7 and enter the result here. <b>This is your Montana taxable income</b> .....		9.
10. Multiply line 9 by 6.75% (or line 9 by 7% if you have a valid water's edge election). <b>This is your Montana tax liability</b> .....		10.
Note: This amount cannot be less than the minimum tax liability of \$50. Also note that the minimum tax applies to each corporation having Montana activity.		
Note: Check this box if you are calculating your tax liability using the Alternative Tax method.... <input type="checkbox"/>		
11. Payments: a. Enter your 2004 overpayment.....	11a	
b. Enter your tentative payment.....	11b	
c. Enter your quarterly estimated tax payments.....	11c	
d. Enter all other payments. Describe _____	11d	
e. Enter your previously issued refunds. Describe _____	11e	( )
Add lines 11a through 11e and enter the result. <b>This is the total of your payments</b> .....		11.
12. Enter total credits (from Schedule C).....		12.
13. Add line 11 and line 12, then subtract the sum from line 10 and enter result. <b>This is your tax due or overpayment</b> .....		13.
14. Enter interest on all tax paid after the due date, calculated at 12% per year, on a daily basis.....		14.
15. Enter estimated tax underpayment interest penalty (attach Form CLT-4-UT) ... <input type="checkbox"/> Check box if you are using the annualized income or adjusted seasonal income method		15.
16. Penalty: a. Enter your late filing penalty (see instructions).....	16a	
b. Enter your late payment penalty (see instructions).....	16b	
Add lines 16a through 16b and enter the result. <b>This is your total penalty</b> .....		16.
17. Add lines 13 through 16 and enter the result. <b>This is your total due or overpayment</b> .		
Note: Please attach your remittance payable to the Montana Department of Revenue or visit our website at www.mt.gov/revenue to pay online by Business Tax Express.....		17.
18. Enter the amount of overpayment that you want to be applied to your 2006 estimated tax.....		18.
19. Add line 17 and line 18 and enter the result. <b>This is your net amount due</b> .....		19.

**Copy of signed federal Form 1120 has to be attached** Mail to: Montana Department of Revenue, PO Box 8021, Helena, MT 59604-8021

**Schedule K**

Corporation Name	Taxable period ending	FEIN
<b>Apportionment Factors for Multistate Taxpayers</b>		

Enter amounts in columns A and B. Enter percentages in column C

	A. Everywhere	B. Montana	C. Factor
<b>1. Property Factor:</b> Enter average values for real and tangible personal property			
a. Land.....			
b. Buildings.....			
c. Machinery.....			
d. Equipment.....			
e. Furniture and fixtures.....			
f. Leased property.....			
g. Inventories.....			
h. Supplies and other.....			
i. Property of foreign subsidiaries included in combined unitary group.....			
j. Property of unconsolidated subsidiaries included in combined unitary group.....			
k. Property of pass-through entities included in combined unitary group.....			
l. Multiply amount of rents by 8 and enter result.....			
<b>Total Property Value</b> add lines 1a through 1l.....			
Take the total in column B and divide it by the total in column A. Multiply that result by 100 and enter the result. <b>This is your property factor</b> .....			%
<b>2. Payroll Factor:</b>			
a. Compensation of officers.....			
b. Salaries and wages.....			
Payroll included in:			
c. Costs of goods sold.....			
d. Repairs.....			
e. Other deductions.....			
f. Payroll of foreign subsidiaries included in combined unitary group.....			
g. Payroll of unconsolidated subsidiaries included in combined unitary group.....			
h. Payroll of pass-through entities included in combined unitary group.....			
<b>Total Payroll Value</b> add lines 2a through 2h.....			
Take the total in column B and divide it by the total in column A. Multiply that result by 100 and enter the result. <b>This is your payroll factor</b> .....			%
<b>3. Sales (Gross Receipts) Factor:</b>			
a. Gross sales, less returns and allowances.....			
b. Sales delivered or shipped to Montana purchasers:			
• Shipped from outside Montana.....			
• Shipped from within Montana.....			
c. Sales shipped from Montana to:			
• United States Government.....			
• Purchasers in a state where the taxpayer is not taxable.....			
d. Sales other than sales of tangible personal property (i.e. service income).....			
e. Less: Intercompany Sales.....	( )	( )	
f. Net gains reported on federal Schedule D and federal Form 4797.....			
g. Other gross receipts (rents, royalties, interest, etc.).....			
h. Sales (receipts) of foreign subsidiaries included in combined unitary group.....			
i. Sales (receipts) of unconsolidated subsidiaries included in combined unitary group.....			
j. Sales (receipts) of pass-through entities included in combined unitary group.....			
k. Less: Other intercompany transactions.....			
<b>Total Sales Value</b> Enter the total of lines 3a through 3k.....			
Take the total in column B and divide it by the total in column A. Multiply that result by 100 and enter the result. <b>This is your sales factor</b> .....			%
4. Add the percentages on lines 1, 2, and 3 in column C. This is the sum of your factors.....			%
5. Divide the total percentage on line 4, column C, by the number of factors that can be included in the calculation. If there is a value in column A for a factor category (Property, Payroll, or Sales), the factor is included in the calculation (see instructions). Enter the results here and also insert in Form CLT-4, page 3, line 5. <b>This is your apportionment factor</b> .....			%

**Schedule C**

**FEIN \_\_\_\_\_ Period End Date \_\_\_\_\_**

Type of Credit	Column A Total Available	Column B Current Year Application
1. Enter Montana Capital Company Credit		
2. Enter New/Expanded Industry Credit		
3. Enter Interest Differential Credit		
4. Enter Montana Dependent Care Assistance Credit (please attach Form DCAC)		
5. Enter Montana College Contribution Credit (please attach Form CC)		
6. Enter Health Insurance for Uninsured Montanans Credit (please attach Form HI)		
7. Enter Montana Recycle Credit (please attach Form RCYL)		
8. Enter Alternative Energy Production Credit (please attach Form AEPC)		
9. Enter Contractor's Gross Receipts Tax Credit (please attach supporting schedule)		
10. Enter Alternative Fuel Credit (please attach Form AF CR)		
11. Enter Infrastructure Users Fee Credit		
12. Enter Qualified Endowment Credit (please attach Form QEC)		
<b>NEW</b> 12a. Enter Qualified Endowment Credit Recapture		( )
13. Enter Historical Buildings Preservation Credit (please attach federal Form 3468)		
13a. Enter Historical Buildings Preservation Credit Recapture		( )
14. Enter Increase Research and Development Activities Credit (please attach Form RSCH)		
15. Enter Mineral Exploration Incentive Credit (please attach Form MINE-CRED)		
16. Enter Developmental Disability Account Contribution Credit		
17. Enter Empowerment Zone Credit		
<b>NEW</b> 18. Enter Film Production Credit (please attach Form FPC1920.		
<b>NEW</b> 19. Enter Biodiesel Blending and Storage Credit (please attach Form BBSC)		
<b>NEW</b> 20. Enter Oilseed Crushing and Biodiesel Production Credit (please attach Form OSC)		
Add totals of lines 1 through 20 and enter the result here. <b>This is the total of your credits.</b>		

To receive these credits, you will have to attach this schedule C and your prescribed corporation tax forms or a detailed schedule to your CLT-4.

Send your completed Montana Corporation License Tax Return to the following address: Montana Department of Revenue, PO Box 8021, Helena, MT 59604-8021