



Montana Corporation License Tax (78)

Payment Instructions

Attention: Montana Department of Revenue Cashier

Complete the information below to ensure proper credit of your payment.

Name _____

Mailing Address _____

City, State, Zip Code _____

Phone _____

Instructions

Boxes 1 through 4 – Print an “X” in one box only for the type of payment you are remitting:

Check box 1, if your payment is for the current year.

Check box 2, if your payment is for estimated tax.

Check box 3, if your payment is for an extension.

Check box 4, if your payment is for an amended return.

Box 5 – Enter the tax year for which this payment applies (period ending date).

Box 6 – Enter your federal employer identification number (FEIN).

Box 7 – Enter the amount you are remitting.

Make check or money order payable to the Department of Revenue. If you are paying taxes for multiple years, submit a separate check or money order and a separate voucher for each year. On the memo line of your check, please note your FEIN or account ID and the tax year for which the payment applies.

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

Department of Revenue
PO Box 8021
Helena, MT 59604-8021

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

Montana Corporation License Tax Payment Form

Substitute Form CT

<input type="checkbox"/> 1. Current year	5. Period ending	month / day / year
<input type="checkbox"/> 2. Estimated tax	6. Federal employer identification number (FEIN)	
<input type="checkbox"/> 3. Tentative tax	7. Amount paid	
<input type="checkbox"/> 4. Amended return		