



W-2 Withholding Declaration

Please print or type.

Taxpayer Name (employee)

Social Security Number

Mailing Address

Employer Name

Business Name

Mailing Address

Type of Business

Federal Employer Identification Number (FEIN)

Tax Year

Total Wages Paid \$

Federal Income Tax Withheld (attach supporting documentation) \$

Montana Income Tax Withheld (attach supporting documentation) \$

I hereby declare under penalty of perjury that the above named employer,

(check one) [ ] did not furnish [ ] refused to furnish

Federal Form W-2 showing the Montana income tax withheld from my wages. The amount stated above as Montana income tax withheld was calculated as described in the documents I have attached to this form.

Signature of taxpayer (required)

Date

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

When you file your Montana income tax return electronically, you represent that you have retained all documents required as a tax record and that you will provide a copy to the department upon request.