

Line 2:

Line 3:

Line 4:

Please enter your Department of Revenue

Please enter your license number assigned by the

Department of Revenue in the format indicated.

This report is due the 15th day of the following

month. All records, inventories, invoices, sales

records, and delivery records must be kept for

inspection by the Department of Revenue.

account ID in the format indicated.

MONTANA

Form WIT Rev. 03-08

This is calculated by multiplying line 10 X the tax

penalty of 1.5% per month, not to exceed 18% of

the tax due, for tax periods beginning on or before

December 31, 2006. For tax periods beginning

Line 12: Enter the total tax due, which is the sum of lines 9

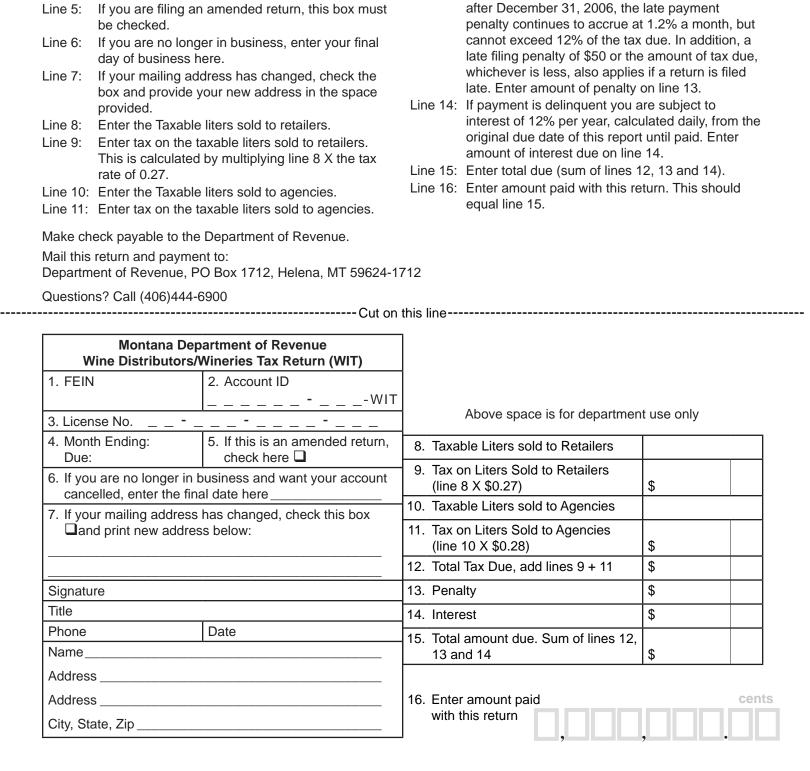
Line 13: If payment is delinquent you are subject to

Wine Distributors/Wineries Tax Return

Returns and Instructions

rate of 0.28.

and 11.





Wine Distributors/Wineries Tax Return (WIT)

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 reporting period for which the payment applies.

Boxes 1 and 2 – Box 3 – Box 4 – Box 5 –	Print an "X" in one box only for the type of Check box 1, if your payment is for an orig Check box 2, if your payment is for an ame Enter the reporting period for which this parenter your federal employer identification in Enter the amount you are remitting. (This a line 16 of your return).	inal return for any period. ended return. lyment applies. number (FEIN).	amount as r	reported (on
Name			_		
			_		
City, State, Zip C	ode		_		
Phone					
Mail this form w	rith your payment and return (if applicab	le) to:			
Department of R PO Box 1712 Helena, MT 5962					
Questions? Call	toll free (866) 859-2254 (in Helena, 444-690	00).			
Make check or n	noney order payable to the Department of R	evenue.			
	Wine Distributors/	Wineries Tax Return			
	Payme	ent Form			
		O. Davida I. a. dia a	month	day	year
1. Original r	eturn	3. Period ending	/	/	
2. Amended	return	4. Federal employer			
		identification number (FEIN)			

5. Amount paid