



W-2 Withholding Declaration

Please print or type.

Taxpayer Name (employee) _____

Social Security Number _____

Complete Address _____

Employer Name _____

Business Name _____

Complete 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

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

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.