

MeF ATS Testing Instructions and Scenario Criteria

Montana Pass-Through Entity Tax 2024

November 1, 2024

v1.0



Contents

Montana MeF ATS Testing Overview	3
Test Case 1: Form PTE (Partnership)	5
Test Case 2: Form PTE (Partnership)	6
Montana MeF ATS Testing Overview	7

Introduction

The following includes 3 ATS test cases. The ATS test cases consist of a PDF copy of a Montana Pass-through Entity Tax return (Form PTE) including various schedules and Montana K-1s. The data submitted for the indicated lines will be determined by the developer. Certain fields will not be provided on the Cases – indicated by a highlight – and a calculated value must be provided. Please don't enter any values on blank lines that have not been highlighted. If your software does not support both Partnership and S corporation filings, please prepare all three tests for whichever entity type you support (as outlined in your LOI).

Our testing environment will be available for developers to submit returns to test warning codes, reject codes, communications, acknowledgements, or other requirements. MT DOR will not review any returns until we receive an email at DORMeFTest@mt.gov with all the required information submitted.

Testing Deadlines

Initial submissions for PTE testing must be received by December 15, 2024, and the testing completed by January 19, 2025.

Warning Messages

MT DOR has implemented warning messages to be used during the ATS process in conjunction with the reject codes. The warning messages are intended to assist in testing prior to sending a test submission email to the MT DOR. The warning messages will not reject the submission; However, they must be resolved before notifying MT DOR that test submissions are ready to review. See following pages for a list of warning messages.

Submitting ATS Test Cases

After all the warning messages and reject codes are resolved and you have received an accepted acknowledgement from MT DOR for each of the test submissions IDS:

Send an email to **DORMeFTest@MT.gov** with the following information:

- Montana Form name (PTE Montana Pass-Through Entity Return)
- Name of the software company
- Name of software product
- State submission IDs and ATS Test number for the ID
- A pdf return must be provided for each submission ID.
 - A comparison is performed to ensure the paper copy of a return contains the same information submitted to MT DOR by e-file.
 - o Include your ETIN and test return number in the file name. (Example: 125345Test2.pdf)
- Provide all test case information at the same time. Partial submissions will not be reviewed.
- **Do not** send your test information to MT DOR until all the warning messages and reject codes are resolved and you receive an acknowledgement of their acceptance.
- Do not send more than one tax type per email.

Once MT DOR receives the email with the required information, a tester will be assigned to complete the review. Testing is assigned on a first-come, first-serve basis. You will receive an email when your submission has been assigned a tester. Reviews will be completed, generally, within 5-7 business days from the date a tester was assigned.

When the review is complete, MT DOR will send the submitter a test summary document identifying any needed corrections. After all corrections are made by the developer, ATS test cases can be resubmitted for review.

File Transfer Service

In some instances, the email with the test returns will not make it through to the DORMeFTest email box due to size limits or firewall constraints. If you're having trouble with emails, there is the option of sending your files securely through ePass Montana at transfer.mt.gov. Contact DOR QA at DORMeFTest@mt.gov for more information.

Resubmitting failed ATS test cases

- You will only need to resubmit tests that were identified with failures on the Test Summary unless you are notified otherwise.
- Make all corrections identified on the Test Summary
- Do not resubmit until all your questions are answered. Partial submissions will not be reviewed.
- Do not send your resubmission email until all the warning messages and reject codes have been resolved and after you have received an acceptance acknowledgment from MT DOR for each of the submission IDS.
- The error tables at the end of the document will provide answers to the errors you may encounter on your initial submissions. The error messages are intended to assist you with the self-testing process. Should a return continue to have errors, we will provide more detailed feedback.

Test cases

- This document includes three (3) test cases.
- Each test scenario will include a completed copy of each test case return. Fields that are indicated by a highlighted box are left blank. We intend for you to provide the calculated result for these fields.
- The highlighted fields have a single correct value.
- A synopsis is included at the beginning of each test case which provides the required forms, attachments, and schedules.
- The Test Case values are the minimum amount of information expected. You can test any additional
 scenarios or values in your systems, but Test Cases with values that are different than the required values
 or with values in fields that are not highlighted will not be reviewed.

Case 1: Form PTE (Partnership)

Test Partnership 1 is filing an initial 2024 calendar-year return on March 15, 2025. The Company operates only in Montana with 100% of its property, payroll and gross receipts within Montana (see business rules for 100% Montana checkbox). The company's total Montana source income is \$150,166,540 and consists of both apportionable and non-apportionable income. The company has both composite tax and pass-through withholding owing, and the company has not made payments. The company is receiving a pass-through Entity Tax (PTET) Credit of \$15,000.

The return will be subject to Underpayment of Estimated Tax Penalty (UT Penalty). Both the Underpayment of Estimated Tax – Short Method and Regular Method will be provided on Form EST-PTI (found at the end of Test Case 1). The calculation used for the purposes of Case 1 is the Regular Method and is entered on Page 2, Line 31. See form instructions for a detailed breakdown of the calculation.

Any field in the following case that is highlighted in Orange requires a calculated value

Federal:

Form 1065

Schedule K

Forms/Information Provided by DOR:

Schedule K Information

Forms Required to be Provided by Vendors:

Montana:

- Apportionable Income Worksheet
- Form PTE
- Flow-through Payment Schedule
- Schedule IV
- Schedule VI
- Montana Adjustments Worksheet
- Schedule MTSI
- Montana Schedules K-1
- Form EST-PTI

Required Attachments:

Example PDF attachment (PDF stating "Attachment Example")

Taxpayer Information:

Test Partnership 1 LLC

1793 Legendborn Way Helena, MT 59602

FEIN:

20-1111111

Montana

Date Formed:

09/15/2020

State Formed in:

Federal Business Code/NAICS:

813410

MT Secretary of State ID: L5446082

Date registered in MT:

09/15/2020

Schedules DE Included:

Schedules K-1 Received:

1

Owners: 26 total owners consisting of 3 Resident Owners, 3 Nonresident Owners, and 20 Other Types of Owners of various types. All Forms and attachments are required to be included in the PDF submission.

5



2024 Montana Pass-Through Entity Tax Return Include a complete copy of all related federal forms and schedules.

Partnership X

S corporation

Form PTE 2024v1 5/2024

	For calendar ve	ar 2024 or tax vear t	peginning 0101202	4 and ending ¹	2312	0 2 4
Mark all that apply:	Name	ar 202 + or tax your i	30g			201111111
★ Initial return	Test Partners	chin 1 LLC		Federal Business		
	Mailing Address	ship i dhe				L5446082
Amended return	1793 Legendbo	orn Way				09152020
	City		ate ZIP Code + 4	State formed in		
PTP			T 5 9 6 0 2	Otate formed in		
PTET	Helena	A STATE OF STREET	1 3 3 0 0 2			
Resident PTET	Enter Number of:	Schedules K-1 Included	2.6 Nonresident Ov	wners 3	Schedules Di	= Included
Resident PTET	Enter Number of.	Resident Owners	3 Other Types of Ov			Received 1
		Resident Owners	3 Other Types of Ov	WIIGIS 20	ochedules IV-1	Treceived 1
Owners' Distribu	tive Share of Inco	me Items (federal S	chedule K)			
1 Ordinary business					1	150000000 00
	ate income (loss) (include t	federal Form 8825)			2	00
	ental income (loss)	1040/4/1 0/1/1 0020/	3a	00		
_		nclude detailed statement)	3b	00		
3 Subtract line 3b fro		orace detailed statementy	(2.0)	et rental income or loss	. 3	00
	payments: Services		4a	0.0		
4b Guaranteed p			4b	155540 00		
4 Add lines 4a and 4			000	al guaranteed payments	4	155540 00
,	D		This is your total	ii guaranteca payments	5	35000 00
5 Interest income					6	50000 00
6 Ordinary dividends	Ř				7	00
7 Royalties	"	11 O-1			8	00
	oital gain (loss) (include fec				9	00
The second of th	tal gain (loss) (include fed				10	00
	gain (loss) (include federal				11	16500 00
	s) (include detailed statem	ent)	This is seen 4.44	I fadami inaama an laaa		150257040 00
12 Add lines 1 through				I federal income or loss		130237040 00
			tana Source Income (inclu	00		
	deduction (include federal	Form 4562)	13a			
13b Contributions			13b	25000 00		
13c Investment in			13c	10000 00		
	(2) expenditures (include		13d	00		
	ions (include detailed state	ement)	13e	5500 00		10500.00
	ugh 13e and enter result.			tal federal deductions.		40500 00
14 Subtract line 13 from			This is your federal inc	come from all sources.		150216540 00
	to the PTE's apportionab				15	375000 00
	tractions from the PTE's a		16a	425000 00		
16b Total everywh	nere income (loss) from fe	deral Schedules K-1	16b	222222 00	l)	
	nere income (loss) from dis		16c	0.0		
16d Other nonapp	portionable income (loss) f	from the PTE's own activitie	s 16d	0.0	1	
16 Add lines 16a thro	ugh 16d.	Th	is is your deductions including no	napportionable income	. 16	647222 00
17 Add lines 14 and 1	15, then subtract line 16.				17	149944318 00
18 Mark the box that	describes your business a	activity or enter your apportion	onment factor.			
★ 100% Mon		0% Montana activity	100.0000 % Apportionment	factor x line 17	18	149944318 00
		I from pass-through entities				
			tity) 19a	222222 00)	
	irce income from MT Scho	edules N-1 issued to this en				
(Montana sou	urce income from MT Scho a source income from Sch		19b	0.0)	
(Montana sou 19b Total Montana	a source income from Sch	nedules VII	19b	00		
(Montana sou 19b Total Montana	a source income from Sch nable income allocated to l	nedules VII Montana. (See instructions)	19b	00)	222222 00



Name Test Partnership 1 LLC FEIN	2	0 1	11111
Prepayments			_
21 2024 payments Mark this box if you made estimated payments using the annualization method (See instructions)	21		00
22 2023 overpayment applied to 2024	22		00
23 Add lines 21 and 22. Total prepayments	23		00
Pass-through Entity Tax, Composite Tax, and Pass-Through Withholding			
24 Total taxable income subject to pass-through entity tax from all owners' MT Schedules K-1, Part IV, line 14 (see instructions)	24		00
25 Total pass-through entity tax from all owners' MT Schedules K-1, Part V, line 1	25		00
26 Flow-Through Payments Schedule, Column A, line 12	26		00
27 Subtract lines 23 and 26 from line 25. Pass-through entity tax due or (overpayment	t). 27		00
28 Total composite tax from Schedule IV, Column H	28		3268007 00
29 Flow-Through Payments Schedule, Column B, line 12	29		5550 00
30 Add lines 27 and 28, then subtract line 29. Composite tax and pass-through entity tax due or (overpayment)	t). 30		3262457 00
31 Interest on underpayment of estimated tax (see instructions)	31		136940 00
32 Total pass-through withholding from all owners' MT Schedules K-1, Part V, line 3a	32		2743847 00
33 PTE's tax liability resulting from an adjustment to partnership income (see instructions)	33		00
34 Flow-Through Payments Schedule, Column C, line 12	34		00
35 Add lines 32 and 33, then subtract line 34. Pass-through withholding and other partnership liability due or (overpayment)	t) . 35		2740997 00
36 PTE information return late filing penalty	36		00
37 Add lines 30, 31, 35, and 36. Total PTE taxes with interest and/or penal	ty. 37		6140394 00
Amended Return			
38 For amended returns only - previously issued refunds	38		00
39 For amended returns only - payments made with original return	39		00
40 Add lines 37 and 38, then subtract line 39.	40		6140394 00
Penalty and Interest			
41 Late payment penalty	41		00
42 Interest	42		0.0
43 Add lines 40 through 42. Total tax, penalties, and intere	st. 43		6140394 00
Amount Owed or Refund			
44 If line 43 is more than zero, enter the amount here. This is the amount you over the your your your your your your your your	re. 44		6140394 00
45 If line 43 is less than zero, enter the amount here. This is your overpayme	nt. 45		00
46 Enter the amount from line 45 that you want applied to your 2025 tax	46		00
47 Subtract line 46 from line 45. This is your refur	d. 47		00
Direct Deposit Your Refund Complete 1, 2, and 3. (See instructions)			

Routing Number

Checking Savings 2 Account Number

Mark this box if this refund is going to an account that is located outside of the United States or its territories.

REQUIRED - Signature, Paid Preparer, and Third-Party Designee

Under penalties of false swearing, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Officer

Phone 4 9 8 5 2 7 3 6 1 7 Printed Name Bree Matthews **Tax Preparer** Date Signed 0 8 1 9 2 0 2 4 Signature Phone 5 9 8 7 6 4 5 2 9 8 Print Name Tracy Deonn PTIN P 0 6 2 0 0 2 1 8 × Mark this box if you allow the DOR to discuss this tax return with your tax preparer.

Tax Preparation Firm

Signature x

Firm's FEIN 121111111 Firm Name Knights of the Round Table

Mailing Address 1 Order Way

State N C ZIP 2 7 5 1 4 City Scion

Pass-Through Entity Tax Authorized Representative: Required if making a PTET Election (See instructions)

Telephone Number 9 4 8 6 2 5 7 1 3 8

Kingsmage Selwyn Kane Email Atrhursmerlin@theorder.com



Date Signed 0 8 1 9 2 0 2 4



2024 Montana Form PTE – Flow-Through Payments Schedule



Name Test Partnership 1 LLC

FEIN 2 0 1 1 1 1 1 1 1

Part I. Montana Schedules K-1 received by the pass-through entity reporting mineral royalty withholding, pass-through withholding, and/or pass-through entity tax. Attach a statement with the same information if the PTE received more than four Montana Schedules K-1 reporting mineral royalty withholding, pass-through withholding, and/or pass-through entity tax.

			Α	В	C
	Entity Name	FEIN	Mineral Royalty	Pass-Through	Pass-Through Entity
			Withholding Received	Withholding Received	Tax Received
1 FT LLC		100000000	00	00	15000 00
2			00	00	00
3			00	00	00
4			00	00	00
		5 Totals	00	00	15000 00

Part II. Flow-through payment allocations (See instruction	is)	Sc	chedules K-1 subject to:	
		A	В	C
		Pass-Through Entity Tax	Composite Tax	Other
1 Sum of profit and loss percentage of all MT Schedules K-1				
subject to applicable Column(s) A, B, and C	1	%	37.0000 %	63.0000 %
2 Multiply total in Part I, Column A by percentage on line 1 for each Column	2	00	00	00
3 Mineral royalty withholding passed to owners	3			00
4 Enter Column A, line 2 and Column B, line 2.				
Subtract Column C, line 3 from Column C, line 2.				
Balance of mineral royalty withholding the PTE can claim as a credit.	4	00	00	00
5 Multiply total in Part I, Column B by percentage on line 1 for each Column	5	00	00	00
6 Pass-through withholding passed to owners	6			00
7 Enter Column A, line 5 and Column B, line 5.				
Subtract Column C, line 6 from Column C, line 5.				
Balance of pass-through withholding the PTE can claim as a credit.	7	00	00	00
8 If Column A, line 1 is greater than 0%, enter the total from Part I, Column C	8	00		
9 If Column A, line 1 is 0%, multiply the total in Part I, Column C				
by Columns B and C, line 1	9		5550 00	9450 00
10 Total pass-through entity tax passed to owners	10			00
11 Enter Column B, line 9.				
Subtract Column C, line 10 from line 9.				
Credit balance for PTE not electing to pay PTET.	11		5550 00	00
12 Add lines 4, 7, 8, and 11 in each Column.				0.0
Total payments the PTE can claim as a credit.	12	00	5550 00	00





2024 Montana Form PTE Schedule I – Apportionment Factor for Multistate Pass-Through Entities



Name Test Partnership 1 LLC		FEIN 2 0	1 1 1 1 1 1	1
Enter amounts in Columns A and B. Enter percentages in Column	C. A	В	С	
1 Property Factor: Use average value for real and tangible personal property	Everywhere	Montana	Factor	
1a Land	1a	00	00	
1b Buildings	1b	00	00	
1c Machinery	1c	00	00	
1d Equipment	1d	00	00	
1e Furniture and fixtures	1e	00	00	
1f Leases and leased property	1f	00	00	
1g Inventories	1g	00	00	
1h Depletable assets	1h	00	00	
1i Supplies and other	1i	00	00	
1j Multiply amount of rents by 8 and enter result	1 j	00	00	
1k Total Property Value. add lines 1a through 1j	1k	00	00	
Divide the total in Column B by the total in Column A. Multiply the result by 100.		This is your property factor.	1	%
2 Payroll Factor:				
2a Compensation of officers	2a	00	00	
2b Salaries and wages	2b	00	00	
Payroll included in:				
2c Costs of goods sold	2c	00	00	
2d Other expenses and deductions	2d	00	00	
2e Total Property Value. Add lines 2a through 2d.	2e	00	00	
Divide the total in Column B by the total in Column A. Multiply the result by 100.		This is your payroll factor.	2	%
3 Gross Receipts Factor:				
3a Gross Receipts, less returns and allowances	3a	00		
3b Receipts delivered or shipped to Montana purchasers:				
(1)Shipped from outside Montana		3b(1)	00	
(2)Shipped from within Montana		3b(2)	00	
3c Receipts shipped from Montana to:				
(1)United States government		3c(1)	00	
(2)Purchasers in a state where the taxpayer is not taxable		3c(2)	00	
3d Receipts other than receipts of tangible personal property (e.g., service income		3d	00	
3e Net gains reported on federal Schedule D and Form 4797	3e	00	00	
3f Other gross receipts (rents, royalties, interest, etc.)	3f	00	00	
3g Total Receipts Value. Add lines 3a through 3f.	3g	00	00	0/
Divide the total in Column B by the total in Column A. Multiply the result by 100.		This is your receipts factor.	3	%
4 Enter the amount reported on line 3		T1: 1: 10: 10: 10: 10: 10: 10: 10: 10: 10	4	%
5 Add the percentages from lines 1, 2, 3. and 4 in Column C.	i cia para serio	This is the sum of your factors.	5	%
6 Divide the total percentage from line 5, Column C, by the number of factors that car	be included in the calculation.	(O - 'tt')		
If a property, payroll, or receipts factor is 0%, it is included in the calculation for line 6			6 100 000	0 0/
	II	his is your apportionment factor.	6 100.0000	J 70





5

Test Partnership 1 LLC

2024 Montana Form PTE Schedule II – Montana Pass-Through Entity Tax Credits

Use the corresponding credit code in the instructions to report the credit you are claiming in Column A. If you were provided an authorization number to claim the credit, enter that



FEIN 2 0 1 1 1 1 1 1 1

	unt of credit in Column C. Use Montana Schedule K-1 to notify each owner of their sh	
to your return (if applicable). See instruction	ns for more information.	
Α	В	C
Credit Code	Credit Authorization Number	Amount of Credit
1		00
2		00
3		00
4		00
5		00



2024 Montana Form PTE Schedule IV – Montana Composite Income Tax Schedule

5/2024

Test Partnership 1 LLC

Н 0 2 HIN

11111

Part I. Eligible Participating Owners

σ Enter the number of eligible participating owners. See instructions for more information about eligible participants

Part II. Adjusted Federal Income			Part III. Composite Tax Ratio	١,	
 Federal income from all sources from page 1, line 14 	_	150216540 00	1 Total Montana source income from page 1, line 20	_	150166540 00
2 Total guaranteed payments for services from page 1, line 4a	2	00	2 Multiply Part II, line 2 by the apportionment factor from		T
Total Everywhere Additions from Montana Adjustments Worksheet,			Schedule I, line 6	7	00
Column E, line 1	3	375000 00	3 Subtract line 2 from line 1. Adjusted Montana source income	လ	150166540 00
4 Total Everywhere Subtractions from Montana Adjustments			4 Divide line 3 by Part II, line 5. (Do not enter more than 1.000000).		
Worksheet, Column E, line 2	4	425000 00	Composite tax ratio	4	1.000000
5 Add lines 1 and 3, then subtract lines 2 and 4.					
Adjusted federal income	5	150166540 00			

Part IV. Composite Tax

Citier the required mitorified and afficients for each enginer participants in Columns A B C	IIS for each eigible participa	C	۵	ш	L	g	-
Name	Social Security	Total	(Partnerships only)	Standard	Subtract	Tax from Tax Table	Multiply Column G by
	Number	Distributive	Guaranteed Payments	Deduction	Columns D and E	(See instructions)	composite tax ratio from
	Jo	Share from	for Services	(\$14,600)	from Column C		Part III, Line 4
	Federal Employer	Owner's	from Owner's		Montana Taxable Income		Montana Composite
	Identification	Schedule K-1,	Schedule K-1, Column A,				Income Tax
	Number	Column A,	Part IV, Line 4a				
		Part IV,					
1 Owner One	100000001		00 0	14600	7493272 00	441166 00	0 441166 00
2 Owner Four	100000001	6006662	00 0	14600	5992062 00	353268 00	353268 00
3 Owner Seven	10000001	4505996	000	14600	4490396 00	264669 00	0 264669 00
4 Owner Ten	10000010	7508327	00 0	14600	7493727 00	441866 00	0 441866 00
5 Owner Twelve	10000012	3003331	00 0	14600	2988731 00	176071 00	0 176071 00
6 Owner Fifteen	10000001	6006662	00 0	14600	5992062 00	353268 00	353268 00
7 Owner Eightteen	100000018	9009992	00 0	14600	8995392 00	530464 00	0 530464 00
8 Owner Twenty	100000020	6006662	00 0	14600	5992062 00	353268 00	353268 00
9 Owner Twenty-Two	100000022	6006662	00 0	14600	5992062 00	353268 00	353268 00
10			00		00	00	00 0

¹² 11 If there are more than 10 composite tax participants, attach a statement with the same information and report the total composite tax from those statements here.

12 Add Column H, lines 1 through 11. This is your total composite tax liability. Transfer the amounts from Column H to each owner's Schedule K-1, Part V, line 2

000

3268007 00





2024 Montana Form PTE Schedule VI – Reporting of Special Transactions



Name	Test	Partnership	1	LLC
------	------	-------------	---	-----

FEIN 2 0 1 1 1 1 1 1 1

Complete Schedule VI only if your PTE filed any of the federal income tax forms described below. Mark the appropriate box indicating which form(s) you filed with the Internal Revenue Service (IRS) for this tax year. If you mark one or more of these forms, you must include a complete copy of your federal tax return.

- 1 The entity filed federal Form 8918 Material Advisor Disclosure Statement with the IRS
- 2 The entity filed federal Form 8824 Like-Kind Exchanges with the IRS. NOTE: Mark the box if your like-kind exchange includes Montana property.
- The entity filed federal Form 8865 Return of U.S. Persons with Respect to Certain Foreign Partnerships with the IRS
- The entity filed federal Form 8886 Reportable Transaction Disclosure Statement with the IRS
- For S corporations only: The S corporation filed federal Form 8023 Elections Under Section 338 for Corporations Making Qualified Stock Purchases with the IRS

Complete this section if the PTE is a partnership.

6 The partnership filed one or more of the following forms in 2024

Provide a copy of each form with your tax return.

- Federal Form 8985, Pass-Through Statement Transmittal/Partnership Adjustment Tracking Report
- · Federal Form 8986, Partner's Share of Adjustment(s) to Partnership-Related Items(s)
- Federal Form 8082, Notice of Inconsistent Treatment or Administrative Adjustment Request (AAR)
- 7 The partnership had Montana source income and paid an imputed underpayment.
 If applicable, provide a copy of your federal audit adjustment report. (See instructions)
- 8 Previously unreported Montana source income from Federal Form 8082 (See instructions)

8

00

Complete this section if you made a disbursement to a related party.

The entity made payments during this tax year to one or more related parties (excluding salary compensation) that exceeded \$100,000 per recipient.

If you marked this box, please provide the name and federal employer identification number of each related party below and the amount that you paid to each related party:

A

В

C

Amount of Payment

00 00 00

00

00 00 00

00





2024 Montana Form PTE – Montana Adjustments Worksheet

2024v1 5/2024

N H H H H H H H H H H H H H H H H H H H	\ -				EEIN	1111110
Montana Adjustments to Everywhere Income	where incor	We A	α	c	<u></u>	
Montena Adjustino		DTE's Ar	Nonannortionable	From MT Schedules K-1	From Schedules DE	Total Evenywhere
Mondaia Additions	900	Activities	Income	Part 3. Column A	Column A. Lines 15 and 16	Adiustments
Dividende	A A	375000 00	00	00	00	375000 00
)	00	00	00	
		000	00	00	00	00
		00	00	00	00	00
		00	00	00	00	00
		00	00	00	00	00
2 Montana Subtractions	Total	375000 00	00	00	00	375000 00
from Everywhere Income						
Energy Conservation	SL	425000 00	00	00	00	425000 00
		00	00	00	00	00
		00	00	00	00	00
		00	00	00	00	00
		00	00	00	00	00
		00	00	00	00	00
	Total	425000 00	00	00	00	425000 00
Adjustments to Montana Source Income	e Income	٨	8	O	a	Ш
		PTE's Apportionable	Nonapportionable Income	From MT Schedules K-1,	From Schedules DE,	Total Montana Source
3 Montana Source Additions	Code	Activities		Part 3, Column B	Column B, Lines 15 and 16	Income Adjustments
Dividends	A A	375000 00	00	00	00	375000 00
		00	00			00
		00	00			00
		00	00		00	00
		00	00	00		00
		00	00			00
	Total	375000 00	00		00	375000 00
4 Montana Source Subtractions						
Energy Conservation	S L	425000 00	00			425000 00
		00	00			00
		00	00			00
		00	00			00
		00	00			00
			00			
	Total	425000 00	00	00	00	425000 00





2024 Montana Form PTE – Montana Source Income Schedule

2024v1 5/2024

	,				NED	111111
Name Test Partnership I LLC	٠,					1 1 1 0
		4	ω	υ	٥	Ш
		Montana Source Income	Montana Source Income	Montana Source Income	Montana Source Income	Total of
Sum of Montana source income		from	from	from	from PTE's	Columns A through D
per item of income (loss) and deduction.		Montana Schedules K-1	Schedules DE	Nonapportionable Income	Apportionable Activities	
1 Ordinary business income (loss)	-	222222 00	00	00	149777778 00	150000000 00
2 Net rental real estate income (loss)	2	00	00	00	00	00
3 Other net rental income (loss)	က	00	00	00	00	00
4a Guaranteed payments: services	4a	00	00	00	00	00
4b Guaranteed payments: capital	4	00	00	00	155540 00	155540 00
5 Interest income	2	00	00	00	35000 00	35000 00
6 Ordinary dividends	9	00	00	00	50000 00	20000 00
7 Royalties	7	00	00	00	00	00
8 Net short-term capital gain (loss)	80	00	00	00	00	00
9 Net long-term capital gain (loss)	6	00	00	00	00	00
10 Net §1231 gain (loss)	9	00	00	00	00	00
11 Other income (loss).	£	00	00	00	16500 00	16500 00
12 §179 expense deduction apportionable						
and/or allocable to Montana	12	00	00	00	00	00
13 Other expense deductions apportionable						
and/or allocable to Montana	13	00	00	00	40500 00	40500 00
14 Total Montana Source Income	14	222222 00	00	00	149994318 00	150216540 00





Montana Schedule K-1

(PTE)

5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark a	pplicable boxes:	Amended Schedule K-1	Fina	al Schedule	K-1			
Part	I. Pass-through	Entity Information						
Name	Test Part	nership 1 LLC					FEIN	201111111
Mailin	g Address 1793	Legendborn Way						
City	Helena		State	м Т	ZIP Code	59602		
Part	II. Owner Inform	nation						
Name	Owner One	1					FEIN	
Mailin	g Address 2 La	ncelot Lane					or SSN	100000001
City	Pendragon		State	PA	ZIP Code	15237	Beneficial Owner FEIN	
	_						or SSN	
Owner	Type I	Resident	X	Nonresid	ent			
	Special Allocations (See instructions)					Profit and loss percentag	e 5.0000 %
	The owner is include	ed in a PTET election					Capital/Ownershi	ip 5.0000 %
	Resident owner PTE	T election (See instructions)						
X	The owner is include	ed in a composite income tax return						

Resident owner PTET election (See instructions)					
The owner is included in a composite income tax returns.	ırn				And the property of the state o
			Α		В
Part III. Montana Adjustments (See workshe	eet on page 9)		Everywhere		Montana
1 Additions		1	187	750 00	18750 00
2 Subtractions		2	212	250 00	21250 00
Part IV. Distributive Share of Montana Sou	rce Income (Lo	ss)			
1 Ordinary business income (loss)		1	75000	00 00	7500000 00
2 Net rental real estate income (loss)		2		00	00
3 Other net rental income (loss)		3		00	00
4a Guaranteed payments: services		4a		00	00
4b Guaranteed payments: capital		4b	75	777 00	7777 00
5 Interest income		5	15	750 00	1750 00
6 Ordinary dividends		6	25	500 00	2500 00
7 Royalties		7		00	00
8 Net short-term capital gain (loss)		8		00	00
9 Net long-term capital gain (loss)		9		00	00
10 Net section 1231 gain (loss)		10		00	00
11 Other income (loss) (include detailed statement)		11	8	325 00	825 00
12 Section 179 expense deduction		12		00	00
13 Other expense deductions		13	20	25 00	2025 00
14 Total distributive share (See instructions)		14	75083	32700	7508327 00
Part V. Supplemental Information					
The owner filed Form PT-AGR Year		The owner is a Domestic 2	2nd tier PTE		
1 PTET paid on behalf of owner. (See instructions)				1	00
2 Montana composite income tax paid on behalf of owner	r			2	441866 00
3a Montana income tax withheld on behalf of owner. (See				3a	00
3b Montana income tax withheld by a lower tier pass-throu				3b	00
3c Add lines 3a and 3b.		r total Montana income ta	ax withheld on your	behalf. 3c	00
4 Montana mineral royalty tax withheld	-			4	00
5 Other information. List type	á	and amount 5		00	00
Part VI. Tax Credits					
Code	Credit Authoriz	zation Number			Amount of Credit
1					00
2					00
Part VII. Montana Adjustments Detail: Enter	the amount and co	de of each adjustment e	ntered on Part 3. (S	ee instructions)	
1 Code 1AA 18750 00	2 Code 2 A		50 00 3		21250 00
4 Code 2 S L 21250 00	5 Code		00 6	Code	00





Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable boxes: Amended Schedule K-1 Part I. Pass-through Entity Information	Final Schedule K-1	
Name Test Partnership 1 LLC	FEIN	201111111
Mailing Address 1793 Legendborn Way		
City Helena	State M T ZIP Code 5 9 6 0 2	
Part II. Owner Information		
Name Owner Two	FEIN	
Mailing Address 2 Lancelot Lane	or SSN	100000002
City Pendragon	State P A ZIP Code 1 5 2 3 7 Beneficial Owner FEIN	
, ,	or SSN	
Owner Type I Resident	→ Nonresident	
Special Allocations (See instructions)	Profit and loss percenta	ge 3.0000 %
The owner is included in a PTET election	Capital/Owners	hip 3.0000 %
Resident owner PTET election (See instructions)		
The owner is included in a composite income tax return		

Part III. Montana Adjustments (See worksheet on page 9)		Everywhere	Montana
1 Additions	1	11250 00	11250 00
2 Subtractions	2	12750 00	12750 00
Part IV. Distributive Share of Montana Source Income (Loss)			
1 Ordinary business income (loss)	1	4500000 00	4500000 00
2 Net rental real estate income (loss)	2	00	00
3 Other net rental income (loss)	3	00	00
4a Guaranteed payments: services	4a	00	00
4b Guaranteed payments: capital	4b	4666 00	4666 00
5 Interest income	5	1050 00	1050 00
6 Ordinary dividends	6	1500 00	1500 00
7 Royalties	7	00	00
8 Net short-term capital gain (loss)	8	00	00
9 Net long-term capital gain (loss)	9	00	00
10 Net section 1231 gain (loss)	10	00	00
11 Other income (loss) (include detailed statement)	11	495 00	495 00
12 Section 179 expense deduction	12	00	00
13 Other expense deductions	13	1215 00	1215 00
14 Total distributive share (See instructions)	14	4504996 00	4504996 00
Part V. Supplemental Information			
	owner is a Domestic 2r	nd tier PTE	
1 PTET paid on behalf of owner. (See instructions)		1 🦲	00
2. Mantana composito incomo tay naid an hohalf of aumor		2	0.0

The owner filed Form PT-AGR Year	The owner is a	Domestic 2nd tier P	1E	
1 PTET paid on behalf of owner. (See instructions)			1	00
2 Montana composite income tax paid on behalf of owner			2	00
3a Montana income tax withheld on behalf of owner. (See instruct	tions)		3a	265345 00
3b Montana income tax withheld by a lower tier pass-through enti	ity		3b	00
3c Add lines 3a and 3b.	This is your total Montana	income tax withhe	eld on your behalf. 3c	265345 00
4 Montana mineral royalty tax withheld			4	00
5 Other information. List type	and amount	5	00	00
Part VI Tay Credite				

Part VI. Tax Credits	그림은 이번 그렇다는 이번 중화해졌다는데 보면 되었다.	
Code	Credit Authorization Number	Amount of Credit
1		00
2		00
Dout VIII Montone Adiciotments	Details Enter the amount and code of each adjustment entered on Part 3	(See instructions)

Part VII. Montana Adjustments Detail: Enter the amount and code of each adjustment entered on Part 3. (See instructions)

1 Code 1AA 11250 00 2 Code 2AA 11250 00 3 Code 1SL 12750 00 4 Code 2SL 12750 00 5 Code 00 6 Code 00



Page 1 of 4



The owner is included in a composite income tax return

Montana Schedule K-1 (PTE)

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending

Amended Schedule K-1 Final Schedule K-1 Mark applicable boxes: Part I. Pass-through Entity Information **FEIN** 201111111 Name Test Partnership 1 LLC Mailing Address 1793 Legendborn Way M T ZIP Code 59602 City Helena State Part II. Owner Information **FEIN** Name Owner Three or SSN 100000003 Mailing Address 2 Lancelot Lane Beneficial Owner FEIN ZIP Code 15237 State City Pendragon or SSN Resident X Nonresident Owner Type Profit and loss percentage 3.0000 % Special Allocations (See instructions) Capital/Ownership 3.0000 % The owner is included in a PTET election Resident owner PTET election (See instructions)

B Montana Everywhere Part III. Montana Adjustments (See worksheet on page 9) 11250 00 11250 00 1 1 Additions 2 12750 00 12750 00 2 Subtractions Part IV. Distributive Share of Montana Source Income (Loss) 450000000 4500000 00 1 1 Ordinary business income (loss) 00 00 2 2 Net rental real estate income (loss) 00 00 3 3 Other net rental income (loss) 00 00 4a Guaranteed payments: services 4a 4666 00 4b Guaranteed payments: capital 4b 4666 00 1050 00 5 Interest income 5 1050 00 1500 00 6 Ordinary dividends 6 1500 00 00 7 00 7 Royalties 00 00 8 Net short-term capital gain (loss) 8 00 9 00 9 Net long-term capital gain (loss) 00 00 10 10 Net section 1231 gain (loss) 495 00 495 00 11 Other income (loss) (include detailed statement) 11 00 00 12 12 Section 179 expense deduction 1215 00 1215 00 13 13 Other expense deductions 4504996 00 14 Total distributive share (See instructions) 14 450499600 Part V. Supplemental Information

The owner is a Domestic 2nd tier PTE ➤ The owner filed Form PT-AGR 2 0 1 9 00 1 PTET paid on behalf of owner. (See instructions) 00 2 2 Montana composite income tax paid on behalf of owner 00 3a 3a Montana income tax withheld on behalf of owner. (See instructions) 00 3b Montana income tax withheld by a lower tier pass-through entity 3b 00 This is your total Montana income tax withheld on your behalf. 3c 3c Add lines 3a and 3b. 00 4 Montana mineral royalty tax withheld 00 00 and amount 5 Other information. List type

Part VI. Tax Credits **Amount of Credit** Credit Authorization Number Code 00 1 00

Part VII. Montana Adjustments Detail: Enter the amount and code of each adjustment entered on Part 3. (See instructions)

11250 00 12750 00 2 Code 2AA 3 Code 1SL 1 Code 1AA 11250 00 00 00 6 Code 4 Code 2SL 12750 00 5 Code





Montana Schedule K-1 (PTE)

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable boxes: Amended Schedule K-1 Part I. Pass-through Entity Information	Final Schedule K-1
Name Test Partnership 1 LLC	FEIN 20111111
Mailing Address 1793 Legendborn Way	
City Helena	State M T ZIP Code 5 9 6 0 2
Part II. Owner Information	
Name Owner Four	FEIN
Mailing Address 2 Lancelot Lane	or SSN 10000004
City Pendragon	State P A ZIP Code 1 5 2 3 7 Beneficial Owner FEIN
,	or SSN
Owner Type E Resident	X Nonresident
Special Allocations (See instructions)	Profit and loss percentage 4 . 0 0 0 0 %
The owner is included in a PTET election	Capital/Ownership 4.0000 %
Resident owner PTET election (See instructions)	
X The owner is included in a composite income tax return	

The supervise included in a composite income toy not use			
★ The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax returns The owner is included in the composite income tax returns The owner is included in the composite income tax returns The owner is included in the composite in the comp		A	В
Part III. Montana Adjustments (See workshee	ot on page 0)	Everywhere	Montana
1 Additions	t on page 9)	15000 00	15000 00
2 Subtractions	2	17000 00	17000 00
Part IV. Distributive Share of Montana Source		17000 00	
Ordinary business income (loss)	1	600000000	6000000 00
	2	00	00
Net rental real estate income (loss) Other part rental income (loss)	3	00	00
3 Other net rental income (loss)	4a	00	00
4a Guaranteed payments: services	4b	6222 00	6222 00
4b Guaranteed payments: capital	5	1400 00	1400 00
5 Interest income	6	2000 00	2000 00
6 Ordinary dividends	7	00	00
7 Royalties	8	00	00
8 Net short-term capital gain (loss)		00	00
9 Net long-term capital gain (loss)	9	00	0(
10 Net section 1231 gain (loss)	10	660 00	660 00
11 Other income (loss) (include detailed statement)	11	00	000
12 Section 179 expense deduction	12		/51.0
13 Other expense deductions	13	1620 00	1620 00
14 Total distributive share (See instructions)	14	6006662 00	6006662 00
Part V. Supplemental Information			
The owner filed Form PT-AGR Year	The owner is a Domestic		
1 PTET paid on behalf of owner. (See instructions)		1	00
2 Montana composite income tax paid on behalf of owner		2	353268 00
3a Montana income tax withheld on behalf of owner. (See in:	structions)	3a	00
3b Montana income tax withheld by a lower tier pass-through		3b	00
3c Add lines 3a and 3b.	This is your total Montana income	tax withheld on your behalf. 3c	00
4 Montana mineral royalty tax withheld		4	00
5 Other information. List type	and amount 5	00	00
Part VI. Tax Credits			
Code	Credit Authorization Number		Amount of Credit
1			00
2			00
Part VII. Montana Adjustments Detail: Enter the	ne amount and code of each adjustment	entered on Part 3. (See instructions)	
	0 0 1 0 7 7	2 Code 1 CT	17000 00



3 Code 1 S L

6 Code

17000 00

15000 00

2 Code 2AA

5 Code

15000 00

17000 00

1 Code 1AA

4 Code 2 S 1



The owner is included in a composite income tax return

Montana Schedule K-1 (PTE)

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable boxes: Amended Schedule K-1 Part I. Pass-through Entity Information	Final Schedule K-1	
Name Test Partnership 1 LLC		FEIN 201111111
Mailing Address 1793 Legendborn Way		
City Helena	State M T ZIP Code 5 9 6 0 2	
Part II. Owner Information		
Name Owner Five		FEIN
Mailing Address 2 Lancelot Lane		or SSN 10000005
City Pendragon	State P A ZIP Code 1 5 2 3 7	Beneficial Owner FEIN
on,		or SSN
Owner Type E Resident	➤ Nonresident	
Special Allocations (See instructions)		Profit and loss percentage 4 . 0000 %
The owner is included in a PTET election		Capital/Ownership 4.0000 %
Resident owner PTET election (See instructions)		

		Α	В
Part III. Montana Adjustments (See works	sheet on page 9)	Everywhere	Montana
1 Additions	1	15000 00	15000 00
2 Subtractions	2	17000 00	17000 00
Part IV. Distributive Share of Montana So	ource Income (Loss)		
1 Ordinary business income (loss)	1	6000000 00	6000000 00
2 Net rental real estate income (loss)	2	00	00
3 Other net rental income (loss)	3	00	00
4a Guaranteed payments: services	4a	00	00
4b Guaranteed payments: capital	4b	6222 00	6222 00
5 Interest income	5	1400 00	1400 00
6 Ordinary dividends	6	2000 00	2000 00
7 Royalties	7	00	00
8 Net short-term capital gain (loss)	8	00	00
9 Net long-term capital gain (loss)	9	00	00
10 Net section 1231 gain (loss)	10	00	00
11 Other income (loss) (include detailed statement)	11	660 00	660 00
12 Section 179 expense deduction	12	0.0	00
13 Other expense deductions	13	1620 00	1620 00
14 Total distributive share (See instructions)	14	6006662 00	6006662 00
Part V. Supplemental Information			
The owner filed Form PT-AGR Year	The owner is a Domestic 2r	nd tier PTE	
1 PTET paid on behalf of owner. (See instructions)		1 📙	00
2 Montana composite income tax paid on behalf of ow	vner e	2	00
3a Montana income tax withheld on behalf of owner. (S	ee instructions)	3a	353793 00
3b Montana income tax withheld by a lower tier pass-th	rough entity	3b	00
3c Add lines 3a and 3b.	This is your total Montana income tax	k withheld on your behalf. 3c	353793 00
4 Montana mineral royalty tax withheld		4	00
5 Other information. List type	and amount 5	00	00
Part VI. Tax Credits			
Code	Credit Authorization Number		Amount of Credit

30 Add lines 3a and 3b.	Tills is your total Montai	Willing on your bonain oo	333.75	
4 Montana mineral royalty tax withheld			4	00
5 Other information. List type	and amount	5	00	00
Part VI. Tax Credits				
Code	Credit Authorization Numl	oer		Amount of Credit
1				00
2				00

Part VII. Montana Adjustments Detail: Enter the amount and code of each adjustment entered on Part 3. (See instructions)

1 Code 1AA	15000 00	2	Code 2 A A	15000 00	3	Code 1 S L	17000 00
4 Code 2SL	17000 00	5	Code	00	6	Code	00





Clear Form

2024v1 5/2024

(PTE)

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable boxes: Amended Schedule K-1 Part I. Pass-through Entity Information	Final Schedule K-1	
Name Test Partnership 1 LLC		FEIN 20111111
Mailing Address 1793 Legendborn Way		
City Helena	State M T ZIP Code 5 9 6 0 2	
Part II. Owner Information		
Name Owner Six		FEIN
Mailing Address 2 Lancelot Lane		or SSN 10000006
City Pendragon	State PA ZIP Code 15237	Beneficial Owner FEIN
•		or SSN
Owner Type E Resident	➤ Nonresident	
Special Allocations (See instructions)		Profit and loss percentage 3.0000 %
The owner is included in a PTET election		Capital/Ownership 3.0000 %
Resident owner PTET election (See instructions)		
The owner is included in a composite income tax re	eturn	

		A	D
Part III. Montana Adjustments (See worksheet on page 9)		Everywhere	Montana
1 Additions	1	11250 00	11250 00
2 Subtractions	2	12750 00	12750 00
Part IV. Distributive Share of Montana Source Income (Loss)			
1 Ordinary business income (loss)	1	450000000	4500000 00
2 Net rental real estate income (loss)	2	00	00
3 Other net rental income (loss)	3	00	00
4a Guaranteed payments: services	4a	00	00
4b Guaranteed payments: capital	4b	4666 00	4666 00
5 Interest income	5	1050 00	1050 00
6 Ordinary dividends	6	1500 00	1500 00
7 Royalties	7	00	00
8 Net short-term capital gain (loss)	8	00	00
9 Net long-term capital gain (loss)	9	00	00
10 Net section 1231 gain (loss)	10	00	00
11 Other income (loss) (include detailed statement)	11	495 00	495 00
12 Section 179 expense deduction	12	00	00
13 Other expense deductions	13	1215 00	1215 00
14 Total distributive share (See instructions)	14	450499600	4504996 00
Part V. Supplemental Information			
	mar is a Domestic	2nd tier PTF	

art v. ouppicincina	miomation								
The owner filed Form	n PT-AGR Year	2	0 2	2	The owner is a	a Domestic 2nd tie	r PTE		_
1 PTET paid on behalf of	owner. (See instruction	ns)						1	00
2 Montana composite inco	ome tax paid on behal	of owne	er					2	00
3a Montana income tax wit				uctions)				3a	00
3b Montana income tax wit								3b	00
3c Add lines 3a and 3b.	and the second of the second o				is is your total Montan	a income tax with	hheld on your behalf.	3c	00
4 Montana mineral royalty	tax withheld							4	00
5 Other information. List ty	rpe				and amount	5	0	0	00
Part VI. Tax Credits									

art vii rax oroaito		
Code	Credit Authorization Number	Amount of Credit
1		00
2		00
	The state of the s	iotions)
Part VII. Montana Adjustments	s Detail: Enter the amount and code of each adjustment entered on Part 3. (See instru	ictions)

I al	Part VII. Montana Adjustments Detain. Enter the amount and seas of sales asjustments										
1	Code	1AA	11250 00	2	Code	2 A A	11250 00	3	Code	1 S L	12750 00
4	Code	2 S L	12750 00	5	Code		00	6	Code		00





4 Code 2SL

Montana Schedule K-1

Clear Form

2024v1 5/2024

(PTE)

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable boxes: Amended Schedule K-1 Part I. Pass-through Entity Information	Final Schedule K-1	
Name Test Partnership 1 LLC		FEIN 20111111
Mailing Address 1793 Legendborn Way		
City Helena	State M T ZIP Code 5 9 6 0 2	
Part II. Owner Information		
Name Owner Seven		FEIN
Mailing Address 2 Lancelot Lane		or SSN 10000007
City Pendragon	State P A ZIP Code 1 5 2 3 7	Beneficial Owner FEIN
,		or SSN
Owner Type T Resident	→ Nonresident	
Special Allocations (See instructions)		Profit and loss percentage 3.0000 %
The owner is included in a PTET election		Capital/Ownership 3.0000 %
Resident owner PTET election (See instructions)		
The events is included in a composite income tay rate	**	

Resident owner PTET election (See Instructions)			
★ The owner is included in a composite income tax return Output Description: Description: The owner is included in a composite income tax return Description: The owner is included in a composite income tax return Description: The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in the composite income tax return The owner is included in the composite income tax returns The owner is included in the composite income tax returns The owner is included in the composite in the			В
		_ A	
Part III. Montana Adjustments (See worksheet on page	9)	Everywhere	Montana
1 Additions	1	11250 00	11250 00
2 Subtractions	2	12750 00	12750 00
Part IV. Distributive Share of Montana Source Income	(Loss)		
1 Ordinary business income (loss)	1	4500000 00	4500000 00
2 Net rental real estate income (loss)	2	00	0.0
3 Other net rental income (loss)	3	00	0.0
4a Guaranteed payments: services	4a	00	0.0
4b Guaranteed payments: capital	4b	4666 00	4666 00
5 Interest income	5	1050 00	1050 00
6 Ordinary dividends	6	1500 00	1500 00
7 Royalties	7	00	0.0
8 Net short-term capital gain (loss)	8	00	00
9 Net long-term capital gain (loss)	9	00	00
10 Net section 1231 gain (loss)	10	00	0.0
11 Other income (loss) (include detailed statement)	11	495 00	495 00
12 Section 179 expense deduction	12	00	0.0
13 Other expense deductions	13	1215 00	1215 00
14 Total distributive share (See instructions)	14	450499600	4504996 00
Part V. Supplemental Information			
The owner filed Form PT-AGR Year	The owner is a Domestic	2nd tier PTE	
PTET paid on behalf of owner. (See instructions)		1	00
Montana composite income tax paid on behalf of owner		2	264669 00
3a Montana income tax withheld on behalf of owner. (See instructions)		3a	00
3b Montana income tax withheld by a lower tier pass-through entity		3b	00
	is your total Montana income	tax withheld on your behalf. 3c	00
Montana mineral royalty tax withheld	o your total mortalia moonis	4	00
5 Other information. List type	and amount 5	00	00
Part VI. Tax Credits	dia dinodit	Switchest of the African	
	thorization Number		Amount of Credit
0000	ti lonzation Mainboi		0(
1			0(
2 Part VII. Montana Adjustments Detail: Enter the amount a	and code of each adjustment	entered on Part 3 (See instructions)	I my
		250 00 3 Code 1 S L	12750 00
1 Code 1AA 11250 00 2 Code	288 11	230 00 0 0000 151	12,30 0



6 Code

00

12750 00 5 Code



Montana Schedule K-1 (PTE)

Clear Form

5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable boxes: Amended Schedule K-1 Part I. Pass-through Entity Information	Final Schedule K-1	
Name Test Partnership 1 LLC	FEIN	201111111
Mailing Address 1793 Legendborn Way		
City Helena	State M T ZIP Code 5 9 6 0 2	
Part II. Owner Information		
Name Owner Eight	FEIN	
Mailing Address 2 Lancelot Lane	or SSN	100000008
City Pendragon	State P A ZIP Code 1 5 2 3 7 Beneficial Owner FEIN	
	or SSN	
Owner Type T Resident	X Nonresident	
Special Allocations (See instructions)	Profit and loss percentage	ge 5.0000 %
The owner is included in a PTET election	Capital/Ownersh	ip 5.0000 %
Resident owner PTET election (See instructions)		
The owner is included in a composite income tax return		

		Α	D
Part III. Montana Adjustments (See worksheet on pa	age 9)	Everywhere	Montana
1 Additions	1	18750 00	18750 00
2 Subtractions	2	21250 00	21250 00
Part IV. Distributive Share of Montana Source Inco	ome (Loss)		
1 Ordinary business income (loss)	1	7500000 00	7500000 00
2 Net rental real estate income (loss)	2	00	00
3 Other net rental income (loss)	3	00	00
4a Guaranteed payments: services	4a	00	00
4b Guaranteed payments: capital	4b	7777 00	7777 00
5 Interest income	5	1750 00	1750 00
6 Ordinary dividends	6	2500 00	2500 00
7 Royalties	7	00	00
8 Net short-term capital gain (loss)	8	00	00
9 Net long-term capital gain (loss)	9	00	00
10 Net section 1231 gain (loss)	10	00	00
11 Other income (loss) (include detailed statement)	11	825 00	825 00
12 Section 179 expense deduction	12	00	00
13 Other expense deductions	13	2025 00	2025 00
14 Total distributive share (See instructions)	14	7508327 00	7508327 00
Part V. Supplemental Information			
The superfield Form DT ACD Voor	The owner is a Domestic 3	and tier PTF	

The owner filed Form PT-AGR Year	The owner is a	a Domestic 2nd tie	r PTE	
1 PTET paid on behalf of owner. (See instructions)			1 🣙	00
2 Montana composite income tax paid on behalf of owner			2	00
3a Montana income tax withheld on behalf of owner. (See instruc	ctions)		3a	442241 00
3b Montana income tax withheld by a lower tier pass-through ent			3b	00
3c Add lines 3a and 3b.		a income tax wit	hheld on your behalf. 3c	442241 00
4 Montana mineral royalty tax withheld			4	00
5 Other information. List type	and amount	5	00	00
Part VI Tay Credits				

Code		Credi	t Authorization Nun	nber			Amount of Credit	
1								00
2								00
Part VII. Montana Adju	ustments Detail: Enter							- 00
		2	7-J- 7 7 7	10750 00	2	Codo 1 C 1	21250	1 (

1 Code 1AA	18750 00	2	Code 2AA	18750 00 3	Code	1 S L	21250 00
4 Code 2SL	21250 00	5	Code	00 6	Code	1	00





Clear Form

2024v1 5/2024

(PTE) Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Final Schedule K-1 Amended Schedule K-1 Mark applicable boxes: Part I. Pass-through Entity Information 201111111 **FEIN** Name Test Partnership 1 LLC Mailing Address 1793 Legendborn Way 59602 City Helana State M T ZIP Code Part II. Owner Information **FEIN** Name Owner Nine or SSN 100000009 Mailing Address 2 Lancelot Lane Beneficial Owner FEIN ZIP Code 15237 City Pendragon or SSN Resident X Nonresident Owner Type Profit and loss percentage 3.0000 % Special Allocations (See instructions) Capital/Ownership 3.0000 % The owner is included in a PTET election Resident owner PTET election (See instructions) The owner is included in a composite income tax return

		A	В
Part III. Montana Adjustments (See worksheet on page 9)		Everywhere	Montana
1 Additions	1	11250 00	11250 00
2 Subtractions	2	12750 00	12750 00
Part IV. Distributive Share of Montana Source Income (Loss	3)		
1 Ordinary business income (loss)	1	4500000 00	4500000 00
2 Net rental real estate income (loss)	2	00	00
3 Other net rental income (loss)	3	00	00
4a Guaranteed payments: services	4a	00	00
4b Guaranteed payments: capital	4b	4666 00	4666 00
5 Interest income	5	1050 00	1050 00
6 Ordinary dividends	6	1500 00	1500 00
7 Royalties	7	00	00
8 Net short-term capital gain (loss)	8	00	00
9 Net long-term capital gain (loss)	9	00	00
10 Net section 1231 gain (loss)	10	00	00
11 Other income (loss) (include detailed statement)	11	495 00	495 00
12 Section 179 expense deduction	12	00	00
13 Other expense deductions	13	1215 00	1215 00
14 Total distributive share (See instructions)	14	4504996 00	4504996 00
Part V. Supplemental Information			
★ The owner filed Form PT-AGR Year 2 0 2 0 Th	he owner is a Domestic	2nd tier PTE	

i dit ii cappioincitai intermation					
★ The owner filed Form PT-AGR Year 2 0 2	O The owner is a	a Domestic 2nd tier PTE			
1 PTET paid on behalf of owner. (See instructions)			1	00	
2 Montana composite income tax paid on behalf of owner			2	00	
3a Montana income tax withheld on behalf of owner. (See instruc	tions)		3a	00	
3b Montana income tax withheld by a lower tier pass-through ent			3b	00	
3c Add lines 3a and 3b.		a income tax withheld on your behalf.	3c	00	
4 Montana mineral royalty tax withheld			4	00	
5 Other information. List type	and amount	5 0	0	00	
Part VI. Tax Credits					

Amount of Credit Credit Authorization Number Code 00 00 Part VII. Montana Adjustments Detail: Enter the amount and code of each adjustment entered on Part 3. (See instructions)

12750 00 11250 00 3 Code 1SL 2 Code 2AA 11250 00 1 Code 1AA 00 6 Code 5 Code 4 Code 2SL 12750 00



Page 1 of 4



4 Code 2S1

Montana Schedule K-1

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable boxes: Amended Schedule K-1 Part I. Pass-through Entity Information	Final Schedule K-1	
Name Test Partnership 1 LLC		FEIN 20111111
Mailing Address 1793 Legendborn Way	State M. T. 7IP.Code 5.9602	
City Helena	State M T ZIP Code 5 9 6 0 2	
Part II. Owner Information		
Name Owner Ten		FEIN 10000010
		or SSN
Mailing Address 2 Lancelot Lane	State P. A. 7IP.Code 1.5.2.3.7	Beneficial Owner FEIN
City Pendragon	State P A ZIP Code 15237	
		or SSN
Owner Type F Resident	Nonresident	
Special Allocations (See instructions)		Profit and loss percentage 5.0000 %
The owner is included in a PTET election		Capital/Ownership 5.0000 %
Resident owner PTET election (See instructions)		
The owner is included in a composite income tax return.		

Resident owner PTET election (See instructions)				
The owner is included in a composite income tax return				state out to the first of the state of the
		Α		В
Part III. Montana Adjustments (See worksheet or	n page 9)	Everywhere		Montana
1 Additions	1		50 00	18750 0
2 Subtractions	2	212	50 00	21250 0
Part IV. Distributive Share of Montana Source In	ncome (Loss)			
1 Ordinary business income (loss)	1	75000	00 00	7500000 0
2 Net rental real estate income (loss)	2		00	0
3 Other net rental income (loss)	3		00	0
4a Guaranteed payments: services	4a		00	0
4b Guaranteed payments: capital	4b		77 00	7777 0
5 Interest income	5	17	50 00	1750 0
6 Ordinary dividends	6	25	00 00	25000
7 Royalties	7		00	0
8 Net short-term capital gain (loss)	8		00	0
9 Net long-term capital gain (loss)	9		00	0
10 Net section 1231 gain (loss)	10		00	0
11 Other income (loss) (include detailed statement)	11	8	25 00	825 0
12 Section 179 expense deduction	12		00	0
13 Other expense deductions	13	20	25 00	2025 0
14 Total distributive share (See instructions)	14	75083	27 00	7508327 0
Part V. Supplemental Information				
The owner filed Form PT-AGR Year	The owner is a Dome	stic 2nd tier PTE		
PTET paid on behalf of owner. (See instructions)			1	0
Montana composite income tax paid on behalf of owner			2	441866 0
3a Montana income tax withheld on behalf of owner. (See instruc	ctions)		3a	0
3b Montana income tax withheld by a lower tier pass-through ent			3b	0
3c Add lines 3a and 3b.	This is your total Montana incor	ne tax withheld on your	behalf. 3c	0
Montana mineral royalty tax withheld			4	0
5 Other information. List type	and amount 5		00	0
Part VI. Tax Credits				
	edit Authorization Number			Amount of Credit
1				0
2				0
Part VII. Montana Adjustments Detail: Enter the a	mount and code of each adjustme	nt entered on Part 3. (Se	ee instructions)	
1 Code 1AA 18750 00 2		8750 00 3	Code 15L	21250 0
1 0000 144 10730 00 2	0000 21111		Codo	



24TT1201

00

5 Code

21250 00



4 Code 2SL

12750 00

5 Code

Montana Schedule K-1

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Part I. P	Test Pa	Amended Sche igh Entity Inform rtnership 1 33 Legendbo	nation LLC	Final	Schedule				FEIN	2011	111	11
	elena	33 Legendbor	II way	State	мт	ZIP Code	5 9 6	0 2				
	Owner Inf	ormation		Olalo		Zii Oodo		Ville Little				
	Owner E	201000000000000000000000000000000000000							FEIN	1000	000	11
		Lancelot La	ne						or SSN			
City Pe	endrago	n		State	PΑ	ZIP Code	152	3 7	Beneficial Owner FEIN or SSN			
Owner Typ	oe .	C	Resident		Nonresid	lent						
		ns (See instructions)							Profit and loss percentag	je	3.000	00 %
The	e owner is inc	luded in a PTET election	on						Capital/Ownersh	ip	3.000	00 %
Re	sident owner	PTET election (See in:	structions)									
The	e owner is inc	luded in a composite in	ncome tax return									
								Δ		В		

The owner is included in a composite income tax return			
The owner is included in a composite most to tax rotati		Α	В
Part III. Montana Adjustments (See worksheet	on page 9)	Everywhere	Montana
1 Additions	1	11250 00	11250 00
2 Subtractions	2	12750 00	12750 00
Part IV. Distributive Share of Montana Source	e Income (Loss)		
1 Ordinary business income (loss)	1	4500000 00	4500000 00
2 Net rental real estate income (loss)	2	00	00
3 Other net rental income (loss)	. 3	00	00
4a Guaranteed payments: services	4a	00	00
4b Guaranteed payments: capital	4b	4666 00	4666 00
5 Interest income	5	1050 00	1050 00
6 Ordinary dividends	6	1500 00	1500 00
7 Royalties	7	00	0.0
8 Net short-term capital gain (loss)	8	00	0.0
9 Net long-term capital gain (loss)	9	00	0.0
10 Net section 1231 gain (loss)	10	00	0.0
11 Other income (loss) (include detailed statement)	11	495 00	495 00
12 Section 179 expense deduction	12	00	00
13 Other expense deductions	13	1215 00	1215 00
14 Total distributive share (See instructions)	14	4504996 00	4504990 00
Part V. Supplemental Information			
The owner filed Form PT-AGR Year	The owner is a Domes	tic 2nd tier PTE	
1 PTET paid on behalf of owner. (See instructions)		1	00
2 Montana composite income tax paid on behalf of owner		2	00
3a Montana income tax withheld on behalf of owner. (See inst	tructions)	3a	265795 00
3b Montana income tax withheld by a lower tier pass-through		3b	0.0
3c Add lines 3a and 3b.	This is your total Montana incom	e tax withheld on your behalf. 3c	265795 00
4 Montana mineral royalty tax withheld		4	0.0
5 Other information. List type	and amount 5	00	00
Part VI. Tax Credits			
Code	Credit Authorization Number		Amount of Credit
1			00
2			00
Part VII. Montana Adjustments Detail: Enter the	e amount and code of each adjustmen	t entered on Part 3. (See instructions)	
1 Code 1AA 11250 00		1250 00 3 Code 1 S L	12750 00
		00 0 0	0.0



6 Code



Montana Schedule K-1 (PTE)

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable boxes: Amended Schedule K-1 Part I. Pass-through Entity Information	Final Schedule K-1	
Name Test Partnership 1 LLC		FEIN 20111111
Mailing Address 1793 Legendborn Way City Helena	State M T ZIPCode 5 9 6 0 2	
Part II. Owner Information		
Name Owner Twelve		FEIN 100000012
Mailing Address 2 Lancelot Lane		or SSN
City Pendragon	State P A ZIP Code 15237	Beneficial Owner FEIN
,		or SSN
Owner Type F Resident	Nonresident	
Special Allocations (See instructions)		Profit and loss percentage 2.0000 %
The owner is included in a PTET election		Capital/Ownership 2.0000 %
Resident owner PTET election (See instructions)		
X The owner is included in a composite income tax return		

Part III. Montana Adjustments (See worksheet on p	age 9)	Everywhere	Montana
1 Additions	1	7500 00	7500 00
2 Subtractions	2	8500 00	8500 00
Part IV. Distributive Share of Montana Source Inco	ome (Loss)		
1 Ordinary business income (loss)	1	300000000	3000000 00
2 Net rental real estate income (loss)	2	00	00
3 Other net rental income (loss)	3	00	00
4a Guaranteed payments: services	4a	00	00
4b Guaranteed payments: capital	4b	3111 00	3111 00
5 Interest income	5	700 00	700 00
6 Ordinary dividends	6	1000 00	1000 00
7 Royalties	7	00	00
8 Net short-term capital gain (loss)	8	00	00
9 Net long-term capital gain (loss)	9	00	00
10 Net section 1231 gain (loss)	10	00	00
11 Other income (loss) (include detailed statement)	11	330 00	330 00
12 Section 179 expense deduction	12	00	00
13 Other expense deductions	13	810 00	810 00
14 Total distributive share (See instructions)	14	3003331 00	3003331 00
Part V. Supplemental Information			
The owner filed Form PT-AGR Year	The owner is a Domest	tic 2nd tier PTE	
1 PTET paid on behalf of owner. (See instructions)		1	00
2 Montana composite income tax paid on behalf of owner		2	176071 00
3a Montana income tax withheld on behalf of owner. (See instruction	is)	3a	00
3b Montana income tax withheld by a lower tier pass-through entity		3b	00
	This is your total Montana incom	e tax withheld on your behalf. 3c	00
4 Montana mineral royalty tax withheld		4	00
5 Other information. List type	and amount 5	00	00
L. L. C. Bridger & G. Brigger L. C. The Control of			

Part VI. Tax Credits			
Code	Credit Authorization Number	Amount of Credit	
1			00
2			00
Part VII Montana Adius	tments Detail: Enter the amount and code of each adjustment entered on Part 3. (See instructions)		

1 (Code 1	AA	7500 00	2	Code	2 A A	7500 00	3	Code	1SL	8500 00
4 (Code 2	SL	8500 00	5	Code		00	6	Code		00





Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Name Test Pa	Amended Schedule K-1 ugh Entity Information rtnership 1 LLC	Final Schedule	K-1		FEIN	2011111	11
City Helena	93 Legendborn Way	State M T	ZIP Code	59602			
Part II. Owner Inf	ormation	Oldio 11 1	211 0000				
	hirteen				FEIN	1000000	1 3
	Lancelot Lane				or SSN		
City Pendrago		State P A	ZIP Code	15237	Beneficial Owner FEIN		
					or SSN		
Owner Type	F Resident	Nonreside	nt				
Special Allocation	ns (See instructions)				Profit and loss percentag	e 6.00	00 %
The owner is inc	luded in a PTET election				Capital/Ownersh	p 6.00	00 %
Resident owner	PTET election (See instructions)						
The owner is inc	cluded in a composite income tax retu	rn					
						В	

The owner is included in a PTET election			Capital/Ownersr	ip 6.0000 %
Resident owner PTET election (See instructions)				
The owner is included in a composite income tax re	eturn			and the state of the state of
		Α		В
Part III. Montana Adjustments (See worksh	neet on page 9)	Everyw		Montana
1 Additions		1	22500 00	22500 00
2 Subtractions		2	25500 00	25500 00
Part IV. Distributive Share of Montana Sou	urce Income (Loss)			
1 Ordinary business income (loss)		1 9	000000 00	9000000 00
Net rental real estate income (loss)		2	00	00
3 Other net rental income (loss)		3	00	00
4a Guaranteed payments: services		4a	00	00
4b Guaranteed payments: capital		4b	9332 00	9332 00
5 Interest income		5	2100 00	2100 00
6 Ordinary dividends		6	300000	3000 00
7 Royalties		7	00	00
8 Net short-term capital gain (loss)		8	00	00
9 Net long-term capital gain (loss)		9	00	00
10 Net section 1231 gain (loss)		10	00	00
11 Other income (loss) (include detailed statement)		11	990 00	990 00
12 Section 179 expense deduction		12	00	00
13 Other expense deductions		13	2430 00	2430 00
14 Total distributive share (See instructions)		14 9	00999200	9009992 00
Part V. Supplemental Information				
The owner filed Form PT-AGR Year	The owner is a D	omestic 2nd tier PTE		
1 PTET paid on behalf of owner. (See instructions)			1	00
2 Montana composite income tax paid on behalf of own	er		2	00
3a Montana income tax withheld on behalf of owner. (See	e instructions)		3a	531590 00
3b Montana income tax withheld by a lower tier pass-thro	ough entity		3b	00
3c Add lines 3a and 3b.	This is your total Montana i	ncome tax withheld or	n your behalf. 3c	531590 00
4 Montana mineral royalty tax withheld			4	00
5 Other information. List type	and amount	5	00	00
Part VI. Tax Credits				
Code	Credit Authorization Number	n - 11 - 1		Amount of Credit
1				00
2				00
Part VII. Montana Adjustments Detail: Ente	er the amount and code of each adjus	stment entered on Par	t 3. (See instructions)	
1 Code 1AA 22500 00	2 Code 2AA	22500 00	3 Code 1SL	25500 00
4 Code 2 S L 25500 00	5 Code	00	6 Code	00



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Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable boxes: Amended Schedule K-1 Part I. Pass-through Entity Information	Final Schedule K-1	
Name Test Partnership 1 LLC		FEIN 20111111
Mailing Address 1793 Legendborn Way		
City Helena	State M T ZIP Code 5 9 6 0 2	
Part II. Owner Information		
Name Owner Fourteen	<i>*</i>	FEIN 10000014
Mailing Address 2 Lancelot Lane		or SSN
City Pendragon	State P A ZIP Code 15237	Beneficial Owner FEIN
ony I contain any one		or SSN
Owner Type F Resident	Nonresident	
Special Allocations (See instructions)		Profit and loss percentage 3.0000 %
The owner is included in a PTET election		Capital/Ownership 3.0000 %
Resident owner PTET election (See instructions)		
The owner is included in a composite income tax return	1	
The owner to moraced in a composite mount (as retain		A B

The entre is included in a constant			
Resident owner PTET election (See instruction	ons)		
The owner is included in a composite income	tax return		
		A	В
Part III. Montana Adjustments (See we	orksheet on page 9)	Everywhere	Montana
1 Additions	1	11250 00	11250 00
2 Subtractions	2	12750 00	12750 00
Part IV. Distributive Share of Montana	a Source Income (Loss)		
1 Ordinary business income (loss)	1	4500000 00	4500000 00
2 Net rental real estate income (loss)	2	00	0.0
3 Other net rental income (loss)	3	00	0.0
4a Guaranteed payments: services	4a	00	0.0
4b Guaranteed payments: capital	4b	4666 00	4666 00
5 Interest income	5	1050 00	1050 00
6 Ordinary dividends	6	1500 00	1500 00
7 Royalties	7	00	0.0
8 Net short-term capital gain (loss)	8	00	00
9 Net long-term capital gain (loss)	9	00	00
10 Net section 1231 gain (loss)	10	00	00
11 Other income (loss) (include detailed statement) 11	495 00	495 00
12 Section 179 expense deduction	12	00	00
13 Other expense deductions	13	1215 00	1215 00
14 Total distributive share (See instructions)	14	4504996 00	4504996 00
Part V. Supplemental Information			
★ The owner filed Form PT-AGR Year	2 0 1 9 The owner is a Domest	tic 2nd tier PTE	
1 PTET paid on behalf of owner. (See instructions	3)	1	00
2 Montana composite income tax paid on behalf of		2	00
3a Montana income tax withheld on behalf of owner		3a	00
3b Montana income tax withheld by a lower tier pas	ss-through entity	3b	00
3c Add lines 3a and 3b.	This is your total Montana income	e tax withheld on your behalf. 3c	00
4 Montana mineral royalty tax withheld		4	00
5 Other information. List type	and amount 5	00	00
Part VI. Tax Credits			
Code	Credit Authorization Number		Amount of Credit
1			00
2			00
Part VII. Montana Adjustments Detail	: Enter the amount and code of each adjustment	t entered on Part 3. (See instructions)	
	0 0 0 1 0 7 7		10750 0



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6 Code

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12750 00

2 Code 2AA

5 Code

11250 00

12750 00

1 Code 1AA

4 Code 2SL



Clear Form

2024v1 5/2024

(PTE)
Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable boxes: Amended Schedule K-1 Part I. Pass-through Entity Information	Final Schedule K-1	
Name Test Partnership 1 LLC		FEIN 20111111
Mailing Address 1793 Legendborn Way		
City Helena	State M T ZIP Code 5 9 6 0 2	
Part II. Owner Information		
Name Owner Fifteen		FEIN 10000015
Mailing Address 2 Lancelot Lane		or SSN
City Pendragon	State P A ZIP Code 15237	Beneficial Owner FEIN
		or SSN
Owner Type T E Resident	Nonresident	
Special Allocations (See instructions)		Profit and loss percentage 4.0000 %
The owner is included in a PTET election		Capital/Ownership 4.0000 %
Resident owner PTET election (See instructions)		
★ The owner is included in a composite income tax return Output Description: The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax returns The owner is included in a composite income tax returns The owner is included in the composite income tax returns The owner is included in the composite income tax returns The owner is included in the composite income tax returns The owner is included in the composite income tax returns The owner is included in the composite in the		
The second secon	A	В

	THE OWNER IS INCIDED IN A FIL	I CICCIOII					oupitus o m	11010111p 110000
	Resident owner PTET election	(See instructions)						
×	The owner is included in a com	posite income tax retur	n					
						Α		В
Part	III. Montana Adjustmen	ts (See workshee	et on p	age 9)		Everywhei	re	Montana
1 /	Additions				1	1	5000 00	15000 00
2 :	Subtractions				2	1	7000 00	17000 00
Part	IV. Distributive Share o	f Montana Source	ce Inco	ome (Loss)				
1 (Ordinary business income (loss)				1	600	0000000	6000000 00
2	Vet rental real estate income (loss	3)			2		00	00
3 (Other net rental income (loss)				3		00	00
4a (Guaranteed payments: services				4a		00	00
4b (Guaranteed payments: capital				4b		6222 00	6222 00
5	nterest income				5		1400 00	1400 00
6	Ordinary dividends				6		2000 00	2000 00
7	Royalties				7		00	00
8 1	Net short-term capital gain (loss)				8		00	00
9 1	Net long-term capital gain (loss)				9		00	00
10	Net section 1231 gain (loss)				10		00	00
11	Other income (loss) (include detail	led statement)			11		660 00	660 00
12	Section 179 expense deduction				12		00	00
13	Other expense deductions				13		1620 00	1620 00
14	Total distributive share (See instru	ctions)			14	600	6662 00	6006662 00
Pari	V. Supplemental Inform	nation						
	The owner filed Form PT-AGR	R Year		The owner is	a Domestic 2nd	tier PTE		
1	PTET paid on behalf of owner. (Se	ee instructions)					1	00
	Montana composite income tax pa						2	353268 00
3a	Montana income tax withheld on b	oehalf of owner. (See in	struction	s)			3a	00
3b	Montana income tax withheld by a	a lower tier pass-throug					3b	00
3c /	Add lines 3a and 3b.		T	his is your total Montar	na income tax v	vithheld on yo	our behalf. 3c	00
4	Montana mineral royalty tax withhe	eld					4	00
5	Other information. List type			and amount	5		00	00
Part	VI. Tax Credits							
	Code		Credit	Authorization Num	ber			Amount of Credit
1								00
2								00
Pari	VII. Montana Adjustme	nts Detail: Enter t	he amou	unt and code of each ac			(See instructions)	The state of the Control
1	Code 1 A A	15000 00	2 C	code 2AA	15000		3 Code 1SI	
4	Code 2 S L	17000 00	5 C	Code		00	6 Code	00





Montana Schedule K-1 (PTE)

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable boxes: Amended Schedule K-1 Part I. Pass-through Entity Information	Final Schedule K-1	FEIN 20111111
Name Test Partnership 1 LLC Mailing Address 1793 Legendborn Way		1011 20111111
City Helena	State M T ZIP Code 5 9 6 0 2	
Part II. Owner Information		
Name Owner Sixteen		FEIN 10000016
Mailing Address 2 Lancelot Lane		or SSN
City Pendragon	State P A ZIP Code 1 5 2 3 7	Beneficial Owner FEIN
		or SSN
Owner Type T E Resident	Nonresident	
Special Allocations (See instructions)		Profit and loss percentage 4.0000 %
The owner is included in a PTET election		Capital/Ownership 4.0000 %
Resident owner PTET election (See instructions)		
The owner is included in a composite income tax return		
		A B

Resident owner PTET of	election (See instructions)					
The owner is included in	n a composite income tax re	eturn				
				A		В
Part III. Montana Adjus	stments (See worksh	neet on page 9)	Everyv	vhere	Montana
1 Additions				1	15000 00	15000 0
2 Subtractions				2	17000 00	17000 0
Part IV. Distributive Sh	nare of Montana Sor	urce Income (Loss)			
1 Ordinary business income	e (loss)			1 6	500000000	6000000 0
2 Net rental real estate incor	me (loss)			2	00	0
3 Other net rental income (kg	2 (2)			3	00	0
4a Guaranteed payments: se	ervices		4	a	00	0
4b Guaranteed payments: ca			4	b	6222 00	6222 0
5 Interest income				5	1400 00	1400 0
6 Ordinary dividends				6	2000 00	2000 0
7 Royalties				7	00	0
8 Net short-term capital gair	ı (loss)			8	00	0
9 Net long-term capital gain				9	00	0
10 Net section 1231 gain (los	a 5		1	0	00	0
11 Other income (loss) (inclu			1	1	660 00	660 0
12 Section 179 expense ded			1	2	00	0
13 Other expense deductions			1	3	1620 00	1620 0
14 Total distributive share (Se			1	4	6006662 00	6006662 0
Part V. Supplemental						
The owner filed Form			The owner is a Do	mestic 2nd tier PTE		
1 PTET paid on behalf of ov					1	0
Montana composite incon	The state of the s	er			2	0
3a Montana income tax with					3a	354393 0
3b Montana income tax with					3b	0
3c Add lines 3a and 3b.	10.0 b) a 10.10 a 2.1 p 2.10 a 2.10	This is v	our total Montana in	come tax withheld	on your behalf. 3c	354393 0
4 Montana mineral royalty to	ax withheld				4	0
5 Other information. List typ			and amount	5	00	0
Part VI. Tax Credits			The state of the s			
Code		Credit Author	orization Number			Amount of Credit
1						C
2						C
Part VII. Montana Adju	ustments Detail: Entr	er the amount and	code of each adjust	ment entered on Pa	art 3. (See instructions)	
1 Code 1AA	15000 00	2 Code		15000 00	3 Code 1 S L	17000 0
1 OOG IAA	13000 00	- 0000		13000 00	6 6-4-	1,000



6 Code

00

17000 00

5 Code

4 Code 2SL



Code

1

Montana Schedule K-1 (PTE)

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

and the second s				
Mark applicable boxes: Amended Schedule K-1 Part I. Pass-through Entity Information	Final Schedule K-1			
Name Test Partnership 1 LLC			FEIN 2	01111111
Mailing Address 1793 Legendborn Way				
City Helena	State M T ZIP Code	5 9 6 0 2		
Part II. Owner Information				
Name Owner Seventeen			FEIN 1	00000017
Mailing Address 2 Lancelot Lane			or SSN	
City Pendragon	State P A ZIP Code	15237	Beneficial Owner FEIN	
ony contracting one			or SSN	
Owner Type T E Resident	Nonresident			
Special Allocations (See instructions)			Profit and loss percentage	3.0000 %
The owner is included in a PTET election			Capital/Ownership	3.0000 %
Resident owner PTET election (See instructions)				
The owner is included in a composite income tax re	turn			
			A	В
Part III. Montana Adjustments (See works)	neet on page 9)	Every	ywhere	Montana
1 Additions		1	11250 00	11250 00
2 Subtractions		2	12750 00	12750 00
Part IV. Distributive Share of Montana So	urce Income (Loss)			
4.0.1.		4	450000000	4500000 00

1 Additions	1	11250 00	11250 00
2 Subtractions	2	12750 00	12750 00
Part IV. Distributive Share of Montana Source Income (Loss)			
1 Ordinary business income (loss)	1	4500000 00	4500000 00
2 Net rental real estate income (loss)	2	00	00
3 Other net rental income (loss)	3	00	00
4a Guaranteed payments: services	4a	00	00
4b Guaranteed payments: capital	4b	4666 00	4666 00
5 Interest income	5	1050 00	1050 00
6 Ordinary dividends	6	1500 00	1500 00
7 Royalties	7	00	00
8 Net short-term capital gain (loss)	8	00	00
9 Net long-term capital gain (loss)	9	00	00
10 Net section 1231 gain (loss)	10	00	00
11 Other income (loss) (include detailed statement)	11	495 00	495 00
12 Section 179 expense deduction	12	00	00
13 Other expense deductions	13	1215 00	1215 00
14 Total distributive share (See instructions)	14	4504996 00	4504996 00
Part V. Supplemental Information			
★ The owner filed Form PT-AGR Year 2 0 2 1 The	owner is a Domestic 2nd	d tier PTE	
1 PTET paid on behalf of owner. (See instructions)		1	00
2 Montana composite income tax paid on behalf of owner		2	00

FILI paid on behalf of owner. (See instructions)			· ·	
2 Montana composite income tax paid on behalf of own	ner		2	00
3a Montana income tax withheld on behalf of owner. (Se	ee instructions)		3a	00
3b Montana income tax withheld by a lower tier pass-thr			3b	00
3c Add lines 3a and 3b.	This is your total Montan	a income tax withhe	ld on your behalf. 3c	00
4 Montana mineral royalty tax withheld	•		4	00
5 Other information. List type	and amount	5	00	00
Part VI. Tax Credits				

2	
Part VII. Montana Adjustments Detail: Enter the amount and code of each adjustment entered on Part 3. (See instruc	tions)

Credit Authorization Number

1 Code 1AA 11250 00 2 Code 2AA 11250 00 3 Code 1SL 12750 00 4 Code 2SL 12750 00 5 Code 00 6 Code 00



00

00

Amount of Credit



4 Code 2SL

25500 00

5 Code

Montana Schedule K-1

Clear Form



Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable boxes: Amended Schedule K-1 Part I. Pass-through Entity Information	Final Schedule K-1	
Name Test Partnership 1 LLC		FEIN 20111111
Mailing Address 1793 Legendborn Way		
City Helena	State M T ZIP Code 5 9 6 0 2	
Part II. Owner Information		
Name Owner Eightteen		FEIN 100000018
Mailing Address 2 Lancelot Lane		or SSN
City Pendragon	State P A ZIP Code 1 5 2 3 7 Bene	ficial Owner FEIN
, -		or SSN
Owner Type P Resident	Nonresident	
Special Allocations (See instructions)	Profit a	and loss percentage 6.0000 %
The owner is included in a PTET election		Capital/Ownership 6.0000 %
Resident owner PTET election (See instructions)		
★ The owner is included in a composite income tax return		
	A	В
Part III. Montana Adjustments (See worksheet	on page 9) Everywhere	Montana

X The owner is included in a composite income tax retu	ım		
The owner is included in a composite moonie tax rota	13	A	В
Part III. Montana Adjustments (See workshe	eet on page 9)	Everywhere	Montana
1 Additions	1	22500 00	22500 00
2 Subtractions	2	25500 00	25500 00
Part IV. Distributive Share of Montana Sour	rce Income (Loss)		
Ordinary business income (loss)	1	9000000 00	9000000 00
2 Net rental real estate income (loss)	2	00	00
3 Other net rental income (loss)	3	00	00
4a Guaranteed payments: services	4a	00	00
4b Guaranteed payments: capital	4b	9332 00	9332 00
5 Interest income	5	2100 00	2100 00
6 Ordinary dividends	6	3000 00	3000 00
7 Royalties	7	00	00
8 Net short-term capital gain (loss)	8	00	00
9 Net long-term capital gain (loss)	9	00	00
10 Net section 1231 gain (loss)	10	00	00
11 Other income (loss) (include detailed statement)	11	990 00	990 00
12 Section 179 expense deduction	12	00	00
13 Other expense deductions	13	2430 00	2430 00
14 Total distributive share (See instructions)	14	9009992 00	9009992 00
Part V. Supplemental Information			
The owner filed Form PT-AGR Year	The owner is a Domest	tic 2nd tier PTE	
1 PTET paid on behalf of owner. (See instructions)		1	00
2 Montana composite income tax paid on behalf of owner	,	2	530464 00
3a Montana income tax withheld on behalf of owner. (See in		3a	00
3b Montana income tax withheld by a lower tier pass-through		3b	00
3c Add lines 3a and 3b.	This is your total Montana income	e tax withheld on your behalf. 3c	00
4 Montana mineral royalty tax withheld	•	4	00
5 Other information. List type	and amount 5	00	0.0
Part VI. Tax Credits			
Code	Credit Authorization Number		Amount of Credit
1			0.0
2			00
Part VII. Montana Adjustments Detail: Enter	the amount and code of each adjustment	t entered on Part 3. (See instructions)	
1 Code 1AA 22500 00		2500 00 3 Code 1 S L	25500 00



6 Code

00

00



1 Code 1AA

4 Code 2SL

7500 00

8500 00

Montana Schedule K-1 (PTE)

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

State 1	мт	7/0.0-1-		FEIN 2	0111111
State 1	мт	7/D O- 1-			
State 1	T	710.0-1-			
		ZIP Code	59602		
				FEIN 1	0000001
				or SSN	
State	PΑ	ZIP Code	15237	Beneficial Owner FEIN or SSN	
No	nreside	ent			
				Profit and loss percentage	2.0000
				Capital/Ownership	2.0000
n				,	
				A	В
et on page	9)		Ev	erywhere	Montana
	,		1	7500 00	7500 0
			2	8500 00	8500 0
e Income	(Los	s)			
		•	1	3000000000	30000000
			2	00	0
			3	00	0
			4a	00	0
			4b	3111 00	3111 0
			5	700 00	7000
				1000 00	10000
				00	0
				00	0
				00	0
					0
					3300
					0
					810 0
					30033310
	7	he owner is :	a Domestic 2nd tier	PTF	
		TIC OWITCH IS	a Domostio Zna tier	1	0
				2	0
etructions)					176897 0
					0
This is	0.1/01/15	total Montan	a income tay with		176897 0
i nis i	s your	totai ivioritan	ia ilicollie tax With		0
	-	d amount	5		0
	an	u amount			ALL ME SONS COLD
Cupalit A - 4	tho:	ation Number	207	An	nount of Credit
Credit Aut	utoriza	auon Numi	Jei	All	Ourit of Credit
					0
	n et on page ce Income structions) h entity This i	Nonreside Nonreside Nonreside Nonreside Nonreside	Nonresident net on page 9) ce Income (Loss) The owner is a structions) h entity This is your total Montar and amount Credit Authorization Number	Nonresident Pet on page 9) Eve Income (Loss) 1 2 3 4a 4b 5 6 7 8 9 10 11 12 13 14 The owner is a Domestic 2nd tier structions) h entity This is your total Montana income tax withly and amount 5 Credit Authorization Number	Nonresident Profit and loss percentage Capital/Ownership A



3 Code 1SL

6 Code

8500 00

00

2 Code 2AA

5 Code

7500 00

00



Montana Schedule K-1 (PTE)

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable boxes: Amended Schedule K-1	Final Schedule K-1			
Part I. Pass-through Entity Information			FEIN 2	01111111
Name Test Partnership 1 LLC			12	
Mailing Address 1793 Legendborn Way	State M T ZIP Code	59602		
City Helena	State In 1 Zir Code	33002		
Part II. Owner Information			FEIN 1	00000020
Name Owner Twenty			or SSN	
Mailing Address 2 Lancelot Lane	Chata D A 71D Codo	15237	Beneficial Owner FEIN	
City Pendragon	State P A ZIP Code	13237	or SSN	
Owner Type PTP Resident	Nonresident			
Special Allocations (See instructions)			Profit and loss percentage	4.0000
The owner is included in a PTET election			Capital/Ownership	4.0000
Resident owner PTET election (See instructions)				
X The owner is included in a composite income tax return				В
Part III. Montana Adjustments (See workshee	t on page 9)	Eve	A erywhere	Montana
1 Additions	t on page of	1	15000 00	15000 00
2 Subtractions		2	17000 00	17000 00
Part IV. Distributive Share of Montana Source	e Income (Loss)			
Ordinary business income (loss)	o 111001110 (2000)	1	600000000	6000000 00
Net rental real estate income (loss)		2	00	00
3 Other net rental income (loss)		3	00	00
4a Guaranteed payments: services		4a	00	00
4b Guaranteed payments: capital		4b	6222 00	6222 00
5 Interest income		5	1400 00	1400 00
6 Ordinary dividends		6	2000 00	2000 00
7 Royalties		7	00	00
8 Net short-term capital gain (loss)		8	00	00
9 Net long-term capital gain (loss)		9	00	00
10 Net section 1231 gain (loss)		10	00	00
11 Other income (loss) (include detailed statement)		11	660 00	660 00
12 Section 179 expense deduction		12	00	00
13 Other expense deductions		13	1620 00	1620 00
14 Total distributive share (See instructions)		14	6006662 00	6006662 00
Part V. Supplemental Information				
The owner filed Form PT-AGR Year	The owner is	a Domestic 2nd tier F	PTE	
PTET paid on behalf of owner. (See instructions)	7110 0111101 10		1	00
Montana composite income tax paid on behalf of owner			2	353268 00
3a Montana income tax withheld on behalf of owner. (See ins	structions)		3a	00
3b Montana income tax withheld by a lower tier pass-through			3b	00
3c Add lines 3a and 3b.	This is your total Monta	na income tax withh		00
Montana mineral royalty tax withheld	,		4	00
5 Other information. List type	and amount	5	00	00
Part VI. Tax Credits		Salar Jerlinia		
	Credit Authorization Num	ber	An	nount of Credit
1				00
2				00



3 Code 1 S L

6 Code

17000 00

00

15000 00

Part VII. Montana Adjustments Detail: Enter the amount and code of each adjustment entered on Part 3. (See instructions)

2 Code 2AA

5 Code

15000 00

17000 00

1 Code 1AA

4 Code 2SL



Montana Schedule K-1 (PTE)

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Name Test Partnership 1 LLC
Name Test Part Part Part
City Helena State M T ZiPCode S 9 6 0 2
Name
Name
Mailing Address 2 Lancelot Lane City Pendragon State P A ZIPCode 1 5 2 3 7 Beneficial Owner FEIN or SSN City Pendragon State P A ZIPCode 1 5 2 3 7 Beneficial Owner FEIN or SSN Comer Type P T P Resident Nonresident Special Allocations (See instructions) The owner is included in a PTET election Resident owner PTET election (See instructions) The owner is included in a composite income tax return Part III. Montana Adjustments (See worksheet on page 9) Part III. Montana Adjustments (See worksheet on page 9) Part IV. Distributive Share of Montana Source Income (Loss) 1 Ordinary business income (loss) 2 Net rental real estate income (loss) 3 Other net rental income (loss) 4a Guaranteed payments: services 4b Guaranteed payments: services 4c Gordinary dividends 5 Interest income 6 Ordinary dividends 7 Oo 8 Net short-term capital gain (loss) 9 Net long-term capital gain (loss) 9 Net long-term capital gain (loss) 10 Other income (loss) (include detailed statement) 11 Géo 000 6 Officinary dividended detailed statement) 11 Geo 000 6 Officinary dividended detailed statement) 12 Section 179 expense deduction
City Pendragon State P A ZIPCode 1 5 2 3 7 Beneficial Owner FEIN or SSN Owner Type P T P Resident Nonresident Special Allocations (See instructions) The owner is included in a PTET election Resident owner PTET election (See instructions) The owner is included in a composite income tax return Part III. Montana Adjustments (See worksheet on page 9) Part IV. Distributive Share of Montana Source Income (Loss) 1 1 5000 00 1500 2 Subtractions 1 1 6000000 00 600000 2 Net rental real estate income (loss) 3 Other net rental income (loss) 4 Guaranteed payments: services 4 Guaranteed payments: services 4 Guaranteed payments: capital 6 Ordinary dividends 5 Interest income 6 Ordinary dividends 7 Royalties 7 No 00 8 Net short-term capital gain (loss) 9 Net long-term capital gain (loss) 1 Other income (loss) (include detailed statement)
Owner Type P T P Resident Nonresident Special Allocations (See instructions) Profit and loss percentage 4 . 0 (Capital/Ownership 4 . 0 (Capi
Special Allocations (See instructions)
The owner is included in a PTET election (See instructions) Resident owner PTET election (See instructions) The owner is included in a composite income tax return A B
Resident owner PTET election (See instructions) The owner is included in a composite income tax return A B Part III. Montana Adjustments (See worksheet on page 9) Part IV. Distributive Share of Montana Source Income (Loss) 1 Ordinary business income (loss) 2 Net rental real estate income (loss) 3 Other net rental income (loss) 4a Guaranteed payments: services 4b Guaranteed payments: capital 6 Ordinary dividends 7 Royalties 7 Royalties 8 Net short-term capital gain (loss) 8 Net short-term capital gain (loss) 10 Net section 1231 gain (loss) 11 Ofter income (loss) 12 Octor income (loss) 13 Octor income (loss) 14 Octor income (loss) 15 Octor income (loss) 16 Octor income (loss) 17 Octor income (loss) 18 Octor income (loss) 19 Octor income (loss) 10 Octor income (loss) 11 Octor income (loss) 12 Octor income (loss) 13 Octor income (loss) 14 Octor income (loss) 15 Octor income (loss) 16 Octor income (loss) 17 Octor income (loss) 18 Octor income (loss) 19 Octor income (loss) 10 Octor income (loss) (include detailed statement) 11 Octor income (loss) (include detailed statement) 12 Octor income (loss) (include detailed statement)
The owner is included in a composite income tax return
The owner is included in a composite income tax return
Part III. Montana Adjustments (See worksheet on page 9) Everywhere Montana 1
1 Additions
2 Subtractions 2 Subtractions 2 17000 00 17000 Part IV. Distributive Share of Montana Source Income (Loss) 1 Ordinary business income (loss) 2 Net rental real estate income (loss) 3 Other net rental income (loss) 4a Guaranteed payments: services 4b Guaranteed payments: capital 4b G222 00 622 5 Interest income 6 Ordinary dividends 7 Royalties 7 Ney alties 8 Net short-term capital gain (loss) 9 Net long-term capital gain (loss) 10 Net section 1231 gain (loss) 11 Other income (loss) (include detailed statement) 12 Section 179 expense deduction
Part IV. Distributive Share of Montana Source Income (Loss) 1 Ordinary business income (loss) 1 600000 00 600000 00 2 Net rental real estate income (loss) 2 00 00 3 Other net rental income (loss) 3 00 00 4a Guaranteed payments: services 4a 00 00 4b Guaranteed payments: capital 4b 6222 00 622 5 Interest income 5 1400 00 140 6 Ordinary dividends 6 2000 00 200 7 Royalties 7 00 8 Net short-term capital gain (loss) 8 00 9 Net long-term capital gain (loss) 9 00 10 Net section 1231 gain (loss) 10 00 11 Other income (loss) (include detailed statement) 11 660 00 660 12 Section 179 expense deduction 12 00 600 660
1 Ordinary business income (loss) 1 6000000 00 600000 00 2 Net rental real estate income (loss) 2 00 3 Other net rental income (loss) 3 00 4a Guaranteed payments: services 4a 00 4b Guaranteed payments: capital 4b 6222 00 622 5 Interest income 5 1400 00 140 6 Ordinary dividends 6 2000 00 200 7 Royalties 7 00 8 Net short-term capital gain (loss) 8 00 9 Net long-term capital gain (loss) 9 00 10 Net section 1231 gain (loss) 10 00 11 Other income (loss) (include detailed statement) 11 660 00 660 12 Section 179 expense deduction 12 00
Net rental real estate income (loss) 2 00 3 Other net rental income (loss) 3 00 4a Guaranteed payments: services 4a 00 4b Guaranteed payments: capital 4b 6222 00 622 5 Interest income 5 1400 00 140 6 Ordinary dividends 6 2000 00 200 7 Royalties 7 00 8 Net short-term capital gain (loss) 8 00 9 Net long-term capital gain (loss) 9 00 10 Net section 1231 gain (loss) 10 00 11 Other income (loss) (include detailed statement) 11 660 00 660 12 Section 179 expense deduction 12 00
3 Other net rental income (loss) 4a Guaranteed payments: services 4b Guaranteed payments: capital 4b Guaranteed payments: capital 4b G222 00 622 5 Interest income 5 1400 00 140 6 Ordinary dividends 6 Ordinary dividends 7 Royalties 7 00 8 Net short-term capital gain (loss) 9 Net long-term capital gain (loss) 10 Net section 1231 gain (loss) 11 Other income (loss) (include detailed statement) 12 Section 179 expense deduction
4a Guaranteed payments: services 4b Guaranteed payments: capital 4b Guaranteed payments: capital 4b Guaranteed payments: capital 5 Interest income 6 Ordinary dividends 7 Royalties 7 Royalties 8 Net short-term capital gain (loss) 9 Net long-term capital gain (loss) 10 Net section 1231 gain (loss) 11 Other income (loss) (include detailed statement) 12 Section 179 expense deduction
4b Guaranteed payments: capital 4b 6222 00 622 5 Interest income 5 1400 00 140 6 Ordinary dividends 6 2000 00 200 7 Royalties 7 00 8 Net short-term capital gain (loss) 8 00 9 Net long-term capital gain (loss) 9 00 10 Net section 1231 gain (loss) 10 00 11 Other income (loss) (include detailed statement) 11 660 00 666
5 Interest income 5 14 0 0 0 14 0 0 0 0 0 0 0 0 0 0 0 0 0 0
6 Ordinary dividends 6 2000 00 2000 7 Royalties 7 00 8 Net short-term capital gain (loss) 8 00 9 Net long-term capital gain (loss) 9 00 10 Net section 1231 gain (loss) 10 00 11 Other income (loss) (include detailed statement) 11 660 00 660 12 Section 179 expense deduction 12
7 Royalties 7 00 8 Net short-term capital gain (loss) 8 00 9 Net long-term capital gain (loss) 9 00 10 Net section 1231 gain (loss) 10 00 11 Other income (loss) (include detailed statement) 11 660 00 66 12 Section 179 expense deduction 12 00
7 Royalties 7 00 8 Net short-term capital gain (loss) 8 00 9 Net long-term capital gain (loss) 9 00 10 Net section 1231 gain (loss) 10 00 11 Other income (loss) (include detailed statement) 11 660 00 66 12 Section 179 expense deduction 12 00
8 Net short-term capital gain (loss) 8 00 9 Net long-term capital gain (loss) 9 00 10 Net section 1231 gain (loss) 10 00 11 Other income (loss) (include detailed statement) 11 660 00 66 12 Section 179 expense deduction 12 00
9 Net long-term capital gain (loss) 9 00 10 Net section 1231 gain (loss) 10 00 11 Other income (loss) (include detailed statement) 11 660 00 660 12 Section 179 expense deduction 12 00
10 Net section 1231 gain (loss) 10 00 11 Other income (loss) (include detailed statement) 11 66 0 00 66 12 Section 179 expense deduction 12 00
11 Other income (loss) (include detailed statement) 11 660 00 12 Section 179 expense deduction 12 00
12 Section 179 expense deduction 12 0 0
13 Other expense deductions 13 1620 00 162
14 Total distributive share (See instructions) 14 6006662 00 600666
Part V. Supplemental Information
The owner filed Form PT-AGR Year The owner is a Domestic 2nd tier PTE
1 PTET paid on behalf of owner. (See instructions)
2 Montana composite income tax paid on behalf of owner 2
3a Montana income tax withheld on behalf of owner. (See instructions) 3a
3b Montana income tax withheld by a lower tier pass-through entity 3b
3c Add lines 3a and 3b. This is your total Montana income tax withheld on your behalf. 3c
4 Montana mineral royalty tax withheld 4
5 Other information. List type and amount 5
Part VI. Tax Credits
Code Credit Authorization Number Amount of Credit
1
2
Part VII. Montana Adjustments Detail: Enter the amount and code of each adjustment entered on Part 3. (See instructions)
1 Code 1AA 1500000 2 Code 2AA 1500000 3 Code 1SL 1700



6 Code

00

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17000 00

4 Code 2SL

5 Code



1 Code 1AA

4 Code 2SL

Montana Schedule K-1 (PTE)

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Name	Mark applicable boxes: Amended Schedule K-1 Part I. Pass-through Entity Information	Final Schedule K-1			
Name Pets Part				FFIN 2	01111111
Fig. Column Col	-			. 2	
Part II. Owner Information State P A ZIP Code 1 5 2 3 7 Beneficial Owner FINE The Profit and Issae P A ZIP Code 1 5 2 3 7 Beneficial Owner FINE The Profit and Issae P A ZIP Code 1 5 2 3 7 Beneficial Owner FINE The Profit and Issae P A ZIP Code 1 5 2 3 7 Beneficial Owner FINE The Profit and Issae		Ctato M T 7ID Codo	59602		
Name	and the second s	State M 1 ZIP Code	3 9 0 0 2		
Name				EEIN 1	00000022
Clay Pand Tagon State P A Z PCode 1 5 2 3 7 Beneficial Owner FEIN Owner FE	-			1 = 113	.00000022
Owner Type S Resident Nonresident Profit and loss percentage 4.00000 % Special Allocations (See instructions) Capital/Ownership 4.00000 % The corner is included in a PTET election (See instructions) The corner is included in a composite income tax return The corner is included in a composite income tax return The corner is included in a composite income tax return The corner is included in a composite income tax return The corner is included in a composite income tax return The corner is included in a composite income tax return The corner is included in a composite income tax return The corner is included in a composite income tax return The corner is included in a composite income tax return The corner tax included in a composite income tax return The corner where is a corner to corner t		0 . D 3 7100 l	1 5 2 2 7		
Special Allocations (See instructions) The owner is included in a PTET election Resident nowner PTET election (See instructions) Feed and towner is included in a composite income tax return Feed and towner is included in a composite income tax return Feed and towner is included in a composite income tax return Feed and towner is included in a composite income tax return Feed and towner is included in a composite income tax return Feed and towner is included in a composite income tax return Feed and towner is included in a composite income tax return Feed and towner is included in a composite income tax return Feed and towner is included in a composite income tax return Feed and towner is included in a composite income tax return Feed and towner is included in a composite income tax return Feed and towner is included in a composite income tax return Feed and towner is a composite income (Loss) Feed and towner is a composite income tax withheld on towner (See instructions) Feed and towner tax withheld on towner (See instructions) Feed and towner tax withheld on towner tax withheld on towner (See instructions) Feed and towner tax withheld on towner t	City Pendragon	State P A ZIP Code	15237		
Special Allocations (See instructions) The owner is included in a PTET election Resident owner PTET election (See instructions) The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is included in a composite income tax return The owner is a Domestic 2	Owner Type S Resident	Nonresident			
The owner is included in a PTET election See instructions Sesicient owner PTET election (see instructions See instruct	No. 10 Inches			Profit and loss percentage	4.0000 %
The owner is included in a composite income tax return				Capital/Ownership	4.0000 %
Name					
Part III. Montana Adjustments (See worksheet on page 9)	, Table 1				
Additions					
Subtractions 2 17000 00 00 00 00 00 00 0	Part III. Montana Adjustments (See worksheet	on page 9)	Eve		
Part IV. Distributive Share of Montana Source Income (Loss) 1 Ordinary business income (loss) 2 Net rental real estate income (loss) 3 Often ret rental in income (loss) 3 Often ret rental in income (loss) 4 Guaranteed payments: services 4a 000 5 Interest income 5 1400 00 6 Ordinary dividends 6 2000 00 7 Royalties 7 000 8 Net short-term capital gain (loss) 9 Net long-term capital gain (loss) 10 Net section 1723 (gain (loss) 10 Other income (loss) (include detailed statement) 11 Other income (loss) (include detailed statement) 12 000 13 Other expense deductions 14 Total distributive share (See instructions) Part V. Supplemental Information The owner filed Form PT-ACR Year The owner is a Domestic 2nd tier PTE 1 PTET paid on behalf of owner. (See instructions) 3 Montana income tax withheld on behalf of owner. (See instructions) 3 Montana income tax withheld on behalf of owner. (See instructions) 4 Montana mineral royalty tax withheld 5 Other information. List type and amount 5 000 Amount of Credit Authorization Number Fart V. Tax Credits Code Credit Authorization Number 6 000	1 Additions		1		
1 Ordinary business income (loss) 1 1 6000000 00 6000000 00 00 00 00 00 00 00	2 Subtractions		2	17000 00	17000 00
Net rental real estate income (loss)	Part IV. Distributive Share of Montana Source	Income (Loss)			
2 Net Petital and Sealar Informe (loss) 3 0 0 0 0 0 0 0 0 0	1 Ordinary business income (loss)		1	6000000 00	
4a Guaranteed payments: services 4a 00 6222 00 6222 00 65 00 65 00 60 00	2 Net rental real estate income (loss)		2	00	
Ab Guaranteed payments: services Ab Guaranteed payments: capital Ab	3 Other net rental income (loss)		3	00	00
4b Guaranteed payments: capital 4b 6222 00 6222 00 6222 00 65 1 1 4 00 00 1 4 00 00 00 1 1 4 00 00 00 00 00 00 00 00 00 00 00 00 0	4a Guaranteed payments: services		4a	00	
Solution			4b	6222 00	
7 Royalies 7 Royalies 7 00 00 00 00 00 00 00 00 00 00 00 00 0			5	1400 00	
Royalties	6 Ordinary dividends		6	2000 00	2000 00
8 Net short-term capital gain (loss) 8 00 00 9 Net long-term capital gain (loss) 9 00 00 10 Net section 1231 gain (loss) 10 00 00 11 Other incorne (loss) (include detailed statement) 11 660 00 660 00 12 Section 179 expense deduction 12 00 00 00 13 Other expense deductions 13 1 620 00 1620 00 14 Total distributive share (See instructions) 14 600 6662 00 600 6662 00 Part V. Supplemental Information The owner filed Form PT-AGR Year The owner is a Domestic 2nd tier PTE 1 PTET paid on behalf of owner. (See instructions) 1 00 2 Montana income tax withheld on behalf of owner. (See instructions) 3a 00 3a Montana income tax withheld on behalf of owner. (See instructions) 3a 00 3c Add lines 3a and 3b. This is your total Montana income tax withheld on your behalf. 3c 00 4 Montana mineral royalty tax withheld 4 00 5 Other information. List type and amount 5 00	The state of the s		7	00	00
9 Net long-term capital gain (loss) 9 00 00 00 10 Net section 1231 gain (loss) 10 00 00 00 11 Other income (loss) (include detailed statement) 11 660 00 660 00 12 Section 179 expense deduction 12 00 00 13 Other expense deduction 12 00 1620 00 14 Total distributive share (See instructions) 13 1620 00 1620 00 1620 00 1620 00 17 Total distributive share (See instructions) 14 6006662 00 6006662 00 1620 00 1			8	00	00
10 Net section 1231 gain (loss) 10 00 00 00 00 00 00 0			9	00	00
11 Other income (loss) (include detailed statement) 12 Section 179 expense deduction 13 Other expense deductions 13 1620 00 14 Total distributive share (See instructions) 14 Total distributive share (See instructions) 15 Other expense deductions 16 Other expense deductions 17 Total distributive share (See instructions) 18 Total distributive share (See instructions) 19 Terrowner filed Form PT-AGR			10	00	00
12 Section 179 expense deduction 12 00 13 Other expense deductions 13 1620 00			11	660 00	660 00
13 Other expense deductions 14 Total distributive share (See instructions) 14 Total distributive share (See instructions) Part V. Supplemental Information The owner filed Form PT-AGR Year The owner is a Domestic 2nd tier PTE 1 PTET paid on behalf of owner. (See instructions) 1 DOMESTIP 1 PTET paid on behalf of owner. (See instructions) 2 Montana composite income tax paid on behalf of owner. (See instructions) 3a Montana income tax withheld on behalf of owner. (See instructions) 3b Montana income tax withheld by a lower tier pass-through entity 3c Add lines 3a and 3b. This is your total Montana income tax withheld on your behalf. 3c Other information. List type 3d And amount 5 00 Part VI. Tax Credits Code Credit Authorization Number Amount of Credit			12	00	00
14 Total distributive share (See instructions) Part V. Supplemental Information The owner filed Form PT-AGR Year The owner is a Domestic 2nd tier PTE 1 PTET paid on behalf of owner. (See instructions) 2 Montana composite income tax paid on behalf of owner 3 Montana income tax withheld on behalf of owner. (See instructions) 3a Montana income tax withheld on behalf of owner. (See instructions) 3b Montana income tax withheld by a lower tier pass-through entity 3c Add lines 3a and 3b. This is your total Montana income tax withheld on your behalf. 4 Montana mineral royalty tax withheld 5 Other information. List type and amount 5 Other information. List type Amount of Credit Credit Authorization Number Amount of Credit			13	1620 00	1620 00
The owner filed Form PT-AGR Year The owner is a Domestic 2nd tier PTE 1 PTET paid on behalf of owner. (See instructions) 1 PTET paid on behalf of owner. (See instructions) 2 Montana composite income tax paid on behalf of owner 3 Montana income tax withheld on behalf of owner. (See instructions) 3 Montana income tax withheld by a lower tier pass-through entity 3 Montana income tax withheld by a lower tier pass-through entity 3 C Add lines 3a and 3b. This is your total Montana income tax withheld on your behalf. Montana mineral royalty tax withheld 5 Other information. List type and amount 5 Other information. List type Part VI. Tax Credits Code Credit Authorization Number Amount of Credit 0 0				6006662 00	6006662 00
The owner filed Form PT-AGR Year The owner is a Domestic 2nd tier PTE 1 PTET paid on behalf of owner. (See instructions) 2 Montana composite income tax paid on behalf of owner 3 Montana income tax withheld on behalf of owner. (See instructions) 3a Montana income tax withheld by a lower tier pass-through entity 3b Montana income tax withheld by a lower tier pass-through entity 3c Add lines 3a and 3b. This is your total Montana income tax withheld on your behalf. 4 OO 4 Montana mineral royalty tax withheld 5 Other information. List type and amount 5 OO Part VI. Tax Credits Code Credit Authorization Number Amount of Credit					
1 PTET paid on behalf of owner. (See instructions) 2 Montana composite income tax paid on behalf of owner 3 Montana income tax withheld on behalf of owner. (See instructions) 3 Montana income tax withheld by a lower tier pass-through entity 3 Montana income tax withheld by a lower tier pass-through entity 3 C Add lines 3a and 3b. This is your total Montana income tax withheld on your behalf. 4 OO 4 Montana mineral royalty tax withheld 5 Other information. List type and amount 5 OTHER TAX Credits Code Credit Authorization Number Amount of Credit		The owner is	a Domestic 2nd tier F	PTE	
2 Montana composite income tax paid on behalf of owner 3a Montana income tax withheld on behalf of owner. (See instructions) 3b Montana income tax withheld by a lower tier pass-through entity 3c Add lines 3a and 3b. This is your total Montana income tax withheld on your behalf. 4 00 4 Montana mineral royalty tax withheld 5 Other information. List type and amount 5 00 Part VI. Tax Credits Code Credit Authorization Number Credit Authorization Number Amount of Credit				1	00
3a Montana income tax withheld on behalf of owner. (See instructions) 3b Montana income tax withheld by a lower tier pass-through entity 3c Add lines 3a and 3b. 4 Montana mineral royalty tax withheld 5 Other information. List type and amount 5 Credit Authorization Number Amount of Credit 00 00 00 00 00 00 00 00 00				2	353268 00
3b Montana income tax withheld by a lower tier pass-through entity 3c Add lines 3a and 3b. This is your total Montana income tax withheld on your behalf. 4 Montana mineral royalty tax withheld 5 Other information. List type and amount 5 Code Credit Authorization Number Amount of Credit 00 00 00 00 00 00 00 00 00		tructions)		3a	00
3c Add lines 3a and 3b. 4 Montana mineral royalty tax withheld 5 Other information. List type Part VI. Tax Credits Code Credit Authorization Number Code 1 Credit Authorization Number Code Credit Authorization Number				3b	00
4 Montana mineral royalty tax withheld 5 Other information. List type and amount 5 00 Part VI. Tax Credits Code Credit Authorization Number Amount of Credit			na income tax withh		00
5 Other information. List type and amount 5 00 Part VI. Tax Credits Code Credit Authorization Number Amount of Credit		This is your total mortal			00
Part VI. Tax Credits Code Credit Authorization Number Amount of Credit	A STANDARD CONTRACTOR OF THE PROPERTY AND THE PROPERTY OF THE	and amount	5	00	00
Code Credit Authorization Number Amount of Credit		and amount	eri nama	otreon House e 4	
1		Credit Authorization Num	ber	An	nount of Credit
00		Ologic Addition Edition Hum		1 -0 /	



3 Code 1SL

6 Code

17000 00

00

15000 00

Part VII. Montana Adjustments Detail: Enter the amount and code of each adjustment entered on Part 3. (See instructions)

5 Code

15000 00

17000 00

2 Code 2AA



10 Net section 1231 gain (loss)

13 Other expense deductions

12 Section 179 expense deduction

11 Other income (loss) (include detailed statement)

Montana Schedule K-1 (PTE)

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable bo		ed Schedule K-1	Final	Schedule	e K-1			
Part I. Pass-th	rough Entity I	nformation						
Name Test	Partnershi	p 1 LLC					FEIN	201111111
Mailing Address	1793 Legen	dborn Way						
City Helena	ı		State	M T	ZIP Code	5 9 6 0 2		
Part II. Owner	Information							
Name Owne:	r Twenty-Th	iree						100000023
Mailing Address	2 Lancelot	Lane					or SSN	
City Pendra	agon		State	PA	ZIP Code	15237	Beneficial Owner FEIN	
							or SSN	
Owner Type	S	Resident		Nonresid	ent			
Special Allo	cations (See instruct	ions)					Profit and loss percentage	
The owner	is included in a PTE	Γ election					Capital/Ownership	4.0000 %
Resident ov	wner PTET election (See instructions)						
The owner	is included in a comp	oosite income tax returr	1					
							A	В
Part III. Monta	ına Adjustmen	ts (See workshee	et on pag	ge 9)		Ev	erywhere	Montana
1 Additions						1	15000 00	15000 00
2 Subtractions						2	17000 00	17000 00
Part IV. Distri	butive Share of	f Montana Sourc	e Incon	ne (Los	ss)			
 Ordinary busin 	ness income (loss)					1	6000000 00	6000000 00
Net rental real	l estate income (loss)					2	00	00
3 Other net rent	al income (loss)					3	00	00
4a Guaranteed p	ayments: services					4a	00	00
4b Guaranteed p	ayments: capital					4b	6222 00	6222 00
5 Interest incom	ie					5	1400 00	1400 00
6 Ordinary divid	ends					6	2000 00	2000 00
7 Royalties						7	00	00
8 Net short-term	n capital gain (loss)					8	00	00
9 Net long-term	capital gain (loss)					9	00	00
							0.0	0.0

14 Total distributive share (See instructions)	14
Part V. Supplemental Information	

The owner filed Form PT-AGR Year	The owner is a	Domestic 2n	d tier PTE	
1 PTET paid on behalf of owner. (See instructions)			1	00
2 Montana composite income tax paid on behalf of owner			2	00
3a Montana income tax withheld on behalf of owner. (See instruc	ctions)		3a	353793 00
3b Montana income tax withheld by a lower tier pass-through en			3b	00
3c Add lines 3a and 3b.		a income tax	withheld on your behalf. 3c	353793 00
4 Montana mineral royalty tax withheld			4	00
5 Other information. List type	and amount	5	00	00
Part VI. Tax Credits				

10

11

12

13

Part VI. Tax Credits Code	Credit Authorization Number	Amount of Credit
1		00
2		00

Part VII. Montana Adju	ustments Detail: Enter	the amount and code of each	adjustment entered on Par	t 3. (See instructions)
		0 0 1 0 7 7	15000 00	2 Codo 1 CT

				0	0-4-	277	15000.00	2	Codo	1SL	17000 00
1	Code	1AA	15000 00	2	Code	2 A A	15000 00	3	Code	топ	17000 00
4	Code	2 S L	17000 00	5	Code		00	6	Code		00



00

00

660 00

1620 00

600666200

00

00

660 00

1620 00

6006662 00



1

Montana Schedule K-1 (PTE)

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable boxes: Amended Schedule K-1 Part I. Pass-through Entity Information	Final Schedule K-1		
Name Test Partnership 1 LLC		FEIN	201111111
Mailing Address 1793 Legendborn Way			
City Helena	State M T ZIP Code	5 9 6 0 2	
Part II. Owner Information			
Name Owner Twenty-Four		FEIN	
Mailing Address 2 Lancelot Lane		or SSN	100000024
City Helena	State M T ZIP Code	5 9 6 0 2 Beneficial Owner FEIN	
,		or SSN	
Owner Type I X Resident	Nonresident		
Special Allocations (See instructions)		Profit and loss percentag	e 1.0000 %
The owner is included in a PTET election		Capital/Ownershi	p 1.0000 %
Resident owner PTET election (See instructions)			
The owner is included in a composite income tax return			
		A	В
Part III. Montana Adjustments (See worksheet	on page 9)	Everywhere	Montana

		A	
Part III. Montana Adjustments (See worksheet on page	9)	Everywhere	Montana
1 Additions	1	3750 00	00
2 Subtractions	2	4250 00	00
Part IV. Distributive Share of Montana Source Income	(Loss)		
1 Ordinary business income (loss)	1	1500000 00	00
2 Net rental real estate income (loss)	2	00	00
3 Other net rental income (loss)	3	00	00
4a Guaranteed payments: services	4a	00	00
4b Guaranteed payments: capital	4b	1555 00	00
5 Interest income	5	350 00	00
6 Ordinary dividends	6	500 00	00
7 Royalties	7	00	00
8 Net short-term capital gain (loss)	8	00	00
9 Net long-term capital gain (loss)	9	00	00
10 Net section 1231 gain (loss)	10	00	00
11 Other income (loss) (include detailed statement)	11	165 00	00
12 Section 179 expense deduction	12	00	00
13 Other expense deductions	13	405 00	00
14 Total distributive share (See instructions)	14	1501665 00	00
Part V. Supplemental Information			
=	The annual a Demantic O	and tion DTC	

Part V. Supplemental Informatio	n				
The owner filed Form PT-AGR	Year The owner is	s a Domestic 2nd tier PTE			
1 PTET paid on behalf of owner. (See inst	tructions)		1		00
2 Montana composite income tax paid on	behalf of owner		2		00
3a Montana income tax withheld on behalf	of owner. (See instructions)		3a		00
3b Montana income tax withheld by a lower	r tier pass-through entity		3b		00
3c Add lines 3a and 3b.		ana income tax withheld on your beha	lf. 3c		00
4 Montana mineral royalty tax withheld			4		00
5 Other information. List type	and amount	5	00		00
Part VI. Tax Credits					
Code	Credit Authorization Nun	nber		Amount of Credit	
1					00

2										00
Par	Part VII. Montana Adjustments Detail: Enter the amount and code of each adjustment entered on Part 3. (See instructions)									
		1AA	3750 00				4250 00			00
4	Code		00	5	Code		00	6	Code	00





Code

Montana Schedule K-1 (PTE)

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable boxes: Amended Schedule K- Part I. Pass-through Entity Information Name Test Partnership 1 LLC Mailing Address 1793 Legendborn Wa			FEIN 2	01111111
City Helena	State M T ZIP Code	5 9 6 0 2		
Part II. Owner Information				
Name Owner Twenty-Five			FEIN	
Mailing Address 2 Lancelot Lane			or SSN 1	00000025
City Helena	State M T ZIP Code	5 9 6 0 2	Beneficial Owner FEIN	
,			or SSN	
Owner Type I X Resid	lent Nonresident			
Special Allocations (See instructions)			Profit and loss percentage	7.0000 %
The owner is included in a PTET election			Capital/Ownership	7.0000 %
Resident owner PTET election (See instruction	ns)			
The owner is included in a composite income to	8°C			
The entire is included in a composite most to		Δ		В

		A	
Part III. Montana Adjustments (See worksheet on page	e 9)	Everywhere	Montana
1 Additions	1	26250 00	00
2 Subtractions	2	29750 00	00
Part IV. Distributive Share of Montana Source Income	e (Loss)		
1 Ordinary business income (loss)	1	10500000 00	00
2 Net rental real estate income (loss)	2	00	00
3 Other net rental income (loss)	3	00	00
4a Guaranteed payments: services	4a	00	00
4b Guaranteed payments: capital	4b	10888 00	00
5 Interest income	5	2450 00	00
6 Ordinary dividends	6	3500 00	00
7 Royalties	7	00	00
8 Net short-term capital gain (loss)	8	00	00
9 Net long-term capital gain (loss)	9	00	00
10 Net section 1231 gain (loss)	10	00	00
11 Other income (loss) (include detailed statement)	11	1155 00	00
12 Section 179 expense deduction	12	00	00
13 Other expense deductions	13	2835 00	00
14 Total distributive share (See instructions)	14	10511658 00	00
Part V. Supplemental Information			
	The summation Demontis	and tion DTE	

i are v. ouppiomontal imonitation				
The owner filed Form PT-AGR	Year The owner is	a Domestic 2nd tier	PTE	
1 PTET paid on behalf of owner. (See inst	tructions)		1	00
2 Montana composite income tax paid on			2	00
3a Montana income tax withheld on behalf	of owner. (See instructions)		3a	00
3b Montana income tax withheld by a lower			3b	00
3c Add lines 3a and 3b.		a income tax with	held on your behalf. 3c	00
4 Montana mineral royalty tax withheld	•		4	00
5 Other information. List type	and amount	5	00	00
Part VI. Tax Credits				
Code	Credit Authorization Numi	ber	Amo	unt of Credit

2								00
Par	t VII. N	/lontana Ad	justments Detail: Enter the	ne an	nount ar	d code of	each adjustment entered on Part 3. (See instructions)	
		1AA	26250 00			1 S L	29750 00 3 Code	00
4	Code		00	5	Code		00 6 Code	00



00



Code

Montana Schedule K-1

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Amended Schedule K-1 Final Schedule K-1 Mark applicable boxes: Part I. Pass-through Entity Information **FEIN** 201111111 Name Test Partnership 1 LLC Mailing Address 1793 Legendborn Way 59602 ZIP Code MT City Helena Part II. Owner Information FEIN Name Owner Twenty-Six or SSN 100000026 Mailing Address 2 Lancelot Lane 59602 Beneficial Owner FEIN M T ZIP Code City Helena or SSN X Resident Nonresident Owner Type 5.0000 % Profit and loss percentage Special Allocations (See instructions) Capital/Ownership 5.0000 % The owner is included in a PTET election Resident owner PTET election (See instructions) The owner is included in a composite income tax return B Montana Everywhere Part III. Montana Adjustments (See worksheet on page 9) 00 18750 00 1 Additions 21250 00 00 2 2 Subtractions Part IV. Distributive Share of Montana Source Income (Loss) 7500000000 00 1 1 Ordinary business income (loss) 00 00 2 2 Net rental real estate income (loss) 00 00 3 3 Other net rental income (loss) 00 00 4a 4a Guaranteed payments: services 7777 00 00 4b 4b Guaranteed payments: capital 00 5 1750 00 5 Interest income 00 6 2500 00 6 Ordinary dividends 00 7 00 7 Royalties 8 00 00 8 Net short-term capital gain (loss) a 00 00 9 Net long-term capital gain (loss) 00 00 10 10 Net section 1231 gain (loss) 825 00 00 11 11 Other income (loss) (include detailed statement) 00 00 12 12 Section 179 expense deduction 00 13 2025 00 13 Other expense deductions 00 14 7508327 00 14 Total distributive share (See instructions) Part V. Supplemental Information The owner is a Domestic 2nd tier PTE The owner filed Form PT-AGR Year 00 1 PTET paid on behalf of owner. (See instructions) 00 2 2 Montana composite income tax paid on behalf of owner

00 3a Montana income tax withheld on behalf of owner. (See instructions) 3a 3b 00 3b Montana income tax withheld by a lower tier pass-through entity 00 This is your total Montana income tax withheld on your behalf. 3c 3c Add lines 3a and 3b. 00 4 Montana mineral royalty tax withheld 00 00 and amount 5 5 Other information. List type Part VI. Tax Credits

1 2

Credit Authorization Number

Part VII. Montana Adjustments Detail: Enter the amount and code of each adjustment entered on Part 3. (See instructions)

1 Code 1AA 1875 00 2 Code 1SL 2125000 3 Code 00
4 Code 00 5 Code 00 6 Code 00



00

00

Amount of Credit



2024 Interest on Underpayment of Estimated Tax for Composite Tax and Pass-Through Entity Tax

Form EST-PTI V1 8/2024

15-30-2512, MCA

Pass-Through Entity Name		
Test Partnership 1 LLC	EIN	2 0 1 1 1 1 1 1 1
Part I. Required Pass-Through Entity Tax and/or Composite Tax Annual F	ayr	nent
1 2024 pass-through entity tax and/or composite tax liability from Form PTE, lines 25 and 28.	1	3268007
2 Multiply line 1 by 90% (0.90)	_ 2	2941206
3a 2024 total flow-through payments applied to	1	
pass-through entity tax and/or composite tax liability from		
Form PTE, lines 26 and 29 3a 5550	4	
3b Overpayment from 2023 Form PTE, line 46, applied to		
pass-through entity tax and/or composite tax 3b	_	
3 Add lines 3a and 3b.	3	5550
4 Subtract line 3 from line 1. If the result is less than \$500, stop here.		
You do not owe interest on your underpayment of estimated taxes.	4	3262457
5 2023 pass-through entity tax and/or composite tax liability from Form PTE, line 30	5	3855150
6 Enter the lesser of line 2 or line 5. This is your required annual payment	. 6	2941206
Part II. Underpayment of Estimated Tax – Short Method		
You can use this method if you did not make estimated tax payments or you made four equal the required due dates.	estin	nated tax payments by
1 Estimated tax payments made for tax year 2024 for pass-through entity tax and/or		
composite tax	1	
2 Add line 1 and Part I, line 3	2	5550
3 Subtract line 2 from Part I, line 6. If the result is zero or less, stop here; you do not owe interest		
on the underpayment of your estimated taxes. This is your total underpayment for 2024	. 3	2935656
4 Multiply line 3 by 0.046685	4	137051
5 If the amount on line 3 was paid on or after March 17, 2025, enter zero. If the amount on		
line 3 was paid before March 17, 2025, multiply the number of days the amount was paid		
before March 17, 2025, by line 3. Then, multiply the result by 0.000219.	5	
6 Subtract line 5 from line 4. Enter here and on Form PTE, line 31.		
This is your interest on the underpayment of estimated taxes	. 6	137,051

Part III. Regular Method
Use this method if you made payments of unequal amounts. The due dates shown are for calendar year taxpayers.
Adjust these dates accordingly for fiscal year filers.

Adjust triese dates accordingly for liscal year lifers.	Α	В	C	D
	4/15/2024	6/17/2024	9/16/2024	1/15/2025
Complete lines 1 through 4 in ea	ch column bei	ore going to lin	ne 5.	
1 Divide Part I, line 6, by four and enter the result				
in each column. If using the annualized method,				
enter Part IV, line 22.	735302	735302	735302	735302
2 Divide Part I, line 3a, by four and enter the result in				
	2 1388		1388	1388
3 Subtract line 2 from line 1	733914	733914	733914	733914
4 Amount of estimated tax paid by the date in each column.				
Include the amount from Part I, line 3b in Column A.	4	0	0	0
Complete lines 5 through 11 of one co	olumn before g	oing to the nex	kt column.	
5 Overpayment from the previous period, if any, from				
line 11 of the previous column	5	0	0	0
6 Add lines 4 and 5.				
This is your estimated payment for the period.	6 (0	0	0
7 Add lines 9 and 10 from the previous column.				
This is your total underpayment to date.	7	733914	1467828	2201742
8 Subtract line 7 from line 6. If zero or less enter 0.	8 (0	0	0
9 If the amount on line 8 is zero, subtract line 6 from line 7.				
Otherwise, enter 0.				
This is the underpayment from the previous period.	9	733914	1467828	2201742
10 If line 8 is equal to or less than line 3, subtract line 8		-		
from line 3. If line 8 is greater than line 3, go to line 11.				
This is the current period underpayment.1	0 733914	733914	733914	733914
11 If line 3 is less than line 8, subtract line 3 from line 8.				
Then go to line 5 in the next column.				
This is the overpayment for period. 1	1	0	0	0
Complete lines 12 through 14 of the colu	mns where the	ere is an amou	nt on line 10.	
12 Date(s) you paid the amount on line 10 or				
March 17, 2025, whichever is earlier (See instructions) 1	2 03/17/2025	03/17/2025	03/17/2025	03/17/2025
13 Number of days from the installment due date to the				
date shown on line 12 (See instructions)	3 336	273	182	61
14 Multiply line 10 by line 13.				
Then, multiply the result by 0.000219	4 54004	The second secon	29252	9804
15 Add the amounts on line 14 in each column. Enter here	and on Form PT	E, line 31.		
This is your interest	st on underpa	ment of estim	ated taxes. 15	136940
•				

Part IV. Annualized Income Installment Method Worksheet

If you marked the box on Form PTE, line 21, you must include Part IV with your Form PTE. Complete each column beginning with Column A through line 22 before completing the next column.

Annualized Method –		A 1/1/24 to	B 1/1/24 to	C 1/1/24 to	D 1/1/24 to
Interest on Underpayment of Estimated Tax		3/31/24	5/31/24	8/31/24	12/31/24
1 Annualization amounts	1 [4	2.4	1.5	1
2 Total federal income	2				
3 Multiply line 2 by line 1	3				
4 Total federal deductions	4				
5 Multiply line 4 by line 1	5				
6 Subtract line 5 from line 3	6				
7 Montana additions for each period	7				
8 Multiply line 7 by line 1	8				
9 Montana subtractions for each period	9				
10 Multiply line 9 by line 1	10				
11 Add lines 6 and 8, then subtract line 10	11				
12 Montana apportionment factor for each period					
(See instructions)	12				
13 Multiply line 12 by line 11	13				
14 Pass-through entity tax and/or composite tax					
for each period (See instructions)	14				
15 Applicable percentage	15	22.5%	45%	67.5%	90%
16 Multiply line 15 by line 14	16				
17 Enter total of the amount in all previous columns of					
line 22	17				
18 Subtract line 17 from line 16. If zero or less, enter 0.	18				
19 Divide Part I, line 6, by four and enter the result in					
each column	19				
20 Subtract line 22 of the previous column from line 21					
of that column	20				
21 Add lines 19 and 20	21				
22 Enter the lesser of line 18 or line 21 here and on Part III,					
line 1. These are the PTE's required installment					
payments for the tax year.	22 [

Instructions for 2024 Interest on Underpayment of Estimated Tax for Composite Tax and Pass-Through Entity Tax

Purpose

Use Form EST-PTI to determine if you owe interest for underpaying your estimated tax, and if you do, to figure the amount of the interest due. You can use the form to figure your interest and include the amount on your tax return. Most taxpayers do not need to include this form with their Form PTE because the department will figure the underpayment interest for you. However, if you used the annualized income installment method to figure your estimated payments, you must include Part IV with your Form PTE.

2025 Interest Rate

Each year the interest rate for taxes not paid when due, including estimated tax payments, is updated based on the underpayment interest rate established by the Internal Revenue Service under IRC 6621 for the third quarter of the preceding year.

As of January 1, 2025, the interest rate is 8 percent. Interest accrues daily on the unpaid tax from the original due date of the return regardless of when the taxpayer filed the return. The daily rate is 0.0219 percent (0.000219).

If you use the Short Method in Part II to determine your interest on underpayment of estimated taxes, the interest rate for 2025 is 4.6685 percent (0.046685).

Interest on the Underpayment of Estimated Tax

You must pay estimated taxes if you elect to pay pass-through entity tax (PTET) or composite tax. Generally, you may owe interest on the underpayment of estimated tax if you did not make the required quarterly payments of at least 90% of your current year income tax liability (after applying any withholding and/or tax credits) or 100% of your previous year income tax liability (after applying any withholding and/or tax credits).

Interest is figured separately for each installment due date. Therefore, you may owe interest for an earlier due date even if you paid enough tax later to make up the underpayment. This is true even if you are due a refund when you file your tax return. However, you may be able to reduce or eliminate the interest by using the annualized income installment method.

Exceptions to Interest on the Underpayment of Estimated Tax

You are not required to make estimated tax payments, and, therefore, not subject to pay interest on the underpayment of estimated tax if any of the following conditions apply to you:

- It is the first year you are making an election to pay composite tax.
- It is the first year you are making an election to pay PTET.
- Your 2023 tax period covered 12 months and your Montana PTET and/composite tax liability was zero.
- Your 2024 income tax liability after PTET credits and/or pass-through withholding is less than \$500. To determine whether your tax due is less than \$500, complete Part I, lines 1 through 4.
- You were not required to file a 2023 Montana income tax return.
- At least two-thirds of your gross income is derived from farming or ranching operations.

Additionally, you are not required to make estimated tax payments of pass-through withholding. Do not report any amounts of pass-through withholding to calculate your interest on the underpayment of estimated taxes.

Part I. Required Annual Payment

Complete lines 1 through 6 to figure the payment amount you were required to make for the tax year. You must complete this section before completing any other parts of this form.

Only report amounts of PTET and composite tax. Do not report any amounts paid for pass-through withholding.

If you file an amended return, use the amounts shown on your original return to figure your underpayment.

Part II. Underpayment of Estimated Tax – Short Method

You may use the short method to determine your interest on the underpayment of estimated tax if your taxable year was 12 full months and one of the following conditions applies to you:

- You did not make estimated tax payments (in other words, your only payments were Montana flow-through payments); or
- You made four equal estimated payments by the required due dates.

Line 1 – 2024 Estimated Tax Payments. Only enter the estimated tax payments for PTET and/or composite tax included on Form PTE, line 21. Do not enter any amounts designated for pass-through withholding.

Line 4 – Underpayment of Estimated Tax
Payments Short Method Interest Rate. Multiply
your underpayment on line 3 by the 2024
underpayment interest rate for the short method.
The rate is the average number of days between
each of all four periods multiplied by the current
year's interest rate.

Part III. Regular Method

Use the regular method if you are not eligible to use the short method. You must use the regular method if you made payments of unequal amounts and/or you made the payments after the due dates.

If you are using the annualized method, complete Part IV before completing this section.

Line 1. Enter the amount of your required installment for each due date shown in each column heading in Columns A through D. For most taxpayers, this is one-fourth of the required annual payment in Part I, line 6. If you are using the annualized method, report the amounts from Part IV. line 22.

Line 4. Enter the amount of estimated tax payments made for the tax year.

In Column A, enter the payments you made by April 15, 2024, and any overpayments applied from your 2023 return. In Column B, enter the payments made after April 15, 2024, through June 17, 2024. In Column C, enter the payments made after June 17, 2024, through September 16, 2024. In Column D, enter the payments made after September 16, 2024, through January 15, 2025.

If you are applying an overpayment from 2023 and the payment was made after March 17, 2024, treat the payment as if it were made on the date of the payment. For example, you paid \$600 in tax due on your 2023 return on July 2, 2024. You amended the return and were due a \$400 refund. You elected to apply this to your 2024 estimated payments. The \$400 overpayment is treated as paid on July 2, 2024. This amount is entered in Column B.

Line 10. If this line is zero for all payment periods, you do not owe interest on your underpayment.

Lines 12 through 15. Complete these lines to figure your interest for each period by applying the appropriate rate to each underpayment on line 10. Interest is figured for the number of days that each underpayment remains unpaid.

Line 12. Your payments are applied first to any underpayment balance on an earlier required installment regardless of if it is designated for a different period. If more than one payment was applied to fully pay the underpayment amount on line 10 in a particular column, enter the date(s) and amount(s) applied up to the underpayment amount. If a payment was more than the underpayment amount, enter the excess in the next column with the same date.

For example, you had a \$500 underpayment after making your first period payment, due April 15. Your second period payment, due June 17, is \$1,200. You make a \$1,200 payment on June 10. The first \$500 of this payment is applied to your first period underpayment. The interest for the first period is figured from April 15 to June 10 (56 days). The remaining \$700 is applied to your second period payment.

Line 13. If more than one payment was applied to an underpayment on line 10, enter the number of days each payment was late.

For example, you made payments on April 30, 2024, and June 17, 2024. Enter April 30, 2024, and June 17, 2024 in Column A, line 12. Then enter "15" (the number of days between April 15, 2024, and April 30, 2024) and "63" (the number of days between April 15, 2024, and June 17, 2024) in Column A, line 13.

Line 14. If more than one payment was required to fully satisfy an underpayment amount, make a separate computation for each payment. If you filed your tax return by January 31 and paid the amount due in full, as computed on your tax return, there is no underpayment interest penalty calculated on the fourth installment payment. Enter \$0 in Column D.

Part IV. Annualized Income Installment Method

If you mark the annualized method box on Form PTE, line 21, you must include Part IV with your return.

If your income varied throughout the year because, for example, you operated your business on a seasonal basis or had a large capital gain late in the year, you may be able to lower or eliminate the amount of one or more required installments by using the annualized income installment method.

Part IV is used to calculate the amount of each required installment payment.

If you use Part IV for any payment due date, you must use it for all payment due dates.

Line 1. Line 1 reports the annualization amounts used to determine the amounts for estimated tax. These are the amounts required by law to be used in determining the annualized income and tax using when using this method (15-30-2512(4), MCA).

Line 2. Report the estimated total federal income for each period. Report the amount cumulatively. For example, if the PTE earned \$55,000 from January 1 to March 31, and \$25,000 from April 1 to May 31, report \$55,000 in Column A and \$80,000 in Column B.

Lines 7 and 9. Report any Montana additions and subtractions for each period cumulatively. See Form PTE instructions for the list of Montana additions and subtractions.

Line 12. Complete Form PTE, Schedule I for each period to determine the apportionment factor for each period.

Line 14. If you made a pass-through entity tax election, multiply the amount on line 13 in each column by 5.9 percent (0.059). If you made a composite tax election, complete Form PTE, Schedule IV for each period.

Line 22. This line reports the lesser of the default estimated payment determined, i.e. the amount determined under the annualization method or the amount required under the regular method.

Administrative Rules of Montana:

Title 42 Chapter 15 Subchapter 3

Questions? Call us at (406) 444-6900, or Montana Relay at 711 for the hearing impaired.

Apportionable Income Worksheet

This Worksheet must be filed with the return. Use this worksheet to segregate the PTE's income per income type for lines 16b, 16c, and 16d, and determine the PTE's income that is apportioned to Montana (Column G) before adjustments. The PTE must include the amounts from Column G on the Montana Source Income Schedule. Column D.

apportioned to Montana (Column G) before adjustments. The PTE must include the amounts from Column G on the Montana Source Income Schedule, Column D.	nents. The PTE mus	st include the amou	ints from Colur	nn G on the Montana	Source Income Scr	redule, Column D.	
	A	B (line 16b)	C (line 16c)	D (line 16d)	Ш	ц	9
	Federal Schedule	Federal Schs K-1	DERs	Nonapportionable	Apportionable	Apportionment	Income apportioned to
	×			income	Income	factor from Sch I,	MT (E x F)
					(A - B - C - D)	Line 5	
1 Ordinary buiness income (loss)	\$ 150,000,000	\$ 222,222			\$ 149,777,778	100.0000%	\$ 149,777,778
2 Net rental real estate income (loss)	- \$				\$ -	100.0000%	\$ -
3 Other net rental income (loss)	- \$				- \$	100.000%	- \$
4a Guaranteed Payments - Services	- \$				÷	100.000%	÷ \$
4b Guaranteed Payments - Capital	\$ 155,540				\$ 155,540	100.000%	\$ 155,540
5 Interest income	\$ 35,000				\$ 35,000	100.0000%	\$ 35,000
6 Ordinary dividends	000'05 \$				\$ 50,000	100.0000%	\$ 50,000
7 Royalties	- \$				- \$	100.0000%	÷ .
8 Net short-term capital gain (loss)	- \$				- \$	100.0000%	- \$
9 Net long-term capital gain (loss)	- \$				- \$	100.0000%	\$
10 Net §1231 gain (loss)	- \$				- \$	100.0000%	\$.
11 Other income (loss)	\$ 16,500				\$ 16,500	100.0000%	\$ 16,500
12 §179 expense deduction apportionable and/or							
allocable to MT	\$				\$	100.0000%	\$
13 Other expense deductions apportionable					41		
and/or allocable to MT	\$ 40,500				\$ 40,500	100.000%	\$ 40,500
14 Total	\$ 150,216,540	\$ 222,222	\$ -	\$	\$ 149,994,318	100.000% \$	\$ 149,994,318

Case 2: Form PTE (Partnership)

Test Partnership 2 is operating in multiple states, including Montana. The company is filing a timely refund return on extension. The company is making both a Pass-through Entity Tax (PTET) Election and a Resident Pass-through Entity Tax (Resident PTET) Election. Pay special attention to resident owners on the Montana Schedules K-1 in relation to the Resident PTET election.

The company has one \$5,000 Tentative payment. The company is also receiving Mineral Royalty Withholding credit of \$3,000, Pass-through Withholding credit of \$11,000 and a Pass-through Entity Tax credit of \$20,000. (A mistake was made and associated income from the credits was not included within the case. Assume the credits do not have associated income) This return will ultimately be in a refund position.

Any field in the following case that is highlighted in Orange requires a calculated value

Forms/Information Provided by DOR:

Schedule K Information

Forms Required to be Provided by Vendors:

Montana:

- Apportionable Income Worksheet
- Form PTE
- Flow-through Payment Schedule
- Schedule I
- Schedule II
- Schedule IV
- Schedule VI
- Schedule VII
- Schedule DE
- Montana Adjustments Worksheet
- Schedule MTSI
- Montana Schedules K-1

Required Attachments:

Example PDF attachment (PDF stating "Attachment Example")

Taxpayer Information:

Test Partnership 2 LLC

763 Lambda Ave, APT H3

Lykos, MS 72016

FEIN:

20-222222

State Formed in:

Mississippi

MT Secretary of State ID: M3824120 Schedules DE Included:

Date Formed:

01/28/2014

Federal Business Code/NAICS:

541715 7/15/2014

Date registered in MT: Schedules K-1 Received:

Federal:

Form 1065

Schedule K



2024 Montana Pass-Through Entity Tax Return Include a complete copy of all related federal forms and schedules. Partnership X S corporation

Form PTE 2024v1 5/2024

Mark all that apply: Initial return		For calendar year 2024 or tax year b	eginning 0 1 0 1 2 0 2 4	and ending	12312024	1
Initial Feature Test Partnership 2 LLC Feature Feature Subsess CookeNAICS 5 4 7 1 5 MT Secretary of State ID # M 3 a 2 4 1 2 0 1 4 4 7 5 2 0 1 4 4 7 5 2 0 1 4 4 7 5 2 0 1 4 4 7 7 5 0 1 4 4 7 7 7 7 7 7 7 7	Mark all that anniv		ogg			
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Resident PTETE Enter Number of Resident Owners 2 Schedules DE Included 1		пуков	School Catalogata - AutoMiddle			
Nowners' Distributive Share of Income Items (federal Schedule K) 1		Enter Number of: Schedules K-1 Included	5 Nonresident Owners	2	Schedules DE Inclu	ded 1
1 Ordinary business income (loss)	/ Resident FILT		-			
1 1 2 2 2 2 2 3 3 3 3 3		Testasti Swillia	T Sales Types of Sales			
1 1 2 2 2 2 2 3 3 3 3 3	Owners' Distrib	utive Share of Income Items (federal Sc	hedule K)			
2 Nate retail areal estatile income (loss) (include federal Form 8825) 3a Capher gross rental income (loss) (include detailed statement) 3b 00 3 Subtract line 3b from line 3a 7bis is your other net rental income or loss. 3 (a Guaranteed payments: Senvices 4a 5755 0 0 40 4100 00 4100 00					1	400000 00
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16b Total everywhere income (loss) from federal Schedules K-1 16c Total everywhere income (loss) from disregarded entities 16c 345000 16d Other nonapportionable income (loss) from the PTE's own activities 16d 575000 16 Add lines 16a through 16d. This is your deductions including nonapportionable income. 16 920000 17 Add lines 14 and 15, then subtract line 16. 17 50094900 18 Mark the box that describes your business activity or enter your apportionment factor. 100% Montana activity 0% Montana activity 35.0000 % Apportionment factor x line 17 18 175332 00 19a Total Montana source income received from pass-through entities (Montana source income from MT Schedules K-1 issued to this entity) 19a 00 19b Total Montana source income from Schedules VII 19b 1627 00 19c Nonapportionable income allocated to Montana. (See instructions) 19c 5750 00 19 Add lines 19a through 19c. This is the total nonapportionable income (loss) sourced to Montana. 19 7377 00			16a	0.0)	
16c Total everywhere income (loss) from disregarded entities 16d Other nonapportionable income (loss) from the PTE's own activities 16d 5750 00 16 Add lines 16a through 16d. 17 500949 00 18 Mark the box that describes your business activity or enter your apportionment factor. 100% Montana activity 0% Montana activity 35.0000 % Apportionment factor x line 17 18 175332 00 19a Total Montana source income received from pass-through entities (Montana source income from MT Schedules K-1 issued to this entity) 19a 00 19b Total Montana source income from Schedules VII 19b 1627 00 19c Nonapportionable income allocated to Montana. (See instructions) 19c 5750 00 19 Add lines 19a through 19c. This is the total nonapportionable income (loss) sourced to Montana. 19			16b	0.0)	
16d Other nonapportionable income (loss) from the PTE's own activities 16d 5750 00 16 Add lines 16a through 16d. 17 Add lines 14 and 15, then subtract line 16. 18 Mark the box that describes your business activity or enter your apportionment factor. 100% Montana activity 10% Montana activity 10% Montana activity 10% Montana activity 19a Total Montana source income received from pass-through entities (Montana source income from MT Schedules K-1 issued to this entity) 19b Total Montana source income from Schedules VII 19c Nonapportionable income allocated to Montana. (See instructions) 19c Add lines 19a through 19c. 19d Total Montana. 19 19d 7377 00				3450 00)	
16 Add lines 16a through 16d. This is your deductions including nonapportionable income. 16 9200 00 17 Add lines 14 and 15, then subtract line 16. 18 Mark the box that describes your business activity or enter your apportionment factor. 100% Montana activity 0% Montana activity 35.0000 % Apportionment factor x line 17 18 175332 00 19a Total Montana source income received from pass-through entities (Montana source income from MT Schedules K-1 issued to this entity) 19a 00 19b Total Montana source income from Schedules VII 19c Nonapportionable income allocated to Montana. (See instructions) 19c 5750 00 19 Add lines 19a through 19c. This is the total nonapportionable income (loss) sourced to Montana. 19			16d	5750 00)	
17 Add lines 14 and 15, then subtract line 16. 18 Mark the box that describes your business activity or enter your apportionment factor. 100% Montana activity 0% Montana activity 35.0000 4Apportionment factor x line 17 18 175332 00 19a Total Montana source income received from pass-through entities (Montana source income from MT Schedules K-1 issued to this entity) 19b Total Montana source income from Schedules VII 19c Nonapportionable income allocated to Montana. (See instructions) 19c 5750 00 19 Add lines 19a through 19c. This is the total nonapportionable income (loss) sourced to Montana. 19		· · · · · · · · · · · · · · · · · · ·		oortionable income	. 16	9200 00
18 Mark the box that describes your business activity or enter your apportionment factor. 100% Montana activity 0% Montana activity 35.0000 4Apportionment factor x line 17 18 175332 00 19a Total Montana source income received from pass-through entities (Montana source income from MT Schedules K-1 issued to this entity) 19a 00 19b 1627 00 19c 5750 00 19 Add lines 19a through 19c. This is the total nonapportionable income (loss) sourced to Montana. 19 7377 00		•				500949 00
100% Montana activity 0% Montana activity 3 5 . 0 0 0 0 % Apportionment factor x line 17 18 175332 00 19a Total Montana source income received from pass-through entities (Montana source income from MT Schedules K-1 issued to this entity) 19a 00 19b Total Montana source income from Schedules VII 19b 1627 00 19c Nonapportionable income allocated to Montana. (See instructions) 19c 5750 00 19 Add lines 19a through 19c. This is the total nonapportionable income (loss) sourced to Montana. 19 7377 00			nment factor.			
19a Total Montana source income received from pass-through entities (Montana source income from MT Schedules K-1 issued to this entity) 19a 19b 1627 00 19c Nonapportionable income allocated to Montana. (See instructions) 19c This is the total nonapportionable income (loss) sourced to Montana. 19 7377 00		The state of the s		or x line 17	18	175332 00
(Montana source income from MT Schedules K-1 issued to this entity) 19b Total Montana source income from Schedules VII 19c Nonapportionable income allocated to Montana. (See instructions) 19c 5750 00 19 Add lines 19a through 19c. This is the total nonapportionable income (loss) sourced to Montana. 19						
19b Total Montana source income from Schedules VII 19b 1627 00 19c Nonapportionable income allocated to Montana. (See instructions) 19c 5750 00 19 Add lines 19a through 19c. This is the total nonapportionable income (loss) sourced to Montana. 19 7377 00			ty) 19a	00)	
19c Nonapportionable income allocated to Montana. (See instructions) 19c 5750 00 19 Add lines 19a through 19c. This is the total nonapportionable income (loss) sourced to Montana. 19 7377 00	(3)			1627 00)	
19 Add lines 19a through 19c. This is the total nonapportionable income (loss) sourced to Montana. 19 73 77 00			19c			
0.0	147.0		otal nonapportionable income (loss) s	ourced to Montana	a. 19	7377 00
		9				182709 00



Name Test Partnership 2 LLC	FEIN 2 0	2 2 2 2 2 2 2
Prepayments		
21 2024 payments Mark this box if you made estimated payments using t		5000 00
22 2023 overpayment applied to 2024	22	00
23 Add lines 21 and 22.	Total prepayments 23	5000 00
Pass-through Entity Tax, Composite Tax, and Pass-Through Wit		
24 Total taxable income subject to pass-through entity tax from all owners' MT Schedules	K-1, Part IV, line 14 (see instructions) 24	268100 00
25 Total pass-through entity tax from all owners' MT Schedules K-1, Part V, line 1	25	15818 00
26 Flow-Through Payments Schedule, Column A, line 12	26	32950 00
27 Subtract lines 23 and 26 from line 25.	ass-through entity tax due or (overpayment). 27	-22132 00
28 Total composite tax from Schedule IV, Column H	28	00
29 Flow-Through Payments Schedule, Column B, line 12	29	1050 00
30 Add lines 27 and 28, then subtract line 29. Composite tax and page 1	ass-through entity tax due or (overpayment). 30	-22794 00
31 Interest on underpayment of estimated tax (see instructions)	31	00
32 Total pass-through withholding from all owners' MT Schedules K-1, Part V, line 3a	32	00
33 PTE's tax liability resulting from an adjustment to partnership income (see instructions)	33	00
34 Flow-Through Payments Schedule, Column C, line 12	34	00
	er partnership liability due or (overpayment). 35	00
36 PTE information return late filing penalty	36	00
37 Add lines 30, 31, 35, and 36.	Total PTE taxes with interest and/or penalty. 37	-22794 00
Amended Return		
38 For amended returns only - previously issued refunds	38	00
39 For amended returns only - payments made with original return	39	00
40 Add lines 37 and 38, then subtract line 39.	40	-22794 00
Penalty and Interest		
41 Late payment penalty	41	00
42 Interest	42	00
43 Add lines 40 through 42.	Total tax, penalties, and interest. 43	-22794 00
Amount Owed or Refund		
44 If line 43 is more than zero, enter the amount here.	This is the amount you owe. 44	00
45 If line 43 is less than zero, enter the amount here.	This is your overpayment. 45	22794 00
46 Enter the amount from line 45 that you want applied to your 2025 tax	46	00
47 Subtract line 46 from line 45.	This is your refund. 47	22794 00
Direct Deposit Your Refund Complete 1, 2, and 3. (See instr	uctions)	
1 Routing Number	7	
2 Account Number	Checking Savii	ngs
3 Mark this box if this refund is going to an account that is located outside of the U	United States or its territories.	
REQUIRED - Signature, Paid Preparer, and Third-Party De		
Under penalties of false swearing, I declare that I have examined this return, including acco	mpanying schedules and statements, and to the best of	my knowledge and belief, it is
true, correct, and complete.		
Officer		
Signature x	Date Signed	0 8 1 9 2 0 2 4
Printed Name Darrow Au Andromedus	Phone	9 5 9 7 6 3 4 2 1 9 3
Tax Preparer		

Date Signed 0 8 1 9 2 0 2 4 Signature Phone 4 5 8 9 6 1 7 3 2 3 Print Name Pierce Brown PTIN P 1 3 2 4 5 1 0 8 Mark this box if you allow the DOR to discuss this tax return with your tax preparer.

Tax Preparation Firm

Firm's FEIN Firm Name Red Rising

Mailing Address 10 Reaper Street

State M S ZIP 7 2 0 1 6 City Lykos

Pass-Through Entity Tax Authorized Representative: Required if making a PTET Election (See instructions)

Telephone Number Title Name 5 9 8 2 6 4 7 3 1 9 Gold Sevro Au Barca Email SonofAres@Howlers.com





2024 Montana Form PTE – Flow-Through Payments Schedule



Name Test Partnership 2 LLC

FEIN 2 0 2 2 2 2 2 2 2

Part I. Montana Schedules K-1 received by the pass-through entity reporting mineral royalty withholding, pass-through withholding, and/or pass-through entity tax. Attach a statement with the same information if the PTE received more than four Montana Schedules K-1 reporting mineral royalty withholding, pass-through withholding, and/or pass-through entity tax.

			Α	В	C
E	ntity Name	FEIN	Mineral Royalty	Pass-Through	Pass-Through Entity
			Withholding Received	Withholding Received	Tax Received
1 MRW LLC		100000001	3000 00	00	00
2 PTW LLC		100000002	00	11000 00	00
3 PTET LLC		100000003	00	00	20000 00
4			00	00	00
		5 Totals	3000 00	11000 00	20000 00

Part II. Flow-through payment allocations (See instruction	15)	Sc	hedules K-1 subject to:	
	H	A	В	С
		Pass-Through Entity Tax	Composite Tax	Other
1 Sum of profit and loss percentage of all MT Schedules K-1				
subject to applicable Column(s) A, B, and C	1	93.0000 %	7.5000 %	0.0000 %
2 Multiply total in Part I, Column A by percentage on line 1 for each Column	2	2775 00	225 00	00
3 Mineral royalty withholding passed to owners	3			00
4 Enter Column A, line 2 and Column B, line 2.				
Subtract Column C, line 3 from Column C, line 2.				
Balance of mineral royalty withholding the PTE can claim as a credit.	4	2775 00	225 00	00
5 Multiply total in Part I, Column B by percentage on line 1 for each Column	5	10175 00	825 00	00
6 Pass-through withholding passed to owners	6			00
7 Enter Column A, line 5 and Column B, line 5.				
Subtract Column C, line 6 from Column C, line 5.				
Balance of pass-through withholding the PTE can claim as a credit.	7	10175 00	825 00	00
8 If Column A, line 1 is greater than 0%, enter the total from Part I, Column C	8	20000 00		
9 If Column A, line 1 is 0%, multiply the total in Part I, Column C				
by Columns B and C, line 1	9		00	00
10 Total pass-through entity tax passed to owners	10			00
11 Enter Column B, line 9.				
Subtract Column C, line 10 from line 9.				
Credit balance for PTE not electing to pay PTET.	11		00	00
12 Add lines 4, 7, 8, and 11 in each Column.			or many over the designation	
Total payments the PTE can claim as a credit.	12	32950 00	1050 00	00



24TT0301*



2024 Montana Form PTE Schedule I – Apportionment Factor for Multistate Pass-Through Entities



Name Test Partnership 2 LLC			FEIN 2 0 2 2 :	2 2 2 2 2
Enter amounts in Columns A and B. Enter percentages in Column	C.	A	В	C
1 Property Factor: Use average value for real and tangible personal property		Everywhere	Montana F	actor
1a Land	1a	100000 00	25000	00
1b Buildings	1b	50000 00	25000	00
1c Machinery	1c	30000 00	10000	00
1d Equipment	1d	55000 00	15000	00
1e Furniture and fixtures	1e	00		00
1f Leases and leased property	1f	15000 00		00
1g Inventories	1g	00		00
1h Depletable assets	1h	00		00
1i Supplies and other	1i	00		00
1j Multiply amount of rents by 8 and enter result	1j	00		00
1k Total Property Value. add lines 1a through 1j	1k	250000 00	75000	00
Divide the total in Column B by the total in Column A. Multiply the result by 100.			property factor. 1	30.0000 %
2 Payroll Factor:				
2a Compensation of officers	2a	100000 00	50000	00
2b Salaries and wages	2b	25000 00	25000	00
Payroll included in:				
2c Costs of goods sold	2c	00		00
2d Other expenses and deductions	2d	00		00
2e Total Property Value. Add lines 2a through 2d.	2e	125000 00	75000	00
Divide the total in Column B by the total in Column A. Multiply the result by 100.		This is you	ır payroll factor. 2	60.0000 %
3 Gross Receipts Factor:				
3a Gross Receipts, less returns and allowances	3a	500000 00		
3b Receipts delivered or shipped to Montana purchasers:				
(1)Shipped from outside Montana		3b(1)	100000	00
(2)Shipped from within Montana		3b(2)	25000	00
3c Receipts shipped from Montana to:				
(1)United States government		3c(1)		00
(2)Purchasers in a state where the taxpayer is not taxable		3c(2)		00
3d Receipts other than receipts of tangible personal property (e.g., service income)	3d		00
3e Net gains reported on federal Schedule D and Form 4797	3e	00		00
3f Other gross receipts (rents, royalties, interest, etc.)	3f	100000 00	25000	00
3g Total Receipts Value. Add lines 3a through 3f.	3g	600000 00	150000	
Divide the total in Column B by the total in Column A. Multiply the result by 100.		This is your	receipts factor. 3	25.0000 %
4 Enter the amount reported on line 3			4	25.0000 %
5 Add the percentages from lines 1, 2, 3. and 4 in Column C.		This is the sum	of your factors. 5 1	40.0000 %
6 Divide the total percentage from line 5, Column C, by the number of factors that car	n be include	d in the calculation.		
If a property, payroll, or receipts factor is 0%, it is included in the calculation for line 6			.	

This is your apportionment factor. 6 35.0000 %





Name

Test Partnership 2 LLC

2024 Montana Form PTE Schedule II – Montana Pass-Through Entity Tax Credits



FEIN 2 0 2 2 2 2 2 2 2

to your return (if applicable). See instr	В	C
Credit Code	Credit Authorization Number	Amount of Credit
1		00
2		00
3		00
4		00
T		00

Use the corresponding credit code in the instructions to report the credit you are claiming in Column A. If you were provided an authorization number to claim the credit, enter that



2024 Montana Form PTE Schedule IV – Montana Composite Income Tax Schedule

EN N

Name Test Partnership 2 LLC

Part I. Eligible Participating Owners

Enter the number of eligible participating owners. See instructions for more information about eligible participants 1

Part II. Adjusted Federal Income			Part III. Composite Tax Ratio		
1 Federal income from all sources from page 1, line 14	_	494850 00	1 Total Montana source income from page 1, line 20	_	182709 00
2 Total guaranteed payments for services from page 1, line 4a	2	5750 00	2 Multiply Part II, line 2 by the apportionment factor from		
 Total Everywhere Additions from Montana Adjustments Worksheet, 			Schedule I, line 6	2	5750 00
Column E, line 1	3	15299 00	3 Subtract line 2 from line 1. Adjusted Montana source income	က	176959 00
4 Total Everywhere Subtractions from Montana Adjustments			4 Divide line 3 by Part II, line 5. (Do not enter more than 1.000000).		
Worksheet, Column E, line 2	4	00	Composite tax ratio	4	0.350832
5 Add lines 1 and 3, then subtract lines 2 and 4.					
Adjusted federal income	2	504399 00			

Part IV. Composite Tax

Enter the required information and amounts for each eligible participants in Columns A-H.

Name	B Social Security Number or Pederal Employer Identification Number	C Total Distributive Share from Owner's Schedule K-1, Column A, Part IV, Line 14	D (Partnerships only) Guaranteed Payments for Services from Owner's Schedule K-1, Column A, Part IV, Line 4a	E Standard Deduction (\$14,600)	F Subtract Columns D and E from Column C Montana Taxable Income	G Tax from Tax Table (See instructions)	H Multiply Column G by composite tax ratio from Part III, Line 4 Montana Composite Income Tax	=
1 Owner Five	200000005	38261	431 00	14600	23230 00	1107 00	0	0
2			00		00	0	00	0
m			00		00	0	0 0	0.
4			00		00	0	00	0
. 22			00		00	0	00	0
9			00		00	0	00	00
			00		00	0	00	00
. &			00		00	0	00	00
ග			00		00	0	00	00
10			00		00	0	00	0(
!	11 If there are more than 10 company	posite tax participar	nts, attach a statement with the sar	me information	11 If there are more than 10 composite tax participants, attach a statement with the same information and report the total composite tax from those statements here.	im those statements here.	0	00
	12 Add Column H, lines 1 through	11. This is your to	tal composite tax liability. Transfer	the amounts fro	12 Add Column H, lines 1 through 11. This is your total composite tax liability. Transfer the amounts from Column H to each owner's Schedule K-1, Part V, line 2		12 0	00





2024 Montana Form PTE Schedule VI -Reporting of Special Transactions



Test Partnership 2 LLC Name

FEIN 2 0 2 2 2 2 2 2 2

Complete Schedule VI only if your PTE filed any of the federal income tax forms described below. Mark the appropriate box indicating which form(s) you filed with the Internal Revenue Service (IRS) for this tax year. If you mark one or more of these forms, you must include a complete copy of your federal tax return.

- 1 The entity filed federal Form 8918 - Material Advisor Disclosure Statement with the IRS
- The entity filed federal Form 8824 Like-Kind Exchanges with the IRS. 2 NOTE: Mark the box if your like-kind exchange includes Montana property.
- The entity filed federal Form 8865 Return of U.S. Persons with Respect to Certain Foreign Partnerships with the IRS 3
- The entity filed federal Form 8886 Reportable Transaction Disclosure Statement with the IRS
- For S corporations only. The S corporation filed federal Form 8023 Elections Under Section 338 for Corporations Making Qualified 5 Stock Purchases with the IRS

Complete this section if the PTE is a partnership.

The partnership filed one or more of the following forms in 2024 6

Provide a copy of each form with your tax return.

- Federal Form 8985, Pass-Through Statement Transmittal/Partnership Adjustment Tracking Report
- Federal Form 8986, Partner's Share of Adjustment(s) to Partnership-Related Items(s)
- Federal Form 8082, Notice of Inconsistent Treatment or Administrative Adjustment Request (AAR)
- The partnership had Montana source income and paid an imputed underpayment. 7 If applicable, provide a copy of your federal audit adjustment report. (See instructions)
- 8 Previously unreported Montana source income from Federal Form 8082 (See instructions)

00

Complete this section if you made a disbursement to a related party.

The entity made payments during this tax year to one or more related parties (excluding salary compensation) that exceeded \$100,000 per recipient. 9 If you marked this box, please provide the name and federal employer identification number of each related party below and the amount that you paid to each related party: C

Name

FEIN

Amount of Payment

00 00

00

00 00

00 00

00





2024 Montana Form PTE Schedule VII – List of Disregarded Entities

2024v1 5/2024

0) 0)	me Test Partnership 2 LLC	LC						FEIN 2	0 2 2 2 2 2 2 2
DE 1 987654321 X NE 2 192837645 C162534 X	A		C Montana SOS Registration Number		e Q Sub	F If Q Sub, Enter Election Date	G DE has Multistate Activities		I Montana Source Income from DE's Own Activities
2 C162534	Test DE 1	98765432	3 2	×			×		1627 00
	DE	19283764	\vdash					×	00
									00
									00
									00
									00
									00

9

8

6

9

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1627 00

15 **Total**

4

13

12



2024 Montana Form PTE Schedule DE – Disregarded Entity Montana Source Income



Name Test Partnership 2 LLC

FEIN 2 0 2 2 2 2 2 2 2

File this schedule for all disregarded entities that must report Montana source income.

Do not file this schedule for disregarded entities that only receive flow-through income or are considered segments. (See instructions.)

Complete the Everywhere Column first. If the income reported on line 17 includes apportionable income, then mark the box and calculate the apportionment factor.

Use the apportionment factor to calculate your Montana source income. If line 17 includes nonapportionable income, report it on the applicable line in the Montana Column.

Disregarded Entity Name Test DE 1	iappoi	nonable income, report it on the	Applic		on the mondina column.
Disregarded Entity FEIN 9 8 7 6 5 4 3 2 1		A			В
Business Income and Deductions		Everywhere			Montana
1a Gross income	1a	12500 00			
1b Returns and allowances	1b	450 00			
1c Balance, Subtract line 1b from line 1a.	1c	12050 00			
1d Cost of goods sold (provide statement)	1d	6000 00			
	1e	6050 00			
1e Gross profit. Subtract line 1d from line 1c. 1f Other income including gains (provide statement)	1f	300 00			
A STATE OF THE STA	1g	6350 00			
	1h	1300 00			
1h Wages	1i	1100 00			
1i Rent	'' 1j	500 00			
1j Other deductions (provide statement) 1k Add lines 1h through 1j. This is your total deductions.		2900 00			
	1	3450 00			1627 00
1 Subtract line 1k from line 1g. This is your total income from trade or business.	75.00	3430 00			102700
Other Income	2	00	1		00
2 Net rental real estate income (loss)	2	00			00
3 Other net rental income (loss)	3	00			00
4 Guaranteed payments (partnerships only)	4				00
5 Interest income	5	00			00
6 Ordinary dividends	6	00			00
7 Royalties	7	00			00
8 Net short-term capital gain (loss) (include federal Schedule D)	8	00			00
9 Net long-term capital gain (loss) (include federal Schedule D)	9	00			
10 Net section 1231 gain (loss) (include federal Form 4797)	10	00			00
11 Other income (loss) (include detailed statement)	11	00		8	00
12 Section 179 deduction (include federal Form 4562)	12	00			
13 Other deductions (include detailed statement)	13	00			00
14 Add lines 1 through 11, then subtract lines 12 and 13	14	3450 00			1627 00
15 Montana additions to income	15	00			00
16 Montana subtractions from income	16	00)		00
17 Add lines 14 and 15, then subtract line 16.					00
Mark this box if some income is apportionable.	17	3450 00)		1627 00
Apportionment Factor					
1a Everywhere property	1a	2742 00			
1b Montana property			1b		1114 00
1 Divide line 1b by line 1a.		This is your Property factor.			40.6273 %
2a Everywhere payroll	2a	6713 00)		0.00
2b Montana payroll			2b		1700 00
2 Divide line 2b by line 2a.		This is your Payroll factor.	2		25.3240 %
3a Everywhere receipts	3a	8536 00)		
3b Montana receipts			3b		5234 00
3 Divide line 3b by line 3a.		This is your Receipts factor.	3		61.3168 %
4 Enter the amount reported on line 3			4		61.3168 %
5 Add the percentages from lines 1, 2, 3, and 4.		This is the sum of your factors.	5		188.5849 %
6 Divide the total percentage from line 5 by the number of factors that can be included in the ca	lculatio	n. If a property, payroll, or			
receipts factor is 0%, it is included in the calculation for line 6 if there is a value in the "Everyw					



This is your Apportionment factor. 6

24TT0901*

47.1462 %



2024 Montana Form PTE – Montana Adjustments Worksheet

5/2024

00 000 2 2 00 0000000 00 00 5355 00 5355 00 15299 00 15299 00 Total Montana Source Income Adjustments 2 Total Everywhere Adjustments 2 2 2 0 2 00 00 00 00 00 00 00 00 000 00 00 00 Column B, Lines 15 and 16 Column A, Lines 15 and 16 From Schedules DE, From Schedules DE, ۵ 00 00 00 00 00 00 00 000 From MT Schedules K-1, From MT Schedules K-1, Part 3, Column B Part 3, Column A O O 000 000 00 00 00 000 Nonapportionable Income Nonapportionable Income 0 00 00 00 00 0000000 00 00 00 00 00 00 00 00 00 5355 00 15299 00 15299 00 PTE's Apportionable PTE's Apportionable 5355 Activities 4 Montana Adjustments to Everywhere Income Adjustments to Montana Source Income Code Code Total Total A A Test Partnership 2 LLC Montana Source Subtractions Montana Source Additions from Everywhere Income to Everywhere Income Montana Subtractions Montana Additions Dividends Dividends Name 4 2



00

00

000

Total



2024 Montana Form PTE – Montana Source Income Schedule

2024v1 5/2024

X E V E N O E						
Name Test Partnership 2 LLC	122 10				FEIN	20222222
		4	0	v	۵	Ш
		Montana Source Income	Montana Source Income	Montana Source Income	Montana Source Income	Total of
Sum of Montana source income		from	from	from	from PTE's	Columns A through D
per item of income (loss) and deduction.		Montana Schedules K-1	Schedules DE	Nonapportionable Income	Apportionable Activities	
1 Ordinary business income (loss)	-	00	1627 00	00	138792 00	140420 00
2 Net rental real estate income (loss)	7	00	00	00	00	00
3 Other net rental income (loss)	က	00	00	00	00	00
4a Guaranteed payments: services	4a	00	00	5750 00	00	5750 00
4b Guaranteed payments: capital	4	00	00	00	1435 00	1435 00
5 Interest income	2	00	00	00	64750 00	64750 00
6 Ordinary dividends	9	00	00	00	5250 00	5250 00
7 Royalties	7	00	00	00	00	00
8 Net short-term capital gain (loss)	8	00	00	00	00	00
9 Net long-term capital gain (loss)	6	00	00	00	00	00
10 Net §1231 gain (loss)	9	00	00	00	00	00
11 Other income (loss).	F	00	00	00	00	00
12 §179 expense deduction apportionable						
and/or allocable to Montana	12	00	00	00	00	00
13 Other expense deductions apportionable						
and/or allocable to Montana	13	00	00	00	40250 00	40250 00
14 Total Montana Source Income	14	00	1627 00	5750 00	169978 00	177355 00





Montana Schedule K-1

(PTE)

5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

M 1	Final Schedule K-1		
Mark applicable boxes: Amended Schedule K-1	Final Schedule N-1		
Part I. Pass-through Entity Information Name Test Partnership 2 LLC			20222222
Mailing Address 736 Lambda Ave APT H3			
City Lykos	State M S ZIP Code 7 2 0 1 6		
Part II. Owner Information			
Name Owner One		FEIN	
Mailing Address 755 Bellona Blvd.		or SSN 2	200000001
City Olympia	State W A ZIP Code 98501	Beneficial Owner FEIN	
,		or SSN	
Owner Type I Resident	→ Nonresident		
Special Allocations (See instructions)		Profit and loss percentage	30.0000 %
★ The owner is included in a PTET election		Capital/Ownership	30.0000 %
Resident owner PTET election (See instructions)			
The owner is included in a composite income tax return			

The owner is included in a PTET election			Capital/Ownersh	nip 30.0000 %
Resident owner PTET election (See instructions)				
The owner is included in a composite income tax	return			and the state of the state of
			Α	В
Part III. Montana Adjustments (See works	sheet on page 9)		Everywhere	Montana
1 Additions		1	4590 00	1606 00
2 Subtractions		2	00	00
Part IV. Distributive Share of Montana Sc	ource Income (Loss)			
1 Ordinary business income (loss)		1	120000 00	42126 00
Net rental real estate income (loss)		2	00	00
3 Other net rental income (loss)		3	00	00
4a Guaranteed payments: services		4a	1725 00	1725 00
4b Guaranteed payments: capital		4b	1230 00	431 00
5 Interest income		5	55500 00	19425 00
6 Ordinary dividends		6	4500 00	1575 00
7 Royalties		7	00	00
8 Net short-term capital gain (loss)		8	00	00
9 Net long-term capital gain (loss)		9	00	00
10 Net section 1231 gain (loss)		10	00	00
11 Other income (loss) (include detailed statement)		11	00	00
12 Section 179 expense deduction		12	00	00
13 Other expense deductions		13	34500 00	12075 00
14 Total distributive share (See instructions)		14	153045 00	54813 00
Part V. Supplemental Information				
The owner filed Form PT-AGR Year	The owne	r is a Domestic	2nd tier PTE	
1 PTET paid on behalf of owner. (See instructions)			1	3234 00
2 Montana composite income tax paid on behalf of ow	vner		2	00
3a Montana income tax withheld on behalf of owner. (S			3a	00
3b Montana income tax withheld by a lower tier pass-th			3b	00
3c Add lines 3a and 3b.		ntana income t	ax withheld on your behalf. 3c	00
4 Montana mineral royalty tax withheld			4	00
5 Other information. List type	and amoun	t 5	00	00
Part VI. Tax Credits				
Code	Credit Authorization Nu	ımber	The second secon	Amount of Credit
1				0.0
2				00
Part VII. Montana Adjustments Detail: En	nter the amount and code of each	n adjustment e	ntered on Part 3. (See instructions)	
1 Code 1AA 4590 00	2 Code 2AA	16	3 Code	00
4 Code 00	5 Code		00 6 Code	00
. 3444	and a second appropriate of the second appro			





Montana Schedule K-1 (PTE)

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable boxes: Amended Schedule K-1 Part I. Pass-through Entity Information	Final Schedule K-1		
Name Test Partnership 2 LLC			FEIN 202222222
Mailing Address 736 Lambda Ave APT H3			
City Lykos	State M S ZIP Code 7	2016	
Part II. Owner Information			
Name Owner Two			FEIN
Mailing Address 755 Bellona Blvd.			or SSN 200000002
City Helena	State M T ZIP Code 5	9 6 0 2 Beneficial O	wner FEIN or SSN
Owner Type I X Resident	Nonresident		
Special Allocations (See instructions)		Profit and los	s percentage 30.0000 %
X The owner is included in a PTET election		Capit	al/Ownership 30.0000 %
X Resident owner PTET election (See instructions)			
The owner is included in a composite income tax return			
· ·		A	В
Part III. Montana Adjustments (See worksheet	on page 9)	Everywhere	Montana
1 Additions	1	4590 00	1606 00
2 Subtractions	2	00	00
Part IV. Distributive Share of Montana Source	Income (Loss)		
1 Ordinary business income (loss)	1	120000 00	42126 00
2 Net rental real estate income (loss)	2	00	00
3 Other net rental income (loss)	3		00
4a Guaranteed payments: services	4a	2156 00	2156 00
4b Guaranteed payments: capital	4b	1230 00	431 00
5 Interest income	5	55500 00	19425 00
6 Ordinary dividends	6	4500 00	1575 00
7 Royalties	7	00	00
8 Net short-term capital gain (loss)	8	00	00
9 Net long-term capital gain (loss)	9	00	00
10 Net section 1231 gain (loss)	10	00	00
11 Other income (loss) (include detailed statement)	11	00	00
12 Section 179 expense deduction	12	00	00
13 Other expense deductions	13	34500 00	12075 00
14 Total distributive share (See instructions)	14	153476 00	55244 00
Part V. Supplemental Information			
The owner filed Form PT-AGR Year	The owner is a Dor	nestic 2nd tier PTE	
1 PTET paid on behalf of owner. (See instructions)			1 9055 00
2 Montana composite income tax paid on behalf of owner			2 00
3a Montana income tax withheld on behalf of owner. (See insti	ructions)	3	da 00
3b Montana income tax withheld by a lower tier pass-through		3	8 b 00
3c Add lines 3a and 3b.		ome tax withheld on your behalf.	3c 00
Montana mineral royalty tax withheld	•		4 00
5 Other information. List type	and amount 5	00	00
Part VI. Tax Credits			
	redit Authorization Number		Amount of Credit
1			00
2			00
Part VII. Montana Adjustments Detail: Enter the	amount and code of each adjustr	nent entered on Part 3. (See instruc	tions)
1 Code 1AA 4590 00	2 Code 2 A A	160600 3 Code	00
4 Code 00	5 Code	00 6 Code	00
1 0000		# W S 3577	





1 Code 1AA

4 Code

Montana Schedule K-1 (PTE)

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable boxes: Amended Schedule K-1 Part I. Pass-through Entity Information	Final Schedule K-1	
Name Test Partnership 2 LLC		FEIN 2 0 2 2 2 2 2 2 2
Mailing Address 736 Lambda Ave APT H3		
City Lykos	State M S ZIP Code 7 2 0 1 6	
Part II. Owner Information		
Name Owner Three		FEIN
Mailing Address 755 Bellona Blvd.		or SSN 20000003
City Olympia	State W A ZIP Code 9 8 5 0 1 Benefi	cial Owner FEIN
,		or SSN
Owner Type I Resident	➤ Nonresident	
Special Allocations (See instructions)	Profit at	nd loss percentage 17.5000 %
★ The owner is included in a PTET election		Capital/Ownership 17.5000 %
Resident owner PTET election (See instructions)		
The owner is included in a composite income tax return		

/ The owner is included in a 1 121 closuon		And the second s	
Resident owner PTET election (See instructions	s)		
The owner is included in a composite income to	ax return		
		A	В
Part III. Montana Adjustments (See wor	ksheet on page 9)	Everywhere	Montana
1 Additions	1	2677 00	937 00
2 Subtractions	2	00	0.0
Part IV. Distributive Share of Montana S	Source Income (Loss)		
1 Ordinary business income (loss)	1	70000 00	24573 00
2 Net rental real estate income (loss)	2	00	0.0
3 Other net rental income (loss)	3	00	0.0
4a Guaranteed payments: services	4a	1006 00	1006 00
4b Guaranteed payments: capital	4b	718 00	251 00
5 Interest income	5	32375 00	11331 00
6 Ordinary dividends	6	2625 00	919 00
7 Royalties	7	00	00
8 Net short-term capital gain (loss)	8	00	00
9 Net long-term capital gain (loss)	9	00	00
10 Net section 1231 gain (loss)	10	00	00
11 Other income (loss) (include detailed statement)	11	00	00
12 Section 179 expense deduction	12	00	00
13 Other expense deductions	13	20125 00	7044 00
14 Total distributive share (See instructions)	14	89276 00	31974 00
Part V. Supplemental Information			
The owner filed Form PT-AGR Year	The owner is a Domestic	2nd tier PTE	
1 PTET paid on behalf of owner. (See instructions)		1	1886 00
2 Montana composite income tax paid on behalf of	owner	2	00
3a Montana income tax withheld on behalf of owner.		3a	00
3b Montana income tax withheld by a lower tier pass-		3b	00
3c Add lines 3a and 3b.	This is your total Montana income	tax withheld on your behalf. 3c	0(
Montana mineral royalty tax withheld		4	00
5 Other information. List type	and amount 5	00	00
Part VI. Tax Credits			
Code	Credit Authorization Number		Amount of Credit
1			00
2			00
Part VII. Montana Adjustments Detail:	Enter the amount and code of each adjustment	entered on Part 3. (See instructions)	
	0.01.077		0.0



3 Code

6 Code

00

00

937 00

00

2 Code 2AA

5 Code

2677 00

00



Montana Schedule K-1 (PTE)

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

Mark applicable boxes: Amended Schedule K-1 Part I. Pass-through Entity Information	Final Schedule K-1	
Name Test Partnership 2 LLC	FEIN	20222222
Mailing Address 736 Lambda Ave APT H3		
City Lykos	State M S ZIP Code 7 2 0 1 6	
Part II. Owner Information		
Name Owner Four	FEIN	200000004
Mailing Address 755 Bellona Blvd.	or SSN	
City Olympia	State W A ZIP Code 9 8 5 0 1 Beneficial Owner FEIN	
	or SSN	
Owner Type P Resident	Nonresident	
Special Allocations (See instructions)	Profit and loss percent	age 15.0000 %
➤ The owner is included in a PTET election	Capital/Owners	ship 15.0000 %
Resident owner PTET election (See instructions)		
The owner is included in a composite income tax return		

		Α	D Company
Part III. Montana Adjustments (See worksheet on page 9)		Everywhere	Montana
1 Additions	1	2295 00	803 00
2 Subtractions	2	00	00
Part IV. Distributive Share of Montana Source Income (L	.oss)		
1 Ordinary business income (loss)	1	60000 00	21063 00
2 Net rental real estate income (loss)	2	00	00
3 Other net rental income (loss)	3	00	00
4a Guaranteed payments: services	4a	863 00	1294 00
4b Guaranteed payments: capital	4b	615 00	215 00
5 Interest income	5	27750 00	9713 00
6 Ordinary dividends	6	2250 00	788 00
7 Royalties	7	00	00
8 Net short-term capital gain (loss)	8	00	00
9 Net long-term capital gain (loss)	9	00	00
10 Net section 1231 gain (loss)	10	00	00
11 Other income (loss) (include detailed statement)	11	00	00
12 Section 179 expense deduction	12	00	00
13 Other expense deductions	13	17250 00	6038 00
14 Total distributive share (See instructions)	14	76522 00	27838 00
Part V. Supplemental Information			
The owner filed Form PT-AGR Year	The owner is a Domestic 2r	nd tier PTE	
 PTET paid on behalf of owner. (See instructions) 		1	1642 00
2 Montana composite income tax paid on behalf of owner		2	00
3a Montana income tax withheld on behalf of owner. (See instructions)		3a	00
and the second of the second o		26	0.0

1 PTET paid on behalf of owner. (See instruction	s)		1	1642 00
2 Montana composite income tax paid on behalf	of owner		2	00
3a Montana income tax withheld on behalf of own	ner. (See instructions)		3a	00
3b Montana income tax withheld by a lower tier p	ass-through entity		3b	00
3c Add lines 3a and 3b.	eld on your behalf. 3c	00		
4 Montana mineral royalty tax withheld			4	00
5 Other information. List type	and amount	5	00	00
Part VI. Tax Credits				
Code	Credit Authorization Num	ber	Ar	nount of Credit

1									
2									00
Par	t VII. Montana Adjustn	nents Detail: Enter th	e an	nount and	d code of each	adjustment entered on Part 3	. (Se	e instructions)	
1	Code 1AA	2295 00	2	Code	2 A A	803 00	3	Code	0.0
4	Code	00	5	Code		00	6	Code	00



00



Montana Schedule K-1

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

1 of the balonaar your zoz i,	or tax your bogg		3	
Mark applicable boxes: Amended Schedule K-1	Final Schedule K-1			
Part I. Pass-through Entity Information				
Name Test Partnership 2 LLC			FEIN :	20222222
Mailing Address 736 Lambda Ave APT H3	3			
City Lykos		Code 72016		
Part II. Owner Information				
Name Owner Five			FEIN 2	200000005
Mailing Address 755 Bellona Blvd.			or SSN	
City Olympia	State W A ZIP	Code 98501	Beneficial Owner FEIN	
,			or SSN	
Owner Type F Resident	Nonresident			
Special Allocations (See instructions)			Profit and loss percentage	7.5000 %
The owner is included in a PTET election			Capital/Ownership	7.5000 %
Resident owner PTET election (See instructions)				
★ The owner is included in a composite income tax return	Ĺ			
			A	В
Part III. Montana Adjustments (See workshee	t on page 9)	Ev	verywhere	Montana
1 Additions		1	1147 00	402 00
2 Subtractions		2	00	00
Part IV. Distributive Share of Montana Source	e Income (Loss)			
1 Ordinary business income (loss)		1	3000000	10531 00
2 Net rental real estate income (loss)		2	00	00
3 Other net rental income (loss)		3	00	00
4a Guaranteed payments: services		4a	431 00	00
4b Guaranteed payments: capital		4b	308 00	108 00
5 Interest income		5	13875 00	4856 00
6 Ordinary dividends		6	1125 00	394 00
7 Royalties		7	00	00
8 Net short-term capital gain (loss)		8	00	00
O Not long torm popital gain (loss)		۵	0.0	0.0

0	Net short-term capital gain (1033)	•		
9	Net long-term capital gain (loss)	9	00	00
	Net section 1231 gain (loss)	10	00	00
11	Other income (loss) (include detailed statement)	11	00	00
	Section 179 expense deduction	12	00	00
13	Other expense deductions	13	8625 00	3019 00
	Total distributive share (See instructions)	14	38261 00	13272 00
Pa	rt V. Supplemental Information			

The owner filed Form PT-AGR Year	The owner is	a Domestic 2nd tier P	TE		
1 PTET paid on behalf of owner. (See instructions)				1	00
2 Montana composite income tax paid on behalf of owner				2	00
3a Montana income tax withheld on behalf of owner. (See inst	ructions)			3a	00
3b Montana income tax withheld by a lower tier pass-through				3b	00
3c Add lines 3a and 3b.	This is your total Montar	a income tax withhe	eld on your behalf.	3c	00
4 Montana mineral royalty tax withheld				4	00
5 Other information. List type	and amount	5	00)	00
Part VI. Tax Credits					

Code	Credit Authorization Number	Amount of Credit
1		00
2		00
Part VII. Montana	a Adjustments Detail: Enter the amount and code of each adjustment entered on Part 3. (See instructions)	
	1115 00 0 0-1- 27 7 102 00 3 Codo	0.0

1 Code 1AA 1147 00 2 Code 2AA 402 00 3 Code 00 4 Code 00 5 Code 00 6 Code 00



24TT1201

Apportionable Income Worksheet

income that is apportioned to Montana (Column G) before adjustments. The PTE must include the amounts from Column G on the Montana Source Income Schedule, This Worksheet must be filed with the return. Use this worksheet to segregate the PTE's income per income type for lines 16b, 16c, and 16d, and determine the PTE's Column D.

COLUMN D.							
	A	B (line 16b)	C (line 16c)	D (line	Э	ш	ŋ
	Federal	Federal Schs K-1	DREs	16d)	Apportionable	Apportionment	Income
	Schedule K			Nonappor	Income	factor from Sch I,	apportioned to
				tionable	(A - B - C - D)	Line 5	MT (E x F)
				income			
1 Ordinary buiness income (loss)	\$ 400,000		\$ 3,450		396,550	35.0000%	\$ 138,793
2 Net rental real estate income (loss)	- \$				- \$	35.0000%	- \$
3 Other net rental income (loss)	- \$				- \$	35.0000%	- \$
4a Guaranteed Payments - Services	\$ 5,750			\$ 5,750	\$ -	35.0000%	- \$
4b Guaranteed Payments - Capital	\$ 4,100				\$ 4,100	35.000%	\$ 1,435
5 Interest income	\$ 185,000				\$ 185,000	35.0000%	\$ 64,750
6 Ordinary dividends	\$ 15,000				\$ 15,000	35.0000%	\$ 5,250
7 Royalties	- \$				\$ -	32.0000%	÷
8 Net short-term capital gain (loss)	- \$				\$ -	35.000%	\$
9 Net long-term capital gain (loss)	- \$				\$ -	35.000%	\$
10 Net §1231 gain (loss)	- \$				\$ -	35.0000%	\$ -
11 Other income (loss)	\$				\$	32.000%	\$
12 §179 expense deduction							
apportionable and/or allocable to MT	\$				\$	32.000%	- \$
13 Other expense deductions							
apportionable and/or allocable to MT	\$ 115,000				\$ 115,000	32.000% \$	\$ 40,250
14 Total	\$ 494,850	- \$	\$ 3,450	\$ 5,750	\$ 485,650	32.0000%	\$ 169,978

Owners: 5 total owners consisting of 1 Resident Owners, 2 Nonresident Owners, and 2 Other Types of Owners of various types. All Forms and attachments are required to be included in the PDF submission.

Case 3: Form PTE (S-Corp)

Test S-Corp 1 Inc is a company that has minimal operations and is filing a timely final return. The company operates only in Montana with 100% of its property, payroll, and gross receipts within Montana. The company's total Montana source income is \$1,984.

The company is also receiving Mineral Royalty Withholding credit of \$117 and is distributing all of the credit to its shareholders.

Any field in the following case that is highlighted in Orange requires a calculated value

Federal:

Form 1065

Schedule K

Forms/Information Provided by DOR:

Schedule K Information

Forms Required to be Provided by Vendors:

Montana:

- Apportionable Income Worksheet
- Form PTE
- Flow-through Payment Schedule
- Schedule I
- Schedule II
- Montana Adjustments Worksheet
- Schedule MTSI
- Montana Schedules K-1

Required Attachments:

Example PDF attachment (PDF stating "Attachment Example")

Taxpayer Information:

Test S-Corp 1 LLC

246 Nipcopper Close Tortall, NY 10611

FEIN:

20-3333333

Date Formed:

10/01/2006

State Formed in:

New York

Federal Business Code/NAICS:

333320

MT Secretary of State ID: T0401246 Schedules DE Included:

Date registered in MT:

9/04/2020

Schedule K-1 Received:

0

Owners: 2 total owners consisting of 2 Nonresident Owners. All Forms and attachments are required to be included in the PDF submission.



2024 Montana Pass-Through Entity Tax Return Include a complete copy of all related federal forms and schedules.

Form PTE

Partnership

S corporation X

2024v1 5/2024

	For calendar vea	ar 2024 or tax year begin	nina 01012024	and ending	12312024	1
Mark all that apply:	Name				FEIN 2 0	3 3 3 3 3 3 3
Initial return	Test S-corp 1	Inc		Federal Business	Code/NAICS 3 3	3 3 2 0
X Final return	Mailing Address				of State ID # T 0	
Amended return	246 Nipcopper	Close			on in Montana 0 9	
Refund return	City		P Code + 4		NY on 10	
PTP	Tortall		06112009			
PTET	TOTCATI					
Resident PTET	Enter Number of:	Schedules K-1 Included 2 Resident Owners	Nonresident Owners Other Types of Owners		Schedules DE Inclu Schedules K-1 Rece	
Owners' Distrib	utive Share of Incon	ne Items (federal Sched	ule K)			
1 Ordinary business		no nome (reasian come			1	5000 00
10 ⁻⁶	tate income (loss) (include fe	ederal Form 8825)			2	-5000 00
	rental income (loss)	derail offi oozoj	3a	-3000 00		
-	om other rental activities (inc	fude detailed statement)	3b	00		
3 Subtract line 3b fr	175	dude detailed statementy	This is your other net rer			-3000 00
			4a	0.0		3000 00
	payments: Services		4a 4b	00		
	payments: Capital		This is your total gua			00
4 Add lines 4a and	4D		This is your total gua	tranteeu payments	5	00
5 Interest income					6	250 00
6 Ordinary dividend	is					4984 00
7 Royalties					7	00
	ipital gain (loss) (include fede				8	00
	oital gain (loss) (include fede				9	
	gain (loss) (include federal F				10	00
11 Other income (los	ss) (include detailed stateme	ent)			11	00
	gh 11 and enter result.		This is your total fede			2234 00
			Source Income (include f			
13a Section 179	deduction (include federal F	form 4562)	13a	150 00		
13b Contribution	s		13b	0.0		
13c Investment i	nterest expense		13c	0.0		
13d Section 59(e	e)(2) expenditures (include d	etailed statement)	13d	0.0		
	ctions (include detailed stater		13e	100 00)	
13 Add lines 13a thro	ough 13e and enter result.		This is your total fe	deral deductions.	13	250 00
14 Subtract line 13 fr			This is your federal income	from all sources.	14	1984 00
	s to the PTE's apportionable	e activities			15	00
	btractions from the PTE's ap		16a	0.0)	
	here income (loss) from fed		16b	0.0)	
	here income (loss) from dis		16c	0.0)	
	portionable income (loss) from		16d	0.0)	
16 Add lines 16a thre			ur deductions including nonapp	ortionable income	e. 16	00
	15, then subtract line 16.				17	1984 00
		ctivity or enter your apportionment	factor			
× 100% Mo	-		. 0000 % Apportionment facto	or x line 17	18	1984 00
	na source income received f					removed (E) (E)
		dules K-1 issued to this entity)	19a	00)	
	na source income from Sche		19b	00		
			19c	00		
5,000	nable income allocated to M		napportionable income (loss) s			00
19 Add lines 19a thr		i ins is the total no	This is your total Monta			1984 00
20 Add lines 18 and	19; enter result.		rnis is your total Monta	ana source moone	s. 4U	1704 00



News Mont C gover 1 Tro	FEIN	2 0	3 3 3 3	3 3	3
Name Test S-corp 1 Inc Prepayments	LIN	7			(3/3
	you made estimated payments using the annualization method (See instructions)	21			00
22 2023 overpayment applied to 2024	you made estimated payments using the annualization method (eee includes)	22			00
23 Add lines 21 and 22.	Total prepayments	23			00
Pass-through Entity Tax, Composite	The second secon				
	tity tax from all owners' MT Schedules K-1, Part IV, line 14 (see instructions)	24			00
25 Total pass-through entity tax from all owners' MT		25			00
26 Flow-Through Payments Schedule, Column A, li		26			00
27 Subtract lines 23 and 26 from line 25.	Pass-through entity tax due or (overpayment).	. 27			00
28 Total composite tax from Schedule IV, Column H		28			00
29 Flow-Through Payments Schedule, Column B, I		29			00
30 Add lines 27 and 28, then subtract line 29.	Composite tax and pass-through entity tax due or (overpayment).	. 30			00
31 Interest on underpayment of estimated tax (see		31			00
32 Total pass-through withholding from all owners' N		32			00
33 PTE's tax liability resulting from an adjustment to		33			00
34 Flow-Through Payments Schedule, Column C, I		34			00
35 Add lines 32 and 33, then subtract line 34.	Pass-through withholding and other partnership liability due or (overpayment).	. 35			00
36 PTE information return late filing penalty		36			00
37 Add lines 30, 31, 35, and 36.	Total PTE taxes with interest and/or penalty	. 37			00
Amended Return					
38 For amended returns only - previously issued re-	funds	38			00
39 For amended returns only - payments made with		39			00
40 Add lines 37 and 38, then subtract line 39.		40			00
Penalty and Interest					
41 Late payment penalty		41			00
42 Interest		42			00
43 Add lines 40 through 42.	Total tax, penalties, and interest	. 43			00
Amount Owed or Refund					
44 If line 43 is more than zero, enter the amount he	ere. This is the amount you owe	. 44			00
45 If line 43 is less than zero, enter the amount here		. 45			00
46 Enter the amount from line 45 that you want app		46			00
47 Subtract line 46 from line 45.	This is your refund	. 47			00
Direct Denocit Vour Potund Co	mplete 1. 2. and 3. (See instructions)				
Direct Deposit Your Refund Cor	implete 1, 2, and 3. (See instructions)				
1 Routing Number	Checking	Saving	ns		
2 Account Number	account that is located outside of the United States or its territories.	Odving	90		
3 Mark this box if this refund is going to an REQUIRED – Signature, Paid Prep					
Index penalties of false swearing I declare that I have	re examined this return, including accompanying schedules and statements, and to the	e best of r	nv knowleda	e and beli	ief, it is
true, correct, and complete.	o oxaminod the retain, modeling accompanying constance and statement, and to a		.,		(80.9 Julio (20)
Officer					
Signature x	Date	e Signed	0 8 1	9 2	0 2 4
Printed Name Rebakah Cooper			4062		
Tax Preparer					
Signature	Date	e Signed	0 8 1	9 2	0 2 4
Print Name Tamora Pierce			6 3 9 8		
➤ Mark this box if you allow the DOR to discuss	this tax return with your tax preparer.		P 8 4 2		
Tax Preparation Firm					
Firm Name Provost Guard	Fim!	s FEIN	1 2 7 2	4 3 2	4 9
Mailing Address 2 Jane Street					
City Corus	State N Y ZIP 106112009				
Pass-Through Entity Tax Authoriz	zed Representative: Required if making a PTET Election	n (Se	e instruc	tions)	
Name	Title	ruett,	Telephone I	Number	
Pounce Hestaka	Manager		5 9 4 7		618
	onstellation.com				





2024 Montana Form PTE – Flow-Through Payments Schedule



Name Test S-corp 1 Inc

FEIN 2 0 3 3 3 3 3 3 3

Part I. Montana Schedules K-1 received by the pass-through entity reporting mineral royalty withholding, pass-through withholding, and/or pass-through entity tax. Attach a statement with the same information if the PTE received more than four Montana Schedules K-1 reporting mineral royalty withholding, pass-through withholding, and/or pass-through entity tax.

Entity Name	FEIN	A Mineral Royalty Withholding Received	Pass-Through Withholding Received	Pass-Through Entity Tax Received
1 Royalty PTR	120000001	117 00	00	00
2		00	00	00
3		00	00	00
4		00	00	00
	5 Totals	117 00	00	00

Part II. Flow-through payment allocations (See instruction	ns)	Sc	hedules K-1 subject to:	
		Α	В	С
		Pass-Through Entity Tax	Composite Tax	Other
1 Sum of profit and loss percentage of all MT Schedules K-1				
subject to applicable Column(s) A, B, and C	1	%	%	100.0000 %
2 Multiply total in Part I, Column A by percentage on line 1 for each Column	2	00	00	117 00
3 Mineral royalty withholding passed to owners	3			00
4 Enter Column A, line 2 and Column B, line 2.				
Subtract Column C, line 3 from Column C, line 2.				
Balance of mineral royalty withholding the PTE can claim as a credit.	4	00	00	00
5 Multiply total in Part I, Column B by percentage on line 1 for each Column	5	00	00	00
6 Pass-through withholding passed to owners	6			00
7 Enter Column A, line 5 and Column B, line 5.				
Subtract Column C, line 6 from Column C, line 5.				
Balance of pass-through withholding the PTE can claim as a credit.	7	00	00	00
8 If Column A, line 1 is greater than 0%, enter the total from Part I, Column C	8	00		
9 If Column A, line 1 is 0%, multiply the total in Part I, Column C				'
by Columns B and C, line 1	9		00	00
10 Total pass-through entity tax passed to owners	10			00
11 Enter Column B, line 9.				
Subtract Column C, line 10 from line 9.			9 2	
Credit balance for PTE not electing to pay PTET.	11		00	00
12 Add lines 4, 7, 8, and 11 in each Column.				
Total payments the PTE can claim as a credit.	12	00	00	00





2024 Montana Form PTE Schedule I – Apportionment Factor for Multistate Pass-Through Entities



Property Factor: Use average value for real and tangible personal property Everywhere Montana Factor Property Factor: Use average value for real and tangible personal property Everywhere Montana Factor Property Factor: Use average value for real and tangible personal property Everywhere Montana Oc.	Name Test S-corp 1 Inc		FEIN 2 0	3 3	3 3 3 3	3
Table Tabl	The state of the s	C. A	В		C	
Lamed	1 Property Factor: Use average value for real and tangible personal property	Everywhere	Montana		Factor	
1c Machinery 1c		1a	00		00	
C. Machinery	1b Buildings	1b	00		00	
1		1c	00		00	
If Leases and leased property If I no 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		1d	00		00	
In teases and reason Polenty In the peletable assets In	1e Furniture and fixtures	1e	00		00	
The pletetable assets 1h 000 001 It Supplies and other 1i 000 001 It Supplies and other 1i 000 000 It Total Property Value, add lines 1a through 1j 1k 000 000 It Total Property Value, add lines 1a through 1j 1k 000 000 This is your property factor. 1 % Payroll Factor: 2a Compensation of officers 2a 00 00 000 Payroll included in: 2c Costs of goods sold 2c 000 000 Payroll included in: 2c Costs of goods sold 2d 000 000 2d Other expenses and deductions 2dd 000 000 2d Other expenses and deductions 2dd 000 000 2d Total Property Value, Add lines 2a through 2d. 2e 000 000 2d Other expenses and eductions 2dd 000 000 2d Total Property Value, Add lines 2a through 2d. 2e 000 000 3 Gross Receipts Factor: 3 Gross Receipts feators 3 Gross Receipts delivered or shipped to Montana purchasers: (1)Shipped from outside Montana (2)Shipped from within Montana 3b Receipts delivered or shipped to Montana purchasers: (1)United States government (2)Purchasers in a state where the taxpayer is not taxable 3d Receipts where the ne receipts of tangible personal property (e.g., service income) 3d Receipts other than receipts of tangible personal property (e.g., service income) 3d Other gross receipts (ents, royallies, interest, etc.) 3f 000 000 3d Pake glains reported on federal Schedule D and Form 4797 3e 000 000 3d Pake glains reported on federal Schedule D and Form 4797 3e 000 000 3d Pake glains reported on federal Schedule D and Form 4797 3e 000 000 3d Total Receipts Value. Add lines 3a through 3f. 00 000 3d Total Receipts Value. Add lines 3a through 3f. 00 000 3d Total Receipts from lines 1, 2, 3, and 4 in Column C. This is the sum of your factors. 5 % 6 Divide the total in Column B by the total in Column C, by the number of factors that can be included in the calculation. Here is a value in Column A (See instructions).	1f Leases and leased property	1f	00		00	
If is Supplies and other of rents by 8 and enter result if if if if if if if if if it is gour property factor. If it is gour property factor. If it is gour property factor. If it is gour payroll included in: 2. Costs of goods sold	1g Inventories	1g	00		00	
if Multiply amount of rents by 8 and enter result 1j 000 00 1k Total Property Value, add lines 1a through 1j 1k 00 00 00 1k Total Property Value, add lines 1a through 1j 1k 00 00 00 2 Payroll Factor: 2a Compensation of officers 2a 00 00 00 2b Salaries and wages 2b 00 00 00 2c Sost of goods sold 2c 00 00 00 2d Other expenses and deductions 2d 00 00 00 2d Total Property Value, Add lines 2a through 2d. 2e 00 00 00 2d Total Property Value, Add lines 2a through 2d. 2e 00 00 00 3 Gross Receipts Factor: 3a Gross Receipts, less returns and allowances 3a 00 3b Receipts Seators 3a Gross Receipts, less returns and allowances 3a 00 3b Receipts Seators (1)Shipped from utside Montana purchasers: (1)Shipped from Whith Montana 1c: (1)United States government 3d(1) 00 (2)Purchasers in a state where the taxpayer is not taxable 3d Receipts of trangible personal property (e.g., service income) 3d Net gains reported on federal Schedule D and Form 4797 3e 00 3d Receipts Value, Add lines 3a through 3f 00 00 3g Total Receipts Value, Add lines 3a through 3f 00 00 3g Total Receipts Value, Add lines 3a through 3f 00 00 3g Total Receipts Value, Add lines 3a through 3f 00 00 4 Enter the amount reported on line 3 00 00 5 Add the percentages from lines 1, 2, 3, and 4 in Column C. by the number of factors that can be included in the calculation. If a property, payroll, or receipts factor is 09%, it is included in the calculation of line 6 if there is a value in Column A (See instructions).	1h Depletable assets	1h	00			
This Total Property Value. add lines 1 at hrough 1 j 1k 00 00 00 00 00 00 00 00 00 00 00 00 00	1i Supplies and other	1i	00			
Divide the total in Column B by the total in Column A. Multiply the result by 100. Payroll Factor: 2 a 000 000 2 b Salaries and wages 2b 000 000 2 b Salaries and wages 2b 000 000 2 b Salaries and wages 2b 000 000 2 b Salaries and wages 2c 000 000 2 b Salaries and wages 2b 000 000 2 b Salaries and wages 2b 000 000 2 b Costs of goods sold 2c 000 000 2 d Other expenses and deductions 2d though 2d 000 000 2 b Total Property Value. Add lines 2a through 2d 2d 000 000 2 b Total Property Value. Add lines 2a through 2d 2d 000 000 3 Gross Receipts Factor: 3 a Gross Receipts Factor: 3 a Gross Receipts Factor: 3 a Breceipts Gelivered or shipped to Montana purchasers: (1)Shipped from within Montana 3b (1) 000 (2)Shipped from within Montana 10: (2)Shipped from Wintland 10: (2)Purchasers in a state where the taxpayer is not taxable 3c(2) 000 3 d Receipts other than receipts of tangible personal property (e.g., service income) 3c(2) 000 3 d Receipts other than receipts of tangible personal property (e.g., service income) 3c(2) 000 3 d Receipts Value. Add lines 3 at brough 3t 100 3 d Tother gross receipts (rents, royalties, interest, etc.) 3f 000 3 d Tother gross receipts (rents, royalties, interest, etc.) 3f 000 3 d Tother gross receipts (rents, royalties, interest, etc.) 3f 000 3 d Tother gross receipts (rents, royalties, interest, etc.) 3f 000 3 d Tother gross receipts (rents, royalties, interest, etc.) 3f 000 3 d Tother gross receipts (rents, royalties, interest, etc.) 3f 000 3 d Tother gross receipts (rents, royalties, interest, etc.) 3f 000 3 d Tother gross receipts (rents, royalties, interest, etc.) 3f 000 3 d Tother gross receipts (rents, royalties, interest, etc.) 3f 000 3 d Tother gross receipts (rents, royalties, interest, etc.) 3f 000 3 d Tother gross receipts (rents, royalties, interest, etc.) 3f 000 3 d Tother gross receipts (rents, royalties, interest, etc.) 3f 000 3 d Tother gross receipts (rents, royalties, interest, etc.) 3f 000 3 d Tother gross receipts (rents, royalties, interest, etc.) 3f 000 3 d Tother g	1j Multiply amount of rents by 8 and enter result	1j			00	
2 Payroll Factor: 2a Compensation of officers 2a 000 2b Salaries and wages 2b 000 2c Osts of goods sold 2c 000 2d Other expenses and deductions 2d 000 2e Total Property Value. Add lines 2a through 2d. 2e 000 2b Gross Receipts Factor: 3a Gross Receipts Ses returns and allowances 3a 00 3b Receipts Gelivered or shipped to Montana purchasers: (1)Shipped from outside Montana (2)Shipped from within Montana 3c Receipts shipped from Wontana to: (1)United States government (2)Purchasers in a state where the taxpayer is not taxable 3d Receipts other than receipts of tangible personal property (e.g., service income) 3d Receipts other than receipts factor as a through 3f 00 3f Other gross receipts (rents, royalties, interest, etc.) 3f Total Receipts Value. Add lines 3a through 3f. Divide the total in Column B by the total in Column C, by the number of factors that can be included in the calculation. If a property, payrol, or receipts factor is 0%, it is included in the calculation for line 6 if there is a value in Column A (See instructions).	1k Total Property Value. add lines 1a through 1j	1k	00		00	
2	Divide the total in Column B by the total in Column A. Multiply the result by 100.		This is your property factor.	. 1		%
2b Salaries and wages 2b 00 00 00 Payroll included in: 2c Costs of goods sold 2c 00 00 00 00 2d Other expenses and deductions 2d 00 00 00 2d Other expenses and deductions 2d 00 00 00 2d Other expenses and deductions 2d 00 00 00 2d Other expenses and deductions 2d by the total in Column B by the total in Column A Multiply the result by 100. This is your payroll factor. 2 % 3 Gross Receipts Factor: 3a Gross Receipts Factor: 3a Gross Receipts delivered or shipped to Montana purchasers: (1)Shipped from outside Montana (2)Shipped from within Montana 1o: (1)United States government 3c(1) 00 00 00 00 00 00 00 00 00 00 00 00 00						
Payroll included in: 2c Costs of goods sold 2c 00 00 00 2d Other expenses and deductions 2d 00 00 2e Total Property Value. Add lines 2a through 2d 2e 00 00 Divide the total in Column B by the total in Column A. Multiply the result by 100. This is your payroll factor. 2 % 3 Gross Receipts Factor: 3a Gross Receipts Seivered or shipped to Montana purchasers: (1) Shipped from outside Montana (2) Shipped from Montana purchasers: (1) Shipped from within Montana 10: (2) Shipped from Montana to: (1) United States government 3c(1) (2) Purchasers in a state where the taxpayer is not taxable 3c(2) 3d Receipts other than receipts of tangible personal property (eg., service income) 3d 00 3d Receipts other than receipts of tangible personal property (eg., service income) 3d 00 3f Other gross receipts (rents, royalties, interest, etc.) 3f 00 3g Total Receipts Value. Add lines 3a through 3f. 3g 00 Divide the total in Column B by the total in Column A. Multiply the result by 100. This is your receipts factor. 3 % 4 Enter the amount reported on line 3 . 3, 3, and 4 in Column C. This is the sum of your factors. 5 % 6 Divide the total percentages from lines 1, 2, 3, and 4 in Column C. This is the sum of your factors. 5 %	2a Compensation of officers	2a				
2c Costs of goods sold 2d Other expenses and deductions 2d Other expenses and deductions 2e Total Property Value. Add lines 2a through 2d. 2e OO Divide the total in Column B by the total in Column A. Multiply the result by 100. This is your payroll factor. 3a Gross Receipts Factor: 3a Gross Receipts Factor: 3a Gross Receipts less returns and allowances 3a Gross Receipts delivered or shipped to Montana purchasers: (1)Shipped from outside Montana (2)Shipped from within Montana (2)Shipped from within Montana to: (1)United States government (2)Purchasers in a state where the taxpayer is not taxable 3d Receipts other than receipts of tangible personal property (e.g., service income) 3e Net gains reported on federal Schedule D and Form 4797 3e 00 3f Other gross receipts (rents, royalties, interest, etc.) 3f 00 3f Total Receipts Value. Add lines 3a through 3f. 2g Total Receipts Value. Add lines 3a through 3f. 4 Enter the amount reported on line 3 5 Add the percentages from lines 1, 2, 3. and 4 in Column C. If is property, payroll, or receipts factor is 0%, it is included in the calculation for line 6 if there is a value in Column A (See instructions).	2b Salaries and wages	2b	00		00	
2d Other expenses and deductions 2d 00 00 2e Total Property Value. Add lines 2a through 2d. 2e 00 00 Divide the total in Column B by the total in Column A. Multiply the result by 100. This is your payroll factor. 2 % 3 Gross Receipts Factor: 3a Gross Receipts Factor: 3a Gross Receipts less returns and allowances 3a 00 3b Receipts delivered or shipped to Montana purchasers: (1) Shipped from outside Montana (2) Shipped from within Montana 3b(2) 00 3c Receipts of throw within Montana 0 3b(2) 00 3c Receipts of throw within Montana to: (1) United States government 3c(1) 00 (2) Purchasers in a state where the taxpayer is not taxable 3c(2) 00 3d Receipts other than receipts of tangible personal property (e.g., service income) 3d 00 3e Net gains reported on federal Schedule D and Form 4797 3e 00 3f Other gross receipts (rents, royalties, interest, etc.) 3f 00 3g Total Receipts Value. Add lines 3a through 3f. 3g 00 Divide the total in Column B by the total in Column A. Multiply the result by 100. This is your receipts factor. 3 % 4 Enter the amount reported on line 3	Payroll included in:					
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Divide the total in Column B by the total in Column A. Multiply the result by 100. This is your payroll factor. This is the sum of your factors.	2d Other expenses and deductions	2d	00		00	
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(2)Shipped from within Montana 3b(2) 3c Receipts shipped from Montana to: (1)United States government (2)Purchasers in a state where the taxpayer is not taxable 3c(2) 3d Receipts other than receipts of tangible personal property (e.g., service income) 3d Receipts other than receipts of tangible personal property (e.g., service income) 3e Net gains reported on federal Schedule D and Form 4797 3e 00 3f Other gross receipts (rents, royalties, interest, etc.) 3f 00 3g Total Receipts Value. Add lines 3a through 3f. 3g 00 This is your receipts factor. This is your receipts factor. 4 % 5 Add the percentages from lines 1, 2, 3. and 4 in Column C. This is the sum of your factors. This is the sum of your factors. This is the sum of your factors.	3b Receipts delivered or shipped to Montana purchasers:					
3c Receipts shipped from Montana to: (1)United States government (2)Purchasers in a state where the taxpayer is not taxable 3c(2) 3d Receipts other than receipts of tangible personal property (e.g., service income) 3e Net gains reported on federal Schedule D and Form 4797 3e 3e 100 3f Other gross receipts (rents, royalties, interest, etc.) 3f 00 3g Total Receipts Value. Add lines 3a through 3f. 3g 00 This is your receipts factor. 4 Enter the amount reported on line 3 5 Add the percentages from lines 1, 2, 3. and 4 in Column C. 6 Divide the total percentage from line 5, Column C, by the number of factors that can be included in the calculation. If a property, payroll, or receipts factor is 0%, it is included in the calculation for line 6 if there is a value in Column A (See instructions).	(1)Shipped from outside Montana		3b(1)			
(1)United States government (2)Purchasers in a state where the taxpayer is not taxable 3c(2) 3d Receipts other than receipts of tangible personal property (e.g., service income) 3d Receipts other than receipts of tangible personal property (e.g., service income) 3e Net gains reported on federal Schedule D and Form 4797 3e 00 3f Other gross receipts (rents, royalties, interest, etc.) 3f 00 3g Total Receipts Value. Add lines 3a through 3f. 3g 00 Divide the total in Column B by the total in Column A. Multiply the result by 100. This is your receipts factor. 4 Enter the amount reported on line 3 5 Add the percentages from lines 1, 2, 3. and 4 in Column C. This is the sum of your factors. 5 6 Divide the total percentage from line 5, Column C, by the number of factors that can be included in the calculation. If a property, payroll, or receipts factor is 0%, it is included in the calculation for line 6 if there is a value in Column A (See instructions).	(2)Shipped from within Montana		3b(2)		00	
(2)Purchasers in a state where the taxpayer is not taxable 3c(2) 3d Receipts other than receipts of tangible personal property (e.g., service income) 3e Net gains reported on federal Schedule D and Form 4797 3e 00 3f Other gross receipts (rents, royalties, interest, etc.) 3f 00 3g Total Receipts Value. Add lines 3a through 3f. Divide the total in Column B by the total in Column A. Multiply the result by 100. This is your receipts factor. 4 6 Divide the total percentages from lines 1, 2, 3. and 4 in Column C. This is the sum of your factors. This is the sum of your factors. This is the sum of your factors.	3c Receipts shipped from Montana to:					
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3e Net gains reported on federal Schedule D and Form 4797 3e Net gains reported on federal Schedule D and Form 4797 3f Other gross receipts (rents, royalties, interest, etc.) 3g Total Receipts Value. Add lines 3a through 3f. Divide the total in Column B by the total in Column A. Multiply the result by 100. 4 Enter the amount reported on line 3 5 Add the percentages from lines 1, 2, 3. and 4 in Column C. This is the sum of your factors.	(2)Purchasers in a state where the taxpayer is not taxable		3c(2)			
3f Other gross receipts (rents, royalties, interest, etc.) 3g Total Receipts Value. Add lines 3a through 3f. Divide the total in Column B by the total in Column A. Multiply the result by 100. 4 Enter the amount reported on line 3 5 Add the percentages from lines 1, 2, 3. and 4 in Column C. 6 Divide the total percentage from line 5, Column C, by the number of factors that can be included in the calculation. If a property, payroll, or receipts factor is 0%, it is included in the calculation for line 6 if there is a value in Column A (See instructions).	3d Receipts other than receipts of tangible personal property (e.g., service income)					
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Divide the total in Column B by the total in Column A. Multiply the result by 100. This is your receipts factor. This is the sum of your factors.	3f Other gross receipts (rents, royalties, interest, etc.)	3f	00			
4 Enter the amount reported on line 3 5 Add the percentages from lines 1, 2, 3. and 4 in Column C. 6 Divide the total percentage from line 5, Column C, by the number of factors that can be included in the calculation. If a property, payroll, or receipts factor is 0%, it is included in the calculation for line 6 if there is a value in Column A (See instructions).	3g Total Receipts Value. Add lines 3a through 3f.	3g			00	
5 Add the percentages from lines 1, 2, 3. and 4 in Column C. 6 Divide the total percentage from line 5, Column C, by the number of factors that can be included in the calculation. If a property, payroll, or receipts factor is 0%, it is included in the calculation for line 6 if there is a value in Column A (See instructions).	Divide the total in Column B by the total in Column A. Multiply the result by 100.		This is your receipts factor	. 3		
6 Divide the total percentage from line 5, Column C, by the number of factors that can be included in the calculation. If a property, payroll, or receipts factor is 0%, it is included in the calculation for line 6 if there is a value in Column A (See instructions).				4		
If a property, payroll, or receipts factor is 0%, it is included in the calculation for line 6 if there is a value in Column A (See instructions).				. 5		%
	6 Divide the total percentage from line 5, Column C, by the number of factors that can	be included in the calculation	on.			
This is your apportionment factor. 6 100.0000 %	If a property, payroll, or receipts factor is 0%, it is included in the calculation for line 6	if there is a value in Colum				
			This is your apportionment factor	. 6	100.000	0 %





Test S-corp 1 Inc

2024 Montana Form PTE Schedule II – Montana Pass-Through Entity Tax Credits

Use the corresponding credit code in the instructions to report the credit you are claiming in Column A. If you were provided an authorization number to claim the credit, enter that



FEIN 2 0 3 3 3 3 3 3 3

number in Column B. Report the total amouto your return (if applicable). See instruction	unt of credit in Column C. Use Montana Schedule K-1 to notify each owner of their share information.	nare of the credit. Attach a copy of the credit's form
A	B B	C
Credit Code	Credit Authorization Number	Amount of Credit
1		00
2		00
3		00
4		00
		0.0



2024 Montana Form PTE Schedule IV – Montana Composite Income Tax Schedule

2024v1 5/2024

3

FEIN

Test S-corp 1 Inc Name

Part I. Eligible Participating Owners

Enter the number of eligible participating owners. See instructions for more information about eligible participants

Part II. Adjusted Federal Income		Part III. Composite Tax Ratio		
1 Federal income from all sources from page 1, line 14	1 00	1 Total Montana source income from page 1, line 20	00	
2 Total guaranteed payments for services from page 1, line 4a	2 00	2 Multiply Part II, line 2 by the apportionment factor from		
3 Total Everywhere Additions from Montana Adjustments Worksheet,		Schedule I, line 6	00	37
Column E, line 1	3 00	3 Subtract line 2 from line 1. Adjusted Montana source income	00	
4 Total Everywhere Subtractions from Montana Adjustments		4 Divide line 3 by Part II, line 5. (Do not enter more than 1.000000).		
Worksheet, Column E, line 2	4	Composite tax ratio		
5 Add lines 1 and 3, then subtract lines 2 and 4.				
Adjusted federal income	90			

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Part
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Enter the required information and	Enter the required information and amounts for each eligible participants in Columns A-H.	ants in Columns A-H					
4	8	O	0	ш	L	ŋ	I
Name	Social Security	Total	(Partnerships only)	Standard	Subtract	Tax from Tax Table	Multiply Column G by
	Number	Distributive	Guaranteed Payments	Deduction	Columns D and E	(See instructions)	composite tax ratio from
	ю	Share from	for Services	(\$14,600)	from Column C		Part III, Line 4
	Federal Employer	Owner's	from Owner's		Montana Taxable Income		Montana Composite
	Number		Part IV, Line 4a				
		Part IV,					
-			00		00	00	00
5			00		00	0	
l m			00		00	Ō	
4			00		00	Ō	
· Ko			00		00	00	00
9			00		00	Ō	
7			00		00	Ō	
80			00		00	0	
o			00		00	0	
10			00		00	00	



00

7 4

11 If there are more than 10 composite tax participants, attach a statement with the same information and report the total composite tax from those statements here.
12 Add Column H, lines 1 through 11. This is your total composite tax liability. Transfer the amounts from Column H to each owner's Schedule K-1, Part V, line 2



2024 Montana Form PTE Schedule VI – Reporting of Special Transactions



Name Test S-corp 1 Inc

CONTRACT OF	_	_	-	~	~	~	~	~	
FEIN	-)	()	3	4	3	3	3	3	

Complete Schedule VI only if your PTE filed any of the federal income tax forms described below. Mark the appropriate box indicating which form(s) you filed with the Internal Revenue Service (IRS) for this tax year. If you mark one or more of these forms, you must include a complete copy of your federal tax return.

- 1 The entity filed federal Form 8918 Material Advisor Disclosure Statement with the IRS
- 2 The entity filed federal Form 8824 Like-Kind Exchanges with the IRS. NOTE: Mark the box if your like-kind exchange includes Montana property.
- 3 The entity filed federal Form 8865 Return of U.S. Persons with Respect to Certain Foreign Partnerships with the IRS
- 4 The entity filed federal Form 8886 Reportable Transaction Disclosure Statement with the IRS
- For S corporations only: The S corporation filed federal Form 8023 Elections Under Section 338 for Corporations Making Qualified Stock Purchases with the IRS

Complete this section if the PTE is a partnership.

6 The partnership filed one or more of the following forms in 2024

Provide a copy of each form with your tax return.

- Federal Form 8985, Pass-Through Statement Transmittal/Partnership Adjustment Tracking Report
- Federal Form 8986, Partner's Share of Adjustment(s) to Partnership-Related Items(s)
- Federal Form 8082, Notice of Inconsistent Treatment or Administrative Adjustment Request (AAR)
- 7 The partnership had Montana source income and paid an imputed underpayment.
 If applicable, provide a copy of your federal audit adjustment report. (See instructions)
- 8 Previously unreported Montana source income from Federal Form 8082 (See instructions)

8

00

Complete this section if you made a disbursement to a related party.

The entity made payments during this tax year to one or more related parties (excluding salary compensation) that exceeded \$100,000 per recipient.

If you marked this box, please provide the name and federal employer identification number of each related party below and the amount that you paid to each related party:

Α
Name

B FEIN C

Amount of Payment

00

00

00



2024 Montana Form PTE – Montana Adjustments Worksheet

2024v1 5/2024

REVENUE						
Name Test S-corp 1 Inc					NEW	20333333
Montana Adjustments to Everywhere Income	here Incon	ne A	മ	O	٥	ш
1 Montana Additions	Code	PTE's Apportionable Activities	Nonapportionable Income	From MT Schedules K-1, Part 3, Column A	From Schedules DE, Column A, Lines 15 and 16	Total Everywhere Adjustments
		00	00		00	00
		00			0	00
		00				00
		00	00	00	00	00
		00				00
		00		00		00
2 Montana Subtractions	Total	00				00
from Everywhere Income					のでは、 からないのは、	
		00	00	00	00	00
		00	00	00		00
		00	00	00		00
		00	00	00	00	00
		00	00	00		00
		00				00
	Total	00	00	00	00	00
Adjustments to Montana Source Income	Income	4	8	O	٥	Ш
		PTE's Apportionable	Nonapportionable Income	From MT Schedules K-1,	From Schedules DE,	Total Montana Source
3 Montana Source Additions	Code	Activities		Part 3, Column B	Column B, Lines 15 and 16	Income Adjustments
		00	00		00	00
		00				00
		00		00		00
		00			18	00
		00	00			00
		00				00
	Total	00	00	00	00	00
4 Montana Source Subtractions						
		00				00
		00				00
		00				00
		00				00
		00			00	00
		00				00
	Total	00	00	00	00	00





2024 Montana Form PTE – Montana Source Income Schedule

2024v1 5/2024

1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
Name Test S-corp 1 Inc					NEL	203333333
		4	a	O	۵	Ш
		Montana Source Income	Montana Source Income	Montana Source Income	Montana Source Income	Total of
Sum of Montana source income		from	from	from	from PTE's	Columns A through D
per item of income (loss) and deduction.		Montana Schedules K-1	Schedules DE	Nonapportionable Income	Apportionable Activities	
1 Ordinary business income (loss)	-	00	00	00	5000 00	2000 00
2 Net rental real estate income (loss)	2	00	00	00	-5000 00	-5000 00
3 Other net rental income (loss)	3	00	00	00	-3000 00	-3000 00
4a Guaranteed payments: services	4 a	00	00	00	00	00
4b Guaranteed payments: capital	49	00	00	00	00	00
5 Interest income	2	00	00	00	00	00
6 Ordinary dividends	9	00	00	00	250 00	250 00
7 Royalties	7	00	00	00	4984 00	4984 00
8 Net short-term capital gain (loss)	80	00	00	00	00	00
9 Net long-term capital gain (loss)	6	00	00	00	00	00
10 Net §1231 gain (loss)	10	00	00	00	00	00
11 Other income (loss).	F	00	00	00	00	00
12 §179 expense deduction apportionable						
and/or allocable to Montana	12	00	00	00	150 00	150 00
13 Other expense deductions apportionable						
and/or allocable to Montana	13	00	00	00	100 00	100 00
14 Total Montana Source Income	14	00	00	00	1984 00	1984 00





Montana Schedule K-1

(PTE)

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

X Final Schedule K-1 Amended Schedule K-1 Mark applicable boxes: Part I. Pass-through Entity Information **FEIN** 203333333 Name Test S-corp 1 Inc Mailing Address 246 Nipcopper Close NY ZIP Code 106112009 State City Corus Part II. Owner Information **FEIN** Name Owner One 300000001 or SSN Mailing Address 1 Court Street 9 0 0 2 1 1 6 0 1 Beneficial Owner FEIN State N Y ZIP Code City Dancing Dove

or SSN

Owner Type I Resident X Nonresident

Special Allocations (See instructions)

The owner is included in a PTET election

Profit and loss percentage
Capital/Ownership

50.0000 %

50.0000 %

Resident owner PTET election (See instructions)
The owner is included in a composite income tax return

		A	В
Part III. Montana Adjustments (See worksheet on p	page 9)	Everywhere	Montana
1 Additions	1	00	00
2 Subtractions	2	00	00
Part IV. Distributive Share of Montana Source Inc	ome (Loss)		
1 Ordinary business income (loss)	, 1	2500 00	2500 00
2 Net rental real estate income (loss)	2	-2500 00	-2500 00
3 Other net rental income (loss)	3	-1500 00	-1500 00
4a Guaranteed payments: services	4a	00	00
4b Guaranteed payments: capital	4b	00	00
5 Interest income	5	00	00
6 Ordinary dividends	6	125 00	125 00
7 Royalties	7	2492 00	2492 00
8 Net short-term capital gain (loss)	8	00	00
9 Net long-term capital gain (loss)	9	00	00
10 Net section 1231 gain (loss)	10	00	00
11 Other income (loss) (include detailed statement)	11	00	00
12 Section 179 expense deduction	12	75 00	75 00
13 Other expense deductions	13	50 00	50 00
14 Total distributive share (See instructions)	14	992 00	992 00
Part V. Supplemental Information			
The owner filed Form DT ACD Veer	The owner is a Domestic	2nd tier PTF	

Part V. Supplemental Information			
The owner filed Form PT-AGR Year	The owner is a Do	omestic 2nd tier PTE	
1 PTET paid on behalf of owner. (See instructions)		1	00
2 Montana composite income tax paid on behalf of ow	mer	2	00
3a Montana income tax withheld on behalf of owner. (S	ee instructions)	3a	0.0
3b Montana income tax withheld by a lower tier pass-th	rough entity	3b	00
3c Add lines 3a and 3b.		ncome tax withheld on your behalf. 3c	00
4 Montana mineral royalty tax withheld		4	00
5. Other information. List type	and amount	5 00	00

Part VI. Tax Credits	Credit Authorization Number	Amount of Credit
Code	Credit Authorization Number	Amount of orealt
1		00
,		0.0
2		00
	Details February and and of each adjustment entered on Dort 2	(Con instructions)

Part VII. Montana Adjustments Detail: Enter the amount and code of each adjustment entered on Part 3. (See instructions)

 1 Code
 00
 2 Code
 00
 3 Code
 00

 4 Code
 00
 5 Code
 00
 6 Code
 00





Code

1

Montana Schedule K-1 (PTE)

Clear Form

2024v1 5/2024

Owner's Share of Income (Loss), Deductions, Credits, etc.

For the calendar year 2024, or tax year beginning 0 1 0 1 2 0 2 4 and ending 1 2 3 1 2 0 2 4

X Final Schedule K-1 Amended Schedule K-1 Mark applicable boxes: Part I. Pass-through Entity Information **FEIN** 203333333 Name Test S-corp 1 Inc Mailing Address 246 Nipcopper Close ZIP Code 106112009 NY City Corus State Part II. Owner Information **FEIN** Name Owner Two 300000002 or SSN Mailing Address 1 Court Street N Y ZIP Code 9 0 0 2 1 1 6 0 1 Beneficial Owner FEIN City Dancing Dove or SSN X Nonresident Resident Owner Type Ι Profit and loss percentage 50.0000 % Special Allocations (See instructions) Capital/Ownership 50.0000 % The owner is included in a PTET election Resident owner PTET election (See instructions) The owner is included in a composite income tax return

Part III. Montana Adjustments (See worksheet on page 9)		Everywhere	Montana
1 Additions	1	00	00
2 Subtractions	2	00	0.0
Part IV. Distributive Share of Montana Source Income (L	oss)		
1 Ordinary business income (loss)	1	2500 00	2500 00
2 Net rental real estate income (loss)	2	-2500 00	-2500 00
3 Other net rental income (loss)	3	-1500 00	-1500 00
4a Guaranteed payments: services	4a	00	0.0
4b Guaranteed payments: capital	4b	00	00
5 Interest income	5	00	0.0
6 Ordinary dividends	6	125 00	125 00
7 Royalties	7	2492 00	2492 00
8 Net short-term capital gain (loss)	8	00	0.0
9 Net long-term capital gain (loss)	9	00	0.0
10 Net section 1231 gain (loss)	10	00	0.0
11 Other income (loss) (include detailed statement)	11	00	0.0
12 Section 179 expense deduction	12	75 00	75 00
13 Other expense deductions	13	50 00	50 00
14 Total distributive share (See instructions)	14	992 00	992 00
Part V. Supplemental Information			
The owner filed Form PT-AGR Year	The owner is a Domestic	2nd tier PTE	
1 PTET paid on behalf of owner. (See instructions)		1	00

 PTET paid on behalf of owner. (See instructions) 			1	00
2 Montana composite income tax paid on behalf of owner			2	00
3a Montana income tax withheld on behalf of owner. (See instru	uctions)		3a	00
3b Montana income tax withheld by a lower tier pass-through e	ntity		3b	00
3c Add lines 3a and 3b.		na income tax with	held on your behalf. 3c	00
4 Montana mineral royalty tax withheld			4	00
5 Other information. List type	and amount	5	00	00
Part VI. Tax Credits				

2					00
Part VII. Montana Adju	stments Detail: Enter th	e amount and code	e of each adjustment entered on Part 3. (See instructions)	
1 Code		2 Code		3 Code	00
A Code	0.0	5 Code	00	6 Code	00

Credit Authorization Number



00

00

Amount of Credit

Apportionable Income Worksheet

This Worksheet must be filed with the return. Use this worksheet to segregate the PTE's income per income type for lines 16b, 16c, and 16d, and determine the PTE's income that is apportioned to Montana (Column G) before adjustments. The PTE must include the amounts from Column G on the Montana Source Income Schedule, Column D.

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	A	B (line 16b)	C (line 16c)	D (line 16d)	Н	L	ŋ
	Federal Schedule K	Federal Schs K-1	DREs	Nonapportionabl	Apportionable	Apportionment factor	Income
				e income	Income	from Sch I, Line 5	apportioned to
					(A - B - C - D)		MT (E x F)
1 Ordinary buiness income (loss)	\$ 5,000		\$	- \$	\$ 2,000	100.0000%	\$ 5,000
2 Net rental real estate income (loss)	\$ (5,000)		- \$		(2,000)	100.000%	\$ (5,000)
3 Other net rental income (loss)	\$ (3,000)		\$		(3,000)	100.000%	\$ (3,000)
4a Guaranteed Payments - Services	- \$					100.000%	- \$
4b Guaranteed Payments - Capital	- \$		\$		- \$	100.000%	÷ - \$
5 Interest income	- \$		- \$		- \$	100.000%	\$
6 Ordinary dividends	\$ 250		- \$		\$ 250	100.0000%	\$ 250
7 Royalties	\$ 4,984		÷		\$ 4,984	100.000%	\$ 4,984
8 Net short-term capital gain (loss)	\$		÷ \$		- \$	100.000%	\$ -
9 Net long-term capital gain (loss)	\$		- \$		- \$	100.000%	\$
10 Net §1231 gain (loss)	\$		- \$		- \$	100.000%	\$ -
11 Other income (loss)	- \$		÷		- \$	100.000%	\$
12 §179 expense deduction							
apportionable and/or allocable to MT	\$ 150		\$		\$ 150	100.000%	\$ 150
13 Other expense deductions							
apportionable and/or allocable to MT	\$ 100		\$		\$ 100	100.000%	\$ 100
14 Total	\$ 1,984	- \$	\$	\$	\$ 1,984	100.000% \$	\$ 1,984

PTE Error Messages

The following table provides the answers we will provide to errors we may encounter on your initial submissions. The error messages are intended to assist you with the self-testing process. Once a submission has passed the initial Tests, or if a return continues to have errors, we will provide detailed feedback.

PTE Page #	PTE Line #	Description	Warning Message
1	Line 4	Guaranteed payments (Partnerships only)	If this value is incorrect, check that your Federal Schedule K values are corrects and transferred to the PTE correctly. This line is to report Guaranteed Payments.
1	Line 14	Subtract line 13 from line 12	If this value is incorrect, check the federal Schedule K values are correct and transferred to the PTE correctly. This line shows the total federal income.
1	Line 15	Montana additions to the PTE's apportionable activities	Verify that this figure transferred correctly from the Montana Adjustments Worksheet, Part 1, Column A. This line is for reporting apportionable Montana additions.
1	Line 16a	Montana subtractions from the PTE's apportionable activities	Verify that this figure transferred correctly from the Montana Adjustments Worksheet, Part 2, Column A. This line is for reporting apportionable Montana subtractions.
1	Line 18	Income (loss) Apportioned to Montana	Verify the ratio reported on Schedule 1 – Apportionment factor. This line is equal to the apportionment factor % multiplied by line 17.
1	Line 19	Add lines 19a through 19c	Verify line 19a (total MT source income from MT Schedules K-1, Part 5, line 14, Column B received from other pass-through entities). Verify line 19b (total MT source income from Schedule VII). Verify line 19c (see instructions for 19c). This is a sum line of 19a, 19b, and 19c.
1	Line 20	Add lines 18 and 19; enter result	Verify that lines 18 and 19 are correct. This is a sum line of 18 and 19.
2	Line 21	2024 Payments	This is a sum line of estimated and tentative payments. Review ATS packet for payments
2	Line 22	2023 overpayment applied to 2024	Check line 22 (see instructions).
2	Line 23	Add lines 21 and 22. Total prepayments	This line is the sum of all pre-payments for 2024.
2	Line 24	Total taxable income subject to Pass- through Entity Dax (PTET) from all owners' MT Schedules K-1, Part 4, Line 14	Sum line for all owners' MT Schedules K-1, Part 4, Line 14. (See instructions)
2	Line 25	Total Pass-through Entity Tax (PTET) from all owners' MT Schedules K-1, Part 5, Line 1	Sum line for Pass-through Entity Tax (PTET) from all owners' MT Schedule K-1, Part 5, Line 1. (See instructions)
2	Line 26	Flow-through Payments Schedule, Column A, Line 12	This line is from Column A, line 12 of the Flow-through payment Schedule. It is the total amount the PTE can claim as a credit from this column. (See instructions)
2	Line 27	Subtract Line 23 and 26 from line 25. Pass- through Entity Tax due or (overpayment)	Subtract line 23 and 26 from line 25. This equals your Pass-through Entity Tax due or overpaid.

2	Line 28	Total composite tax from Schedule IV, Column H	Total line of all Owners MT Schedules K-1 Part 5, Line 2. (See instructions)
2	Line 29	Flow-Through payment Schedule, Column B, Line 12	This line is from Column B, Line 12 of the Flow-Through Payment schedule. It is the total amount the PTE can claim as credit from this column. (See instructions)
2	Line 30	Add Line 27 and 28, then subtract Line 29. Composite tax and Pass-through Entity Tax due or (overpayment)	Subtract lines 27 and 29 from line 29. This equals your Composite tax due or overpaid.
2	Line 31	Interest on Underpayment of Estimated Tax (UT Penalty) (See instructions)	This line is for Interest on Underpayment of Estimated Tax (UT Penalty). It is associated with Supplemental form EST-PTI.
2	Line 32	Total Pass-through Withholding from all owners' MT Schedules K-1, Part 5, Line 3a	Total sum of all owners' MT Schedules K-1, part 5, Line 3a. (See instructions)
2	Line 34	Flow-Through Payments Schedule, Column C, Line 12	Amount is from Column C, Line 12 of the Flow-Through Payments schedule. It is the total amount the PTE can claim as a credit from this column.
2	Line 35	Add Lines 32 and 33, then subtract Line 34 Pass-through Withholding and other partnership liability dur or (overpayment)	This line is the sum Lines 32 and 33 minus Line 34. This is equals your Pass-through Withholding and other partnership liability due or overpaid.
2	Line 37	Add Lines 30, 31, 35, and 36. Total PTE Taxes with interest and/or penalty	This line is the sum lines 30, 31, 35 and 36. If this line is incorrect check prior calculations.
2	Line 43	Add lines 40 through 42. Total tax, penalties, and interest	This line is the sum of lines 40, 41, and 42. If this line is incorrect check prior calculations.
2	Line 44	If Line 43 is more than zero, enter the amount here. This is the amount you owe.	This is the amount you owe. If line 43 is more than zero enter the value here.
2	Line 45	If line 43 is less than zero, enter the amount here. This is your overpayment.	This is your overpayment if Line 43 is less than zero enter the value here.
2	Line 47	Subtract Line 46 from Line 45. This is your refund.	Subtract Line 46 from Line 45. This is your refund amount.