Form PTE

# **2022 Montana Pass-Through Entity Tax Return** Include a complete copy of all related federal forms and schedules.



No Staples

Federal Schedule K

Montana Source Income

S corporation X Partnership

Page 1 For calendar year 2022 or tax year beginning and ending

Mark all that apply: Name 261963994 Initial return Federal Business Code/NAICS

722511 DALEY VENTURES INC Final return Mailing Address MT Secretary of State ID# D181209

Amended return 13824 LONG SHADOW DR Date of Registration in Montana 02072008 State formed in TX on Refund return City State ZIP Code + 4 02072008

PTP TX 78653 MANOR

Enter Number of: Schedules DE Included 0 Schedules K-1 Included 1 Nonresident Owners 1 Resident Owners 0 Other Types of Owners 0 Schedules K-1 Received 0

Owners' Distributive Share of Income Items (federal Schedule K)					
1 Ordinary business income (loss)			1	-3259	00
2 Net rental real estate income (loss) (include federal Form 8825)			2		00
3a Other gross rental income (loss)	3a	00			
3b Expenses from other rental activities (include detailed statement)	3b	00			
3 Subtract line 3b from line 3a.	This is your other net rer	ntal income or loss.	3		00
4a Guaranteed payments: Services	4a	0 00			
4b Guaranteed payments: Capital	4b	0 00			
4 Add lines 4a and 4b	This is your total gua	aranteed payments.	4	0	00
5 Interest income			5		00
6 Ordinary dividends			6		00
7 Royalties			7		00
8 Net short-term capital gain (loss) (include federal Schedule D)			8		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
11 Other income (loss) (include detailed statement)			11		00
12 Add lines 1 through 11 and enter result.	This is your total fede	eral income or loss.	12	-3259	00
Owners' Distributive Share of Deduction Items (include federal Sc	:hedule K)				
13a Section 179 deduction (include federal Form 4562)	13a	00			
13b Contributions	13b	00			
13c Investment interest expense	13c	00			
13d Section 59(e)(2) expenditures (include detailed statement)	13d	00			
13e Other deductions (include detailed statement)	13e	00			
13 Add lines 13a through 13e and enter result.	This is your total	federal deductions.	13		00
14 Subtract line 13 from line 12.	This is your federal incon	ne from all sources.	14	-3259	00
15 Montana additions to the PTE's apportionable activities			15		00
16a Montana subtractions from the PTE's apportionable activities	16a	00			
16b Total everywhere income (loss) from federal Schedules K-1	16b	00			
16c Total everywhere income (loss) from disregarded entities	16c	00			
16d Other nonapportionable income (loss) from the PTE's own activities	16d	00			
16 Add lines 16a through 16d. This is your	r deductions including nonapp	portionable income.	16		00
17 Add lines 14 and 15, then subtract line 16.			17	-3259	00
Schedule I not required: X 100% Montana activity	0% Montana activity				
18 Income (loss) apportioned to Montana. Multiply line 17 x 100.	0000 %		18	-3259	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	00			
19c Nonapportionable income allocated to Montana. (See instructions)	19c	00			
19 Add lines 19a through 19c. This is the total nona	apportionable income (loss) s	ourced to Montana.	19		00
20 Add lines 18 and 19; enter result.	This is your total Monta	ana source income.	20	-3259	00



	04	Followers (Indiana Calculate Notation III)		04	
PTE Liability	21	Enter your total composite tax from Schedule IV, column H			00
<u>E</u> .		Enter the PTE's tax liability resulting from an adjustment to partnership income. (See			00
빝		Previously unreported Montana source income from federal Form 8082 (See instruc	,		00
ш.		Enter the sum of pass-through withholding from all owners' MT Schedules K-1, Part	5, line 3a	22	00
	23a	a Total Montana mineral royalty tax from MT Schedules K-1 and			
		federal Forms 1099 received by the PTE	23a	00	
ō		Mineral royalty tax allocated to owners on their MT Schedules K-1, Part 5, line 4	23b	00	
Withholding		Subtract line 23b from line 23a. This is the amount of Montana mine			00
护		a Total Montana pass-through withholding from MT Schedules K-1 received	24a	00	
Š	24b	Montana pass-through withholding allocated to owners on their MT Schedules K-1,			
		Part 5, line 3b	24b	00	
		Subtract line 24b from 24a. This is the amount of Montana pass-th	-	<u> </u>	00
			ding payme		00
		2021 overpayment applied to 2022	26a	00	
Retum Payments		2022 estimated payments	26b	00	
Ущ		2022 tentative payments	26c	00	
ı Pa		For amended returns only – payments made with original return	26d	00	
텵		For amended returns only – previously issued refunds. (See instructions)	26e	00	
æ	26	Add lines 26a through 26d, then subtract line 26e.	This is	your total return payments. 26	00
	27	Add lines 21, 21a, and 22, then subtract lines 25 and 26.	This is you	r amount due or (overpaid). 27	00
	28a	PTE information return late filing penalty	28a	00	
gue	28b	Interest on underpayment of estimated composite tax	28b	00	
Penalties and Interest	280	: Composite income tax return late filing penalty	28c	00	
nalti Inte	28d	Late payment penalty	28d	00	
Pel	28e	e Interest	28e	00	
	28	Add lines 28a through 28e.	his is your	total penalties and interest. 28	00
	29	Add lines 27 and 28		29	00
ved d	30	If line 29 results in an amount due, enter it here.	This	is the amount you owe. ► 30	00
Amount Owed or Refund		Why not e-pay? See your options at MTRevenue.gov. If writing a	check, ma	ke it payable to MONTANA DEPARTMENT OF REVENUE.	
ng e	31	If line 29 results in an overpayment, enter it here.  This is your ove	rpayment.	Enter as a positive number. 31	00
Ā	32	Enter the amount from line 31 that you want applied to your 2023 tax	32	00	
-	33	Subtract line 32 from line 31 and enter the amount here.		This is your refund. ► 33	00

**Direct Deposit** 

Your Refund 1. RTN# 2. ACCT#

Complete 1, 2, 3, and 4. 3. If using direct deposit, you are required to mark one box. ► Checking Savings

(See instructions) 4. If this refund is going to an account that is located outside of the United States or its territories, mark here.

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.

Signature of Officer  X Eric Daley	Date 04/15/2023	Printed Name and T ERIC DALEY		Telephone Number 512 506 0524
Print/Type Preparer's Name	Preparer's Signa	ture	Date	PTIN
RVSSMANIKUMAR APPANNA Firm's Name	Firm's Address		04152023 Telephone Number	P02090332 Firm's FEIN
GLOBAL TAXES LLC	245 ROONEY CT E BRUNSWICK NJ (	08816	646 727 7157	301017196

If you allow the DOR to discuss this tax return with your tax preparer, mark here.



Form PTE, Page 3 – 2022 FEIN 261963994

ter amounts in columns A and B. Enter percentages in co		A. Everywhere B. Monta	ana.	C. Factor	
Property Factor: Use average value for real and tangible personal part a Land		00		00	
	1a	00		00	
1b Buildings	1b				
1c Machinery	1c	00		00	
1d Equipment	1d	00		00	
1e Fumiture and fixtures	1e	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	1j	00		00	
1k <b>Total Property Value</b> . 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		
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 Payroll 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		
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 taxab	le	3c(2)		0.0	
3d Receipts other than receipts of tangible personal property (e.g., servi		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 <b>Total Receipts Value.</b> Add lines 3a through 3f.	3g	00		00	
Divide the total in column B by the total in column A. Multiply the result by	•	This is your receipts factor.	3	00	
· · · · · · · · · · · · · · · · · · ·	100.	Tills is your receipts factor.	4		
Enter the amount reported on line 3.		This is the control of control of			
Add the percentages from lines 1, 2, 3, and 4 in column C.	and the state of t	This is the sum of your factors.	5		
Divide the total percentage from line 5, column C, by the number of factor					
If a property, payroll, or receipts factor is 0%, it is included in the calculation	on tor line 6 if the	· · · · · · · · · · · · · · · · · · ·	_		
		This is your apportionment factor.	6		



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### Schedule II - Montana Pass-Through Entity Tax Credits

Use the corresponding credit code in the table below to report the credit you are claiming in Column A. If you were provided an authorization number to claim the credit, enter that number in Column B. Report the total amount of credit in Column C. Use Montana Schedule K-1 to notify each owner of their share of the credit. Attach a copy of the credit's form to your return (if applicable). See instructions for more information.

	Α	В	С
	Credit Code	Credit Authorization Number	Amount of credit
1			00
2			00
3			00
4			00
5			00
6			00
7			00
8			00
9			00
10			00

Credit name	Credit Code
Apprenticeship tax credit	APP
Contractor's gross receipts tax credit	CGR
Historic property preservation credit	HPP
Infrastructure user fee credit	IUF
Innovative educational program credit	IEP
Jobs growth incentive credit	JGI
Media credit	MED
Qualified endowment credit	QET
Recycle credit	RCY
Student scholarship organization credit	SSO
Trades education and training credit	TET
Unlocking public lands credit	UPL



FEIN 261963994 Form PTE, Page 5 – 2022

# Schedule IV - Montana Composite Income Tax Schedule

Enter the number of eligible participating owners. Part I. Eligible Participating Owners

See instructions for more information about eligible participants.

00 Enter the amount from page 1, line 20 of this form. 00 Enter the amount from page 1, line 14 of this form. Use the amount in column 3 to complete the calculation in column H below.

Part II. Composite Tax Ratio

Divide column 2 by column 1

Do not enter more than 1.000000.

<b>Part III.</b> Enter the required information and amounts for each eligible participant in columns A – H.	d amounts for each eligible	participant in columns	A - H.	L	L	(
∢	ú	ر	ם	Ш	L	פ
	Social Security					
	Numberor	Owner's share of federal Standard	Standard	Exemption	Exemption Montana taxable income - Enter the appropriate to	Enter the appropriate t
Name	Federal Employer	income from entity	deduction	\$2,710	\$2,710 Subtract columns D and E from the tax table below	from the tax table belo
	Idontification Mumber				J dumiloo mong	

Montana composite income tax. Multiply

I

ţax

column G by	composite tax ratio from Part II.	0	0	0	0	0	0	0	0	0	0
from the tax table below.		00	00	00	00	00	00	00	00	00	00
Subtract columns D and E from the tax table below.	from column C.	00	00	00	00	00	00	00	00	00	00
\$2,710		00	00	00	00	00	00	00	00	00	00
deduction		00	00	00	00	00	00	00	00	00	00
income from entity		00	00	00	00	00	00	00	00	00	00
Federal Employer	Identification Number										
Name											

1 2 8 4 5 9 7 9 0 0 0

Add column H, lines 1 through 11. This is your total composite income tax liability. Transfer the amounts from column H to each owner's Montana Schedule K-1, Part 5, line 2.

11 Enter the total composite tax from all additional pages, if used



Include all additional pages from If additional space is needed, make copies of this page. line 11 with the tax return.

If Your Taxable	But Not More Than	<b>Multiply Your</b>	And Subtract	This Is Your
Income Is More Than		Taxable Income By		Тах
\$0	\$3,300	1% (0.010)	\$0	
\$3,300	\$5,800	2% (0.020)	833	
\$5,800	\$8,900	3% (0.030)	\$91	
\$8,900	\$12,000	4% (0.040)	\$180	
\$12,000	\$15,400	5% (0.050)	\$300	
\$15,400	\$19,800	(0.060)	\$454	
More than \$19,800		6.75% (0.0675)	£09\$	

Form PTE, Page 6 – 2022 FEIN 261963994

### Schedule VI – Reporting of Special Transactions

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 your answer is "Yes" to 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

Yes

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

Yes

4 The entity filed federal Form 8886 - Reportable Transaction Disclosure Statement with the IRS

Yes

Yes

5 For S corporations only: The S corporation filed federal Form 8023 – Elections Under Section 338 for Corporations Making Qualified Stock Purchases with the IRS

Yes

### Complete this section if the PTE is a partnership.

6 Mark the box if the partnership filed one or more of the following forms in 2022. 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 Mark the box if the partnership had Montana source income and paid an imputed underpayment. If applicable, provide a copy of your federal audit adjustment report. (See instructions)

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

8 During this tax year, the entity made payments to one or more related parties

(excluding salary compensation) that exceeded \$100,000 per recipient.

If you answered "Yes" to this question, please provide the name and federal employer identification number of each related party below and the amount that you paid to each related party:

Name

FEIN

Amount of Payment

00

00

00

00

\*22TT06IN\*

Form PTE, Page 7 – 2022

	If Q Sub, enter		
ш		Q Sub	
Ω		LLC	
ပ	Montana SOS	Registration	Number
m		FEIN	
∢		Name	

Montana Source Income from DE's own activities

H DE is a segment of the PTE

**Total** 

G DE has multistate activities

\*22TT07IN\*

# Montana Schedule K-1 (PTE)

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

tion	For the calendar year 2022, or t Mark applicable boxes: Amended Schedu Pass-through Entity's Name		ing nal Schedule K-1	and ending				
Part 1 PTE Information	DALEY VENTURES INC Mailing Address 13824 LONG SHADOW DR					FEIN 261	963994	
PTE	City MANOR	State	TX ZIP Co	ode 78653				
Part 2 Owner Information	Name					FEIN OR		
	ERIC DALEY Mailing Address						510575	
	13824 LONG SHADOW DR					Beneficial ow		
	City MANOR	State	TX ZIP Co	ode 78653		FEIN or SSN		
	Owner Type T Resident	Nonresident X				01 3311		
	Special Allocations (See instructions)			Profit	and loss	percentage	100.00	00%
	The owner is included in a composite income	tax return				Ownership	100.00	00%
				1			II	
Part 3 Adj.	Montana Adjustments (See worksheet	on page 9)		Everywhere		N	Iontana	
	1 Additions		1		00			00
	2 Subtractions		2		00			00
Part 4 Montana Source Income	<b>Distributive Share of Montana Source</b> 1 Ordinary business income (loss)	Income (Loss	-	2250	0.0		2250	0.0
	2 Net rental real estate income (loss)		1 2	-3259	00		-3259	00
	3 Other net rental income (loss)		3		00			00
	4 Guaranteed payments		4		00			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)		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		00			00
Part 5 Information	Supplemental Information The owner filed Form PT-AGR Year The owner is a Domestic 2nd tier PTE							
	The owner filed Form PT-AGR Year  1 Owner's share of Montana source income (loss)	In	e owner is a Domes	IC 2nd tier PTE	4		2050	00
	2 Montana composite income tax paid on behalf of or	wner			2		-3259	00
	3a Montana income tax withheld on behalf of owner. (\$				3a			00
	3b Montana income tax withheld by a lower tier pass-t	,			3b			00
	3c Add lines 3a and 3b.		tal Montana incom	e tax withheld on your beh				00
	4 Montana mineral royalty tax withheld	•		•	4			00
	5 Other information. List type	ar	nd amount 5		00			00
Part 6 Tax Credits	Tax Credits							
	Credit Code Credit Authorization Number Amount of credit							
	1			00				
	2			00				
	Montana Adjustments Detail: Enter the a	mount and aada	of analy adjustment a	00 otorod on Part 3 (Socilastru	otions)			
Part 7 PTE Use	Montana Adjustments Detail: Enter the a	O 2 Code	or eacri aujusti ilerit e	ntered on Part 3. (See Instru 0 0 3 C	,			00
art E (		0 2 Code 0 5 Code		00 <b>6 C</b>				00
F F		0 <b>8 Code</b>		00 <b>9 C</b>				00
		- 0000						

