



2023 Form M2, Income Tax Return for Estates and Trusts

Do not use staples on anything you submit.

Tax year beginning (MM/DD/YYYY) MM/DD/YYYY, ending (MM/DD/YYYY) MM/DD/YYYY

NAME OF ESTATE OR TRUSTXXXXXXXXX
Name of Estate or Trust
Check if name has changed: [X]
BENEFICIARY NAMEXXXXXXXXXXXXXXXXX
Name and title of fiduciary
Check if address has changed: [X]
FIDUCIARY ADDRESSXXXXXXXXXXXXXXXXX
Current address of fiduciary
DECEDENT ADDRESSXXXXXXXXXXXXXXXXX
Decedent's last address or grantor's address when trust became irrevocable

123456789
Federal ID Number
111223333
Decedent's Social Security Number
CITYXXXXXXXXXXXX
Fiduciary City
CITYXXXXXXXXXXXX
Decedent or Grantor City

123456789
Minnesota ID Number
1234
Number of Schedules KF
MM / DD / YYYY
1234
Date of Death
Number of Beneficiaries
MN
123451234
Fiduciary State
Fiduciary ZIP Code
MN
123451234
Decedent or Grantor State
Decedent or Grantor ZIP

Check all that apply:

- [X] Initial Return [X] Final Return [X] Section 645 Election
[X] Grantor Trust [X] Statutory Resident [X] ESBT
[X] Irrevocable Trust — Date trust became irrevocable 11223333 [X] Statutory Nonresident [X] QSST
[X] Decedent's Estate — Gross value of estate 11122333 [X] Due Process Nonresident (see Schedule M2RT) [X] Trust/Estate Owns or Operates a Business — FEIN 123456789
[X] Form M706 Filed [X] Composite Income Tax
[X] Bankruptcy Estate — Debtor Social Security Number (SSN) 111223333 If filing jointly, second debtor SSN 111223333 [X] Installment sale of pass-through assets or interests [X] Tax Position Disclosure (enclose Form TPD)

Table with 2 columns: Line number and Amount. Rows 1-14 showing tax calculations: 1 Federal taxable income (12345678), 2 Fiduciary's deductions (12345678), 3 Capital gain amount (12345678), 4 Additions (12345678), 5 Add lines 1 through 4 (12345678), 6 Subtractions (12345678), 7 Fiduciary's income from non-Minnesota sources (12345678), 8 Add lines 6 and 7 (12345678), 9 Minnesota taxable net income (12345678), 10 Tax from table in Form M2 instructions (12345678), 11 Tax from S portion of an Electing Small Business Trust (12345678), 12 Total of tax from (12345678), 13 Composite income tax for nonresident beneficiaries (12345678), 14 Total 2023 income tax (12345678).



15	Credit for taxes paid to another state	15	12345678
16	Film Production Tax Credit Enter the credit certificate number: TAXC - 12345678	16	12345678
17	Tax Credit for Owners of Agricultural Assets Enter certificate number from the Rural Finance Authority: AO 12 - 345678	17	12345678
18	Unused credit for owners of agricultural assets from a prior year AO 12 - 345678	18	12345678
19	Housing Tax Credit Enter certificate number from Minnesota Housing: SHTC 1234 - 345678	19	12345678
20	Short Line Railroad Infrastructure Modernization Credit	20	12345678
21	Credit for Sales of Manufactured Home Parks to Cooperatives	21	12345678
22	Credit for increasing research activities (enclose Schedule KPI, KS, or KF)	22	12345678
23	Other nonrefundable credits (see instructions)	23	12345678
24	Total nonrefundable credits. Add lines 15 through 23	24	12345678
25	Subtract line 24 from line 14 (if result is zero or less, leave blank)	25	12345678
26	Pass-Through Entity Tax Credit (enclose Schedule KPI, KS, or KF)	26	12345678
27	Minnesota income tax withheld (enclose documentation)	27	12345678
28	Total estimated tax payments and extension payments	28	12345678
29	Historic Structure Rehabilitation Tax Credit Enter National Park Service (NPS) project number: 123456	29	12345678
30	Other refundable credits (see instructions)	30	12345678
31	Add lines 26 through 30	31	12345678
32	Tax due. If line 25 is more than line 31, subtract line 31 from line 25	32	12345678
33	Penalty (see instructions)	33	12345678
34	Interest (see instructions)	34	12345678
35	Trusts only: Additional charge for underpaying estimated tax (enclose Schedule EST)	35	12345678
36	AMOUNT DUE. If you entered an amount on line 32, add lines 32 through 35. Check payment method: <input checked="" type="checkbox"/> check <input checked="" type="checkbox"/> electronic (see instructions)	36	12345678

(continued)



37 Overpayment. If line 31 is more than the sum of lines 25 and 33 through 35, subtract lines 25 and 33 through 35 from line 31 37 ■ 12345678

38 If you are paying estimated tax for 2024, enter the amount from line 37 you want applied to it, if any 38 ■ 12345678

39 REFUND. Subtract line 38 from line 37 39 ■ 12345678

40 To have your refund direct deposited, enter the following. Otherwise, you will receive a check.

Checking Savings 123456789 12345678901234567
Routing number Account number (use an account not associated with any foreign banks)

111223333 MM/DD/YYYY 1112233333
Signature of Fiduciary or Officer Representing Fiduciary Minnesota Tax ID or Social Security Number Date (MM/DD/YYYY) Direct Phone

PRINT NAME OF CONTACT EMAIL ADDRESS FOR Fiduciary E-mail Paid Preparer E-mail
Print Name of Contact E-mail Address for Correspondence, if Desired

111223333 MM/DD/YYYY 1112223333
Paid Preparer's Signature Preparer's PTIN Date (MM/DD/YYYY) Direct Phone

I authorize the Minnesota Department of Revenue to discuss this tax return with the preparer.

I do not want my paid preparer to file my return electronically.

Enclose a copy of federal Form 1041, Schedules K-1, and other federal schedules.

Mail to:
Minnesota Fiduciary Income Tax
Mail Station 1310
600 N. Robert St.
St. Paul, MN 55146-1310



Additions to Income

Table with 3 columns: Line number, Description, and Amount. Rows 41-56 include items like State and municipal bond interest, State taxes, and various deductions.

Subtractions from Income

Table with 3 columns: Line number, Description, and Amount. Rows 57-66 include items like Interest on U.S. government bond obligations, State income tax refund, and Deferred foreign income.



67 Other subtractions (see instructions)..... 67 ■ 12345678

68 This line intentionally left blank 68 ■ _____

69 This line intentionally left blank 69 ■ _____

70 This line intentionally left blank 70 ■ _____

71 This line intentionally left blank 71 ■ _____

72 Add lines 57 through 71. Enter the result here and on line 75, column E, under Subtractions 72 ■ 12345678

Allocation of Adjustments Between Fiduciary and Beneficiaries (see instructions)

	A	B	C	D	E	
	Name of each beneficiary	Beneficiary's Social Security number	Share of federal distributable net income	Percent of total on line 75, column C	Shares assignable to beneficiary and to fiduciary Additions	Subtractions
73	BENEFICIARYNAME	111223333	12345678	123%	12345678	12345678
	BENEFICIARYNAME	111223333	12345678	123%	12345678	12345678
	BENEFICIARYNAME	111223333	12345678	123%	12345678	12345678
	BENEFICIARYNAME	111223333	12345678	123%	12345678	12345678
	BENEFICIARYNAME	111223333	12345678	123%	12345678	12345678
	BENEFICIARYNAME	111223333	12345678	123%	12345678	12345678
	BENEFICIARYNAME	111223333	12345678	123%	12345678	12345678
74	Fiduciary		12345678	123%	12345678	12345678
75	Total		12345678	100%	12345678	12345678

Enclose separate sheet, if needed.