



2020 Form M1, Individual Income Tax

<u>YOUR FIRST NAME, IN</u> Your First Name and Initial	<u>YOUR LAST NAMEXXXXXXXXXX</u> Your Last Name	<u>123456789</u> Your Social Security Number (SSN)	<u>123456789</u> Your Date of Birth
<u>SPOUSE FIRST NAME, IN</u> If a Joint Return, Spouse's First Name and Initial	<u>SPOUSE LAST NAMEXXXXXXXXXX</u> Spouse's Last Name	<u>123456789</u> Spouse's Social Security Number	<u>123456789</u> Spouse's Date of Birth
<u>CURRENT HOME ADDRESS</u> Current Home Address	<u>CITYXXXXXXXXXXXXXXXXXXXXXX</u> City	<u>XX</u> <u>XXXXXXXXXX</u> State ZIP Code	Check if Address is: <input checked="" type="checkbox"/> New <input checked="" type="checkbox"/> Foreign

2020 Federal Filing Status (place an X in one box):

(1) Single (2) Married Filing Jointly (3) Married Filing Separately (4) Head of Household (5) Qualifying Widow(er)

Spouse Name SPOUSE'S NAMEXXXX
Spouse SSN 123456789

Dependents (see instructions):

<u>DEPENDENT 1 FIRST NA</u> Dependent 1 First Name	<u>DEPENDENT 1 LAST NAMEXX</u> Dependent 1 Last Name	<u>123456789</u> Dependent 1 SSN	<u>DEPENDENT 1 REL</u> Dependent 1 Relationship to You
<u>DEPENDENT 2 FIRST NA</u> Dependent 2 First Name	<u>DEPENDENT 2 LAST NAMEXX</u> Dependent 2 Last Name	<u>123456789</u> Dependent 2 SSN	<u>DEPENDENT 2 REL</u> Dependent 2 Relationship to You
<u>DEPENDENT 3 FIRST NA</u> Dependent 3 First Name	<u>DEPENDENT 3 LAST NAMEXX</u> Dependent 3 Last Name	<u>123456789</u> Dependent 3 SSN	<u>DEPENDENT 3 REL</u> Dependent 3 Relationship to You

State Elections Campaign Fund

To grant \$5 to this fund, enter the code for the party of your choice. It will help candidates for state offices pay campaign expenses. This will not increase your tax or reduce your refund.

Political Party Code Numbers:

<u>99</u> <u>99</u> Your Code Spouse's Code	Republican—11	Independence—13	Green—15	Legal Marijuana Now—17
	Democratic/Farmer-Labor—12	Grassroots/Legalize Cannabis—14	Libertarian—16	General Campaign Fund—99

From Your Federal Return (see instructions)

<u>1234567891</u> A. Wages, salaries, tips, etc.	<u>1234567891</u> B. IRA, pensions, and annuities	<u>12345678</u> C. Unemployment	<u>1234567891</u> D. Federal taxable income
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1 Federal adjusted gross income (from line 8b of federal Form 1040 and 1040-SR)	1 ■	<u>12345678</u>
2 Additions to Minnesota income from line 17 of Schedule M1M (see instructions; enclose Schedule M1M)	2 ■	<u>12345678</u>
3 Add lines 1 and 2.	3	<u>12345678</u>
4 Itemized deductions (from Schedule M1SA) or your standard deduction (see instructions)	4 ■	<u>12345678</u>
5 Exemptions (determine from instructions)	5 ■	<u>12345678</u>
6 State income tax refund from line 1 of federal Schedule 1.	6 ■	<u>12345678</u>
7 Other subtractions from Minnesota income from line 47 of Schedule M1M (see instructions; enclose Schedule M1M)	7 ■	<u>12345678</u>
8 Total subtractions. Add lines 4 through 7.	8	<u>12345678</u>
9 Minnesota taxable income. Subtract line 8 from line 3. If zero or less, leave blank.	9	<u>12345678</u>
10 Tax from the table in the Form M1 instructions	10	<u>12345678</u>
11 Alternative minimum tax (enclose Schedule M1MT)	11 ■	<u>12345678</u>

