NEAR FINAL DRAFT 8/23/21

38 40 42 44 46 48 50 52 54 56 58



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2021 Form M1, Individual Income Tax Do not use staples on anything you submit.

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9						9
10	YOUR FIRST NAME, IN		NAMEXXXXX	123456789	123456789	10
11	Your First Name and Initial	Last Name		Your Social Security Numbe		YYYY)
12	SPOUSE FIRST NAME, IN If a Joint Return, Spouse's First Name and Initial	SPOUSE LA Spouse's Last Name	ST NAMEXXX	123456789 Spouse's Social Security Nun	ber 123456789 Spouse's Date of Birth	12
14	CURRENT HOME ADDRESSXXXX Current Home Address	XXXXXXXXXX	XXXXXXXXX	Check if Address is:	X New X Foreig	
15 16	CITYXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	MN	123456789	16
17	City	2 12 12 12 12 12 12 12 12 12 12 12 12	2 12 12 12 12 12 12 12 12 12 12 1	State	ZIP Code	17
18	2021 Federal Filing Status (place an	X in one hox).				18
19	2021 rederal rilling Status (place al	i X III Olie DOX).				19
20	X (1) Single X (2) Married Filing Jointly X ((3) Married Filing Separat	telv	(4) Head of House	nold (5) Qualifying Widow	w(er)20
21		Spouse Name SPO	USE'S NAMEX	XXX	(5) 2,,,	21
22			456789			22
23	Dependents (see instructions):					23
24						24
25 26		PENDENT 1 L endent 1 Last Name	AST NAMEXX	123456789 Dependent 1 SSN	DEPENDENT 1 RE Dependent 1 Relationship to V	
27 28		PENDENT 2 L endent 2 Last Name	AST NAMEXX	123456789 Dependent 2 SSN	DEPENDENT 2 RE Dependent 2 Relationship to N	
29	DEPENDENT 3 FIRST NA DE	PENDENT 3 L	AST NAMEXX	123456789	DEPENDENT 3 RE	
30		endent 3 Last Name		Dependent 3 SSN	Dependent 3 Relationship to	
31						31
32	State Elections Campaign Fund					32
33	To grant \$5 to this fund, enter the code for the party of you	ur choice. It will help candid	lates for state offices pay ca	mpaign expenses. This will not	increase your tax or reduce your refu	und. 33
34	Political Party	Code Numbers: Demo	ocratic/Farmer-Labor 12	Grassroots/Legalize Canna	ois 14 Legal Marijuana Now	1734
35	99 99 Republican		endence13	Libertarian		9935
36	Your Code Spouse's Code					36
37	From Your Federal Return (see instruction	ons)				37
38		5001	1004567		004565004	38
39	1234567891 123456 A. Wages, salaries, tips, etc. 123456 B. IRA, pensi	/891 ons, and annuities	1234567 C. Unemployme		234567891 Federal taxable income	39
40	A. Wages, salaries, tips, etc. B. INA, perisi	ons, and annuities	C. Onemploying	5110	. i ederal taxable ilicollie	10
41		44 66 1 15	1010 (1010 00)		1■ 1234567	7 8 ₄₂
42 43	1 Federal adjusted gross income (from lin	ne 11 of federal Form 1	1040 ana 1040-SR)		1	43
44	2 Additions to income from line 10 of Sch	odulo M1M and line 9	of Schodula M1MP (a	an instructions)	2 ■ 1234567	
45	2 Additions to income from line to or sen	edule Milwi allu ilile 3	Of Scriedule William (3	ee mstructions)		45
46	3 Add lines 1 and 2				. з1234567	
47						47
48 49	4 Itemized deductions (from Schedule M	1SA) or your standard	deduction (see instruc	ctions)	. 4 = 1234567	7 8 ₄₈
50	5 Exemptions (determine from instruction	5)			. 5 ■ 1234567	
51		.,				51
52	6 State income tax refund from line 1 of fo	ederal Schedule 1			. 6 ■ 1234567	
53						53
54	7 Subtractions from line 32 of Schedule M	11M and line 22 of Sch	nedule M1MB (see inst	tructions)	7 ■ 1234567	78 54
55						55
56	8 Total subtractions. Add lines 4 through	7			. 8 1234567	78 56
57						57
58	9 Minnesota taxable income. Subtract lin	e 8 from line 3. If zero	or less, leave blank.		<u> </u>	78 58
59					1004565	59
60	10 Tax from the table in the Form M1 instr	uctions		• • • • • • • • • • • • • • • • • • • •	10 1234567	
61						61
62			9995			62
63	£ 8 10 12 14 16 19 20 22 24 26 22 2	0 22 24 26 29 42		2 54 55 59 60 63 51	66 69 70 72 74 76 72	63
65	6 8 10 12 14 16 18 20 22 24 26 28 3	0 32 34 36 38 40	42 44 46 48 50 5	2 54 56 58 60 62 64	66 68 70 72 74 76 78 8	50 82

2021 M1, page 2				
		* 2 1 1	1 2 1 *	
1 Alternative minimum tax (enclose Schedule M1MT)		11 ■	12345678	
			12345678	
2 Add lines 10 and 11	Lines 123 and 12h	12	12343070	
Part-year residents and nonresidents: From Schedule M1NR, enter				
line 13, from line 28 on line 13a, and from line 29 on line 13b (encl		. 13	12345678	
13a ■ 12345678 13b ■ 12345678				
13a ■ 12343678 13b ■ 12343678 4 Other taxes, such as recapture amounts and the tax on lump-sum	distributions (check appropriate boxes)			
			10045670	
(a) Schedule M1HOME X (b) Schedule M1529 X	(c) Schedule M1LS	14 ■	12345678	
5 Tax before credits. Add lines 13 and 14		_ 15 _	12345678	
		+++++	12345678	
6 Amount from line 18 of Schedule M1C, Nonrefundable Credits (en	close Schedule M1C)	16 ■	123436/8	
7 Subtract line 16 from line 15 (if result is zero or less, leave blank).		. 17 _	12345678	
8 Nongame Wildlife Fund contribution (see instructions)			10045	
This will reduce your refund or increase the amount you owe		18 ■ _	12345	
9 Add lines 17 and 18		. 19 _	12345678	
0 Minnesota income tax withheld. Complete and enclose Schedule N	M1W to report			
Minnesota withholding from Forms W-2, 1099, and W-2G (do not ser	nd)	. 20 ■	12345678	
1 Minnesota estimated tax and extension payments made for 2020		. 21 🔳 _	12345678	
2 Amount from line 11 of Schedule M1REF, Refundable Credits (see	instructions; enclose Schedule M1REF)	. 22 🔳	12345678	
3 Total payments. Add lines 20 through 22		. 23 _	12345678	
4 REFUND. If line 23 is more than line 19, subtract line 19 from line	23 (see instructions).			
For direct deposit, complete line 25	integration	. 24 🔳	12345678	
15 Direct deposit of your refund (you must use an account not associ	иисеа with a joreign bank):			
	12345678901234567			
	Account Number		12245670	
6 AMOUNT YOU OWE. If line 19 is more than line 23, subtract line 2 7 Penalty amount from Schedule M15 (see instructions). Also subtra		. 26 ■	12345678	
this amount from line 24 or add it to line 26 (enclose Schedule M1		. 27 🔳 _	12345678	
F YOU PAY ESTIMATED TAX and want part of your refund credited to es			10045650	
8 Amount from line 24 you want sent to you		. 28 🔳 _	12345678	
9 Amount from line 24 you want applied to your 2022 estimated tax	·	. 29 ■	12345678	
expayer: I declare that this return is correct and complete to the best of				
	+++++++++++++++++++++++++++++++++++++++	04/	15/2021	
	Spouse's Signature (If Filing Jointly)		Date (MM/DD/YYYY)	
	DUR EMAIL ADDRESS XXX	XXXXXXX		
	nail Address 4/15/2021	103	3456789	
	te (MM/DD/YYYY)		or VITA/TCE # (required)	
PREP EMAIL ADDRESS XXXXXXXXXX				
	eparer's Email Address			
I do not want my paid preparer to file my return electronically.	I authorize the Minnesota Department of Rever	ue to discuss thi	s tax return with the prepar	
Include a copy of your 2021 federal return and schedules. Mail to: Minnesota Individual Income Tax, Mail Station 0010, 600	N. Robert St., St. Paul, MN 55145-0010			
	9995			
8 10 12 14 16 18 20 22 24 26 28 30 32 34 36 38 40 42	14 46 48 50 52 54 56 58 60 62	64 66 68 7	70 72 74 76 78 80	