



**2021 Form M2X, Amended Income Tax Return for Estates and Trusts**

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

Name of Estate or Trust _____	Check if name has changed: <input type="checkbox"/>	Federal ID Number _____	Minnesota Tax ID Number _____	Number of Schedules KF _____
Name and Title of Fiduciary _____		Decedent's Social Security Number _____	Date of Death _____	Number of Beneficiaries _____
Current Address of Fiduciary _____		Fiduciary City _____	Fiduciary State _____	Fiduciary ZIP Code _____
Decedent's Last Address or Grantor's Address When Trust Became Irrevocable _____		Decedent or Grantor City _____	Decedent or Grantor State _____	Decedent or Grantor ZIP _____

**Check all that apply:**

Composite Income Tax       Installment Sale of Pass-through Assets or Interests

**Check reason you are amending:**

Amended Federal Return       IRS Adjustment       Changes Affect Schedules KF       Court Case

Net Operating Loss Carried Back From Tax Year Ending (MM/DD/YYYY) \_\_\_\_\_       Other — \_\_\_\_\_

A—As previously reported      B—Net change      C—Corrected amount

<b>1</b>	Federal taxable income (from federal Form 1041) .....	<b>1</b>	■	_____	■	_____	_____
<b>2</b>	Deductions and losses not allowed (from Form M2, line 2) .....	<b>2</b>	■	_____	■	_____	_____
<b>3</b>	Capital gain amount of lump-sum distribution .....	<b>3</b>	■	_____	■	_____	_____
<b>4</b>	Additions (from line 72, column E, on page 4 of this form) .....	<b>4</b>	■	_____	■	_____	_____
<b>5</b>	Add lines 1 through 4 .....	<b>5</b>	■	_____	■	_____	_____
<b>6</b>	Subtractions (from line 72, column E, on page 4 of this form) .....	<b>6</b>	■	_____	■	_____	_____
<b>7</b>	Fiduciary's income from non-Minnesota sources .....	<b>7</b>	■	_____	■	_____	_____
<b>8</b>	Add lines 6 and 7 .....	<b>8</b>	■	_____	■	_____	_____
<b>9</b>	Minnesota taxable net income (subtract line 8 from line 5) .....	<b>9</b>	■	_____	■	_____	_____
<b>10</b>	Tax from table on pages 16 through 19 of the M2 instructions .....	<b>10</b>	■	_____	■	_____	_____
<b>11</b>	Tax from S portion of ESBT (from Schedule M2SB) .....	<b>11</b>	■	_____	■	_____	_____
<b>12</b>	Total of tax from (enclose appropriate schedules):	<b>12</b>	■	_____	■	_____	_____
	<input type="checkbox"/> Schedule M1LS <input type="checkbox"/> Schedule M2MT .....						
<b>13</b>	Composite income tax for nonresidents (enclose Schedules KF) .....	<b>13</b>	■	_____	■	_____	_____
<b>14</b>	Total income tax (add lines 10 through 13) .....	<b>14</b>	■	_____	■	_____	_____
<b>15</b>	Credit for taxes paid to another state .....	<b>15</b>	■	_____	■	_____	_____
<b>16</b>	Film Production Tax Credit .....	<b>16</b>	■	_____	■	_____	_____
	Enter the credit certificate number: TAXC - _____						
<b>17</b>	Tax Credit for Owners of Agricultural Assets .....	<b>17</b>	■	_____	■	_____	_____
	Enter certificate number from the Rural Finance Authority: AO _____ - _____						



- 18 Unused credit for owners of agricultural assets from a prior year . . . . . 18 ■ \_\_\_\_\_  
AO \_\_\_\_\_ - \_\_\_\_\_
- 19 Credit for increasing research activities (enclose Schedule KPI, KS, or KF) 19 ■ \_\_\_\_\_
- 20 Other nonrefundable credits (see instructions) 20 ■ \_\_\_\_\_
- 21 Total nonrefundable credits. Add lines 15 through 20. . . . . 21 ■ \_\_\_\_\_
- 22 Subtract line 21 from line 14 (if result is zero or less, leave blank). . . . . 22 ■ \_\_\_\_\_
- 23 Pass-through Entity Tax Credit (enclose Schedule KPI, KS, or KF) . . . . . 23 ■ \_\_\_\_\_
- 24 **Minnesota income tax withheld** (enclose documentation) . . . . . 24 ■ \_\_\_\_\_
- 25 Total estimated tax payments and any extension payments . . . . . 25 ■ \_\_\_\_\_
- 26 Historic Structure Rehabilitation Tax Credit (enclose certificate) . . . . . 26 ■ \_\_\_\_\_  
Enter National Park Service (NPS) project number: \_\_\_\_\_
- 27 Other refundable credits (see instructions) . . . . . 27 ■ \_\_\_\_\_
- 28 Amount due from original Form M2, line 29 (see instructions) . . . . . 28 ■ \_\_\_\_\_
- 29 Total refundable credits and tax paid (add lines 23c through 27c and line 28) . . . . . 29 ■ \_\_\_\_\_
- 30 Refund amount from original Form M2, line 34 (see instructions) . . . . . 30 ■ \_\_\_\_\_
- 31 Subtract line 30 from line 29 (if result is less than zero, enter the amount as a negative) . . . . . 31 ■ \_\_\_\_\_
- 32 Tax you owe. If line 22c is more than line 31, subtract line 31 from line 22c.  
(if line 31 is a negative amount, see instructions). . . . . 32 ■ \_\_\_\_\_
- 33 If you failed to timely report federal changes or the IRS assessed a penalty (see instructions) . . . . . 33 ■ \_\_\_\_\_
- 34 Add lines 32 and 33. . . . . 34 ■ \_\_\_\_\_
- 35 Interest (see instructions) . . . . . 35 ■ \_\_\_\_\_
- 36 **AMOUNT DUE** (add lines 34 and 35). Payment method:  Electronic  Check (attach voucher) . . . . . 36 ■ \_\_\_\_\_
- 37 **REFUND DUE** (if line 31 is more than lines 22c, 33, and 35, subtract line 22c, 33, and 35 from line 31). . . . . 37 ■ \_\_\_\_\_
- 38 To have your refund direct deposited, enter the following. Otherwise, you will receive a check.

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

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

Signature of Fiduciary or Officer Representing Fiduciary	Minnesota Tax ID or Social Security Number	Date (MM/DD/YYYY)	Daytime Phone
Print Name of Contact	E-mail Address for Correspondence, if Desired		<input type="checkbox"/> Fiduciary E-mail <input type="checkbox"/> Paid Preparer E-mail
Paid Preparer's Signature	Preparer's PTIN	Date (MM/DD/YYYY)	Daytime Phone

**Explain net changes on page 3.**

Mail to: Minnesota Amended Fiduciary Tax, Mail Station 1310, 600 N. Robert St., St. Paul, MN 55145-1310



A—As previously reported      B—Net change      C—Corrected amount

**Additions to Income**

39	State and municipal bond interest from outside Minnesota . . . . .	39	■	_____	■	_____	_____
40	State taxes deducted in arriving at net income . . . . .	40	■	_____	■	_____	_____
41	Expenses deducted on your federal return that are attributable to income not taxed by Minnesota ( <i>other than U.S. bond interest</i> ) . . . . .	41	■	_____	■	_____	_____
42	80 percent of suspended loss from 2001-2005 or 2008-2020 on federal return generated by bonus depreciation . . . . .	42	■	_____	■	_____	_____
43	80 percent of federal bonus depreciation . . . . .	43	■	_____	■	_____	_____
44	Section 199A qualified business income . . . . .	44	■	_____	■	_____	_____
45	Addition due to federal changes not adopted by Minnesota . . . . . ( <i>M2NC, line 32</i> )	45	■	_____	■	_____	_____
46	Net operating loss carryover adjustment . . . . .	46	■	_____	■	_____	_____
47	Foreign derived intangible income (FDII) deduction . . . . .	47	■	_____	■	_____	_____
48	Special deduction under section 965 . . . . .	48	■	_____	■	_____	_____
49	This line intentionally left blank . . . . .	49	■	_____	■	_____	_____
50	This line intentionally left blank . . . . .	50	■	_____	■	_____	_____
51	This line intentionally left blank . . . . .	51	■	_____	■	_____	_____
52	This line intentionally left blank . . . . .	52	■	_____	■	_____	_____
53	This line intentionally left blank . . . . .	53	■	_____	■	_____	_____
54	Add lines 39 through 53. Also enter the amount from line 54C on line 73, column E, under Additions . . . . .	54	■	_____	■	_____	_____

**Subtractions from Income**

55	Interest on U.S. government bond obligations, minus expenses deducted on federal return that are attributable to this income . . . . .	55	■	_____	■	_____	_____
56	State income tax refund included on federal return . . . . .	56	■	_____	■	_____	_____
57	Federal bonus depreciation subtraction . . . . .	57	■	_____	■	_____	_____
58	Subtraction due to federal changes not adopted by Minnesota . . . . . ( <i>M2NC, line 32 as a positive number</i> )	58	■	_____	■	_____	_____
59	Subtraction for prior addback of reacquisition of business indebtedness income . . . . .	59	■	_____	■	_____	_____
60	Subtraction for railroad maintenance expenses . . . . .	60	■	_____	■	_____	_____
61	Net operating loss carryover adjustment . . . . .	61	■	_____	■	_____	_____
62	Deferred foreign income (section 965) . . . . .	62	■	_____	■	_____	_____
63	Global intangible low-taxed income (GILTI) . . . . .	63	■	_____	■	_____	_____





- 64 Disallowed section 280E expenses of medical cannabis manufacturers ..... 64 ■ \_\_\_\_\_ ■ \_\_\_\_\_
- 65 This line intentionally left blank ..... 65 ■ \_\_\_\_\_ ■ \_\_\_\_\_
- 66 This line intentionally left blank ..... 66 ■ \_\_\_\_\_ ■ \_\_\_\_\_
- 67 This line intentionally left blank ..... 67 ■ \_\_\_\_\_ ■ \_\_\_\_\_
- 68 This line intentionally left blank ..... 68 ■ \_\_\_\_\_ ■ \_\_\_\_\_
- 69 This line intentionally left blank ..... 69 ■ \_\_\_\_\_ ■ \_\_\_\_\_
- 70 Add lines 55 through 69. Also enter the amount from line 70C on line 73, column E, under Subtractions ..... 70 ■ \_\_\_\_\_ ■ \_\_\_\_\_

	A Name of each beneficiary	B Beneficiary's Social Security number	C Share of federal distributable net income	D Percent of total on line 73, column C	E Shares assignable to beneficiary and to fiduciary	
					Additions	Subtractions
71				%		
				%		
				%		
				%		
				%		
72	Fiduciary			%		
73	<b>Total</b>			<b>100%</b>		

**EXPLANATION OF CHANGE**—Explain each change in detail in the space provided below. Use a separate sheet, if needed. If the changes involve items requiring supporting information, be sure to attach the appropriate schedule, statement or form to Form M2X to verify the correct amount.

# Instructions for 2021 Form M2X

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For additional information, see the 2021 Form M2 instructions

## Who Should File M2X?

This form should be filed by fiduciaries to correct—or amend—an original 2021 Minnesota fiduciary return.

**Federal return adjustments.** If the Internal Revenue Service (IRS) changes or audits your federal return or you amend your federal return and it affects your Minnesota return or distributions to beneficiaries, you must file an amended Minnesota return within 180 days. If you are filing Form M2X based on an IRS adjustment, check the box at the top of the form and attach a copy of your amended federal return or correction notice you received from the IRS to Form M2X.

If the changes do not affect your Minnesota return or Schedules K-1, you have 180 days to send a letter of explanation and a copy of your amended federal return or the correction notice to: Minnesota Fiduciary Tax, Mail Station 5140, 600 N. Robert St., St. Paul, MN 55146-5140. If you fail to report as required, a 10 percent penalty will be assessed on any additional tax. See line 33 instructions.

**Claim for refund.** Use Form M2X to make a claim for refund and report changes to your Minnesota liability. If you make a claim for a refund and we do not act on it within six months of the date filed, you may bring an action in the district court or the tax court.

## When to File

File Form M2X only after you have filed your original return. You may file Form M2X within 3½ years after the return was due or within one year from the date of an order assessing tax, whichever is later. If you filed your original return under an extension by the extended due date, you have up to 3½ years from the extended due date to file the amended return.

## Filing Reminders

- **The amended return must be signed** by the fiduciary or authorized officer of the organization receiving, controlling or managing the income of the estate or trust. The person must also include his or her ID number.
- **If someone other than the fiduciary prepared the return**, the preparer must also sign.
- **Round amounts to the nearest dollar.** Drop amounts less than 50 cents and increase amounts 50 cents or more to the next higher dollar.
- **Forms and information** are available on our website at [www.revenue.state.mn.us](http://www.revenue.state.mn.us).

If you need help completing your amended return, call 651-556-3075. We'll provide information in other formats upon request.

## Explanation

On page 4 of Form M2X, include a detailed explanation of why the original return was incorrect. Providing this information will help us verify the amended amounts.

## Use of Information

All information provided on this form is private, except for your Minnesota tax ID number, which is public. Private information cannot be given to others except as provided by state law.

The identity and income information of the beneficiaries are required under state law so the department can determine the beneficiaries' correct Minnesota taxable income and verify if the beneficiaries have filed returns and paid the tax. The Social Security numbers of the beneficiaries are required to be reported on Schedule KF under M.S. 289A.12, subd. 13.

## Line Instructions

### Columns A, B, C

- **Column A:** Enter the amounts shown on your original return or as later adjusted by an amended return or audit report.
- **Column B:** Enter the dollar amount of each change as an increase or decrease for each line you are changing. Show all decreases in parentheses. On the back of Form M2X, explain the changes in detail. If the changes involve items requiring supporting information, attach to Form M2X the appropriate schedule, statement or form to verify the corrected amount.
- **Column C:** Enter the corrected amounts after the increases or decreases. If there are no changes, enter the amount from column A.

### Lines 17 and 18

If you received a credit certificate from the Minnesota Rural Finance Authority for selling or leasing agricultural assets to a beginning farmer, enter the certificate number in the space provided and credit amount on line 17.

If you have multiple credits, enter the certificate number your fiduciary received directly from the Rural Finance Authority within the certificate number box. If you have multiple credits and received all credits from other pass-through entities, enter the certificate number relating to the largest credit amount within the certificate number box. Subtotal all credit amounts on line 17.

If you have unused credits from prior years you can use this year, enter the unused credit amount on line 18 and the certificate number associated to that credit amount in the space provided.

### Line 28

Enter the total of the following tax amounts, whether or not paid.

1. For the original 2021 M2 return, the amount from line 29.
2. For all previously filed 2021 M2X Returns, the amount from line 32.
3. Additional tax due as the result of an audit or notice of change.

**Do not** include any amounts that were paid for penalty, interest or underpayment of estimated tax.

*Continued*

## 2021 Form M2X instructions (continued)

### Line 30

Enter the total of the following refund amounts, whether or not the refund has been received.

1. For the original 2021 M2 return, the amount from line 34.
2. For all previously filed 2021 M2X Returns, the amount from line 37.
3. Refund or reduction in tax from a protest or other type of audit adjustment.

Include any amount that was credited to estimated tax or applied to pay past due taxes. Do not include any interest that may have been included in the refunds you received.

If the refund amount on your original return was reduced by an additional charge for underpaying estimated tax reported on line 32 of the 2021 M2, then when figuring the amount to enter on the 2021 M2X line 30, add the amount from this line to the amount reported on line 34 of the 2021 M2.

### Lines 32 and 37

Lines 32 and 37 should reflect the changes to your tax and/or credits as reported on lines 1 through 27 of Form M2X. If you have unpaid taxes on your original Form M2, this amended return is not intended to show your corrected balance due.

### Line 32

If line 31 is a negative amount, treat it as a positive amount and add it to line 22C. Enter the result on line 32. This is the amount you owe, and is due when you file your amended return. You *cannot* use your estimated tax account to pay this amount.

### Line 33

If only one of the penalties below applies, you must multiply line 32 by 10 percent (.10). If both penalties apply, multiply line 32 by 20 percent (.20). Enter the result on line 33.

- The IRS assessed a penalty for negligence or disregard of rules or regulations.
- You failed to report federal changes to the department within 180 days as required.

### Line 35

Interest is calculated as simple interest and accrues on unpaid tax and penalties from the regular due date until it is paid in full. Use the formula below with the appropriate interest rate: Interest = line 32 x number of days past the due date x interest rate ÷ 365

If the days fall in more than one calendar year, you must determine the number of days separately for each year.

The interest rate for 2022 is 3 percent.

Penalty will be assessed if the additional tax and interest are not paid with the amended return.

### Line 36

**Pay Electronically.** Visit our website at [www.revenue.state.mn.us](http://www.revenue.state.mn.us) and log in to e-Services. If you don't have internet access, call 1-800-570-3329 to pay by phone. When paying electronically, you must use an account not associated with any foreign banks.

**Pay by Check.** Visit our website at [www.revenue.state.mn.us](http://www.revenue.state.mn.us) and click on **Make a Payment** and then **Check or Money Order** to create a voucher. Print and mail the voucher with a check made payable to Minnesota Department of Revenue. When you pay by check, you authorize us to make a one-time electronic fund transfer from your account. You may not receive your cancelled check.

### Line 37

If you want your refund to be directly deposited into your bank account, complete line 38. Your bank statement will indicate when your refund was deposited to your account. Otherwise, skip line 38 and your refund will be sent to you in the mail.

This refund cannot be applied to your estimated tax account.

### Line 38

If you want your refund to be directly deposited into your checking or savings account, enter the routing and account numbers. The **routing number** must have nine digits. The **account number** may contain up to 17 digits (both numbers and letters). If your account number contains less than 17 digits, enter the number and leave out any hyphens, spaces and symbols. If the routing or account number is incorrect or is not accepted by your financial institution, your refund will be sent to you in the form of a paper check.

You can find your bank's routing number and account number on the bottom of your check.



### Lines 39–70

If you enter a corrected amount in Column C of lines 39 through 70, you may be required to notify beneficiaries of any adjustments to their income. Report the corrected information on a new Schedule KF, and check the "Amended KF" box toward the top of the schedule.

## Signature

The return must be signed by the fiduciary or authorized officer of the organization receiving, controlling or managing the income of the estate or trust. The person must also include his or her ID number.

If someone other than the fiduciary prepared the return, the preparer must also sign and include their ID and phone number.

You may check the box in the signature area to give us your permission to discuss your return with the paid preparer. This authorization remains in effect until you notify the department in writing (either by mail or fax) that the authorization is revoked. Checking the box does not give your preparer the authority to sign any tax documents on your behalf or to represent you at any audit or appeals conference. For these types of authorities, you must file Form REV184, *Power of Attorney*.