



2019 Form M1, Individual Income Tax

our/	First Name			Last Name		Your Soc	al Security N	lumber (SSN) Your Date o	of Birth		
If a Joint Return, Spouse's First Name and Initial Spouse's Last Name						Spouse's	Spouse's Social Security Number Spouse's Date of Birth					
Curre	ent Home A	ddress				Check if:	New Addre	ess	s Foreign Address			
City						State			ZIP Code			
2019	Federal I	Filing Status (plac	ce an X in c	one box):								
	(1) Single	(2) Married fi	ling jointly	(3) Married fili	ng separately ne and SSN	[(4) Head	d of househo	ld(5	i) Qualifying widow(er)		
Stat	e Election	s Campaign Fund	t									
f you	want \$5 to g	go to help candidates f	or state offices	s pay campaign expen	ses, enter the c	ode number for the p	arty of your ch	ioice. This will	not increase	your tax or reduce your refun		
You	Code	Spouse's Code	Republican	Party Code Number n—11 c/Farmer-Labor—12	Independence-		Green—15 Libertarian—1		arijuana Now- Campaign Fui			
ron	Your Fed	leral Return (see i	nstructions)									
4. W	ages, salario	es, tips, etc.	B. IRA, p	ensions, and annui	ties	C. Unemployme	ent		D. Federal	taxable income		
4	Fadaual a	d:	/f I	in a Ob affadayal I	1040	- 1 1040 CD)			A Place an)	(in box if a negative number		
1		djusted gross inco tive number, place	-						1■□			
	(ij u negu	tive number, place	e un x m une	<i>BOX)</i>					1■∟			
2	Additions	to Minnesota inc	ome from li	ine 17 of Schedule	e M1M (see i	nstructions; enclo	se Schedule	e M1M)	2■_			
3	Add lines	1 and 2 (if a nega	tive number	r, place an X in the	e box)				3			
4	Itemized	deductions (from	Schedule N	11SA) or your star	dard deduct	t ion (see instruction	ons)		4■_			
5	Exemptio	ns (determine froi	m instructio	ns)					5■_			
6	State inc	ome tax refund fro	om line 1 of	federal Schedule	1				6■_			
7		otractions from M										
	(see instr	uctions; enclose So	chedule M1	м)					7■_			
8	Total sub	tractions. Add line	s 4 through	7					8 _			
9	Minneso	ta taxable income	. Subtract lir	ne 8 from line 3. If	zero or less, l	eave blank			9 _			
10	Tax from	the table in the M	I1 instructio	ons					. 10 —			
11	Alternativ	ve minimum tax <i>(e</i>	enclose Sche	edule M1MT)					. 11■_			
12	Add lines	10 and 11							. 12 _			
13		esidents: Enter the a										
	-	esidents and nonres										
								. 13 _				
	a ■		b■⊔		(Plac	e an X in box if a nega	tive number)					
14	Other tax	es such as the tax	on lump su	ım distributions a	nd recapture	amounts from (c	heck appro	priate box):				
		edule M1HOME		dule M1529		M1LS						

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· -		e Preparer's Daytime Phone	PTIN or VITA/TCE # (required)	
· · · · · · · · · · · · · · · · · · ·		Paid preparer: You must sign below. Paid Preparer's Signature	Date	
Amount from line 28 you want applied to your 2020	estimated tax		33 ■	
• • • • • • • • • • • • • • • • • • • •		•	32 🔳	
this amount from line 28 or add it to line 30 (enclose	Schedule M15)		31 ■	
Penalty amount from Schedule M15 (see instructions				
REFUND . If line 27 is more than line 23, subtract line				
			-	
Minnesota income tax withheld. Complete and enclo	se Schedule M1W	/ to report		
This will reduce your refund or increase the amount	you owe		22 ■	
			21	
Total nonrefundable credits. Add lines 16 through 19			20	
Credit for taxes paid to another state (enclose Schedu	ule(s) M1CR and I	M1RCR)	18 ■	
Credit for long-term care insurance premiums paid (6	enclose Schedule :	M1LTI)	17 ■	
Marriage Credit for joint return when both spouses hor taxable retirement income (enclose Schedule M1N	ЛА)		16 ■	
1	Credit for long-term care insurance premiums paid (e.c.) Credit for taxes paid to another state (enclose Schedule M1C) Other nonrefundable credits (enclose Schedule M1C) Total nonrefundable credits. Add lines 16 through 19 Subtract line 20 from line 15 (if result is zero or less, Nongame Wildlife Fund contribution (see instruction: This will reduce your refund or increase the amount of the Minnesota income tax withheld. Complete and encloid Minnesota withholding from Forms W-2, 1099, and Wildlines 21 and 22	Credit for long-term care insurance premiums paid (enclose Schedule Credit for taxes paid to another state (enclose Schedule(s) M1CR and Inc.) Other nonrefundable credits (enclose Schedule M1C)	Or taxable retirement income (enclose Schedule M1MA) Credit for long-term care insurance premiums paid (enclose Schedule M1LTI) Credit for taxes paid to another state (enclose Schedule(s) M1CR and M1RCR) Other nonrefundable credits (enclose Schedule M1C) Total nonrefundable credits. Add lines 16 through 19 Subtract line 20 from line 15 (if result is zero or less, leave blank) Nongame Wildlife fund contribution (see instructions) This will reduce your refund or increase the amount you owe Add lines 21 and 22 Minnesota income tax withheld. Complete and enclose Schedule M1W to report Minnesota withholding from Forms W-2, 1099, and W-2G (do not send) Minnesota estimated tax and extension payments made for 2019 Refundable credits from line 9 of Schedule M1REF (see instructions; enclose Schedule M1REF). Total payments. Add lines 24 through 26 REFUND. If line 27 is more than line 23, subtract line 23 from line 27 (see instructions). For direct deposit of your refund (you must use an account not associated with a foreign bank): Account Type Checking Savings AMOUNT YOU OWE. If line 23 is more than line 27, subtractline 27 from line 23 (see instructions) Penalty amount from Schedule M15 (see instructions). Also subtract this amount from Schedule M15 (see instructions). Also subtract this amount from Schedule M15 (see instructions). Also subtract this amount from line 28 you want sent to you Amount from line 28 you want sent to you Amount from line 28 you want applied to your 2020 estimated tax Paid preparer: You must sign below. Paid preparer: Signature	