DEPARTMENT OF REVENUE	NEAR FINAL DRAFT	8/1/24		3
2025 Form M99, Credit for	Military Service in	n a Combat Zor	* 2 5 1 9 9 1 * IE	6 7 8
* / /		Address X Foreign Address	99999999999 Your Social Security Number 999999999 Your Date of Birth (MM/DD/YY) X Check if Amended Form	13
^o ⁷ ₈ Enter the number of months served in a combat zor ₉ sota during the months served to qualify for the cre		ths as full months. Your don	nicile must have been Minne	17
0 1 1 Number of months served in 2025		· · · · · · · · · · · · · · · · · · ·	1	20 12 21
2 3 2 Multiply line 1 by \$120. This is the AMOUNT O	F YOUR CREDIT		212	23
For Direct Deposit of the full credit, enter the follow (You must use an account not associated with a fore Account Type (X) Checking X Savings 99999999	ign bank.)	vill receive a check.		24 25 26 27 28
Sign here: I declare that this return is correct and co	r Account Ni	imber		28 29 30
1 2 3 Your signature	1223333 te	1112223333 Phone	100456700	31 32 33
Paid preparer's signature Da		1112223333 Phone	123456789 PTIN or VITA/TCE # (required)	34
 [X] I authorize the Minnesota Department of Revenue to Explanation of Amended Form — If you need to check the amended box on the form, and explain yo to the address on the form. EXPLAIN AMENDED XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	make changes to a Form M99 tha	t you have already submitte	· • · · · · · · · · · · · · ·	mail 39 40 41
3 XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XX 42 XX 43 XX 44 XX 44 XX 45 XX 46
 Addata Addata Addatata Addata Addata Addata Addata Addatata Addatata Addatata Addatata Addatata Addatatata Addatatatatatatatatatatatatat	his return:	itus.		47 48 49 50
 National Guard, Reservists, and retired or disc Attach Form DD-214 for each period of qualifying 				51 52 53 54
⁵ We will accept completed forms and documer ⁶ Mail to:	ntation starting January 1, 202	5.		55 56
 ⁷ Minnesota Department of Revenue ⁸ Mail Station 0043 ⁹ 600 N. Robert St. 				57 58 59
500 N. Nobel 151. ⁰ St. Paul, MN 55146-0043				60 61
2 3	9995			62

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