



2024 M4, Corporation Franchise Tax Return

Do not use staples on anything you submit.

Tax year beginning (MM/DD/YYYY) ____/____/____ and ending (MM/DD/YYYY) ____/____/____

Name of Corporation/Designated Filer _____ FEIN _____ Minnesota Tax ID Number _____

Mailing Address _____ Check if new address _____ Business Activity Code (from federal) _____

City _____ State _____ ZIP Code _____

Former Name (if changed since 2023 return) _____ Federal Consolidated Common Parent Name (if different) FEIN _____

Check if filing a combined income return Check if reporting Tax Position Disclosure (Enclose Form TPD)

Is this your final C corporation return? If yes, indicate if:

Withdrawn Dissolved Merged S corp election

Check if a member of the group (place an X in the boxes that apply):

is claiming Public Law 86-272 is a Co-op is in Bankruptcy owns a captive insurance company

Has a federal examination been finalized? (list years) _____

Is a federal examination now in progress? (list years) _____

Tax years and expiration date(s) of federal waivers: _____

Report changes to federal income tax within 180 days of final determination. If there is a change in tax, you must report it on Form M4X.

You must round amounts to nearest whole dollar

1 Minnesota tax liability (from M4T, line 28). 1 ■ _____

2 Minnesota Nongame Wildlife Fund donation (see instructions, pg. 6) 2 ■ _____

3 Add lines 1 and 2 3 _____

4 Enterprise Zone Credit (attach Enterprise Zone Credit Form). 4 ■ _____

5 Credit for Historic Structure Rehabilitation (attach credit certificate) 5 ■ _____

Enter National Park Service (NPS) project number: _____

6 Credit for Sustainable Aviation Fuel 6 ■ _____

Enter certificate number from the Department of Agriculture: _____

7 Minnesota backup withholding. 7 ■ _____

8 Amount credited from your 2023 return 8 ■ _____

9 Total corporate estimated tax payments made for 2024 9 ■ _____

10 2024 extension payment. 10 ■ _____

11 Add lines 4 through 10. 11 _____

12 Tax due. If line 3 is more than line 11, subtract line 11 from line 3 12 ■ _____

13 Penalty (see instructions, pg. 6 and 7) 13 ■ _____





Name of Corporation/Designated Filer _____ FEIN _____ Minnesota Tax ID _____

14 Interest (see instructions, pg. 7) 14 ■ _____

15 Additional charge for underpayment of estimated tax (attach Schedule M15C) 15 ■ _____

16 AMOUNT DUE. If you entered an amount on line 12, add lines 12 through 15

Payment Method: Electronic (see inst., pg. 3), or Check (see inst., pg. 3) 16 ■ _____

17 Overpayment. If line 11 is more than the sum of lines 3 and 13 through 15, subtract line 3 and 13 through line 15 from line 11. If line 11 is less than the sum of lines 3 and 13 through 15, see instructions, pg. 7 17 ■ _____

18 Amount of line 17 to be credited to your 2025 estimated tax 18 ■ _____

19 REFUND. Subtract line 18 from line 17 19 ■ _____
If you have a refund, you must enter your banking information below.

Account Type:

Checking Savings _____ Routing Number _____ Account Number (use an account not associated with any foreign banks) _____

I declare that this return is correct and complete to the best of my knowledge and belief.

Authorized Signature _____ Title _____ Date (MM/DD/YYYY) _____ Direct Phone _____

Signature of Preparer _____ PTIN _____ Date (MM/DD/YYYY) _____ Preparer's Direct Phone _____

Print name of person to contact within corporation to discuss this return _____ Title _____ Direct Phone _____

Include a complete copy of your federal return including schedules as filed with the IRS.
If you're paying by check, see instructions, page 3.

Mail to: Minnesota Department of Revenue
Mail Station 1250
600 N. Robert St.
St. Paul, MN 55146-1250

- I authorize the Minnesota Department of Revenue to discuss this tax return with the preparer.
- I do not want my paid preparer to file my return electronically.





2024 M4I, Income Calculation

See instructions beginning on page 8.

Name of Corporation/Designated Filer _____ FEIN _____ Minnesota Tax ID _____

You must round amounts to nearest whole dollar

1 a. Federal taxable income before net operating loss deduction and special deductions
(from federal Form 1120, line 28, or see inst., pg. 8) **1a** ■ _____

b. Interest expense limitation for combined reports **1b** ■ _____

2 Additions to income

a. Federal deduction taken for taxes based on net income and minimum fee. . . . **2a** ■ _____

b. Federal deduction for capital losses *(IRC sections 1211 and 1212)*. **2b** ■ _____

c. Interest income exempt from federal income tax. **2c** ■ _____

d. Exempt interest dividends *(IRC section 852[b][5])* **2d** ■ _____

e. Losses from mining operations subject to occupation tax. **2e** ■ _____

f. Federal deduction for percentage depletion *(IRC sections 611-614 and 291)* . . **2f** ■ _____

g. Federal bonus depreciation and suspended loss *(IRC section 168[k])*. **2g** ■ _____

h. This line intentionally left blank **2h** ■ _____

i. This line intentionally left blank **2i** ■ _____

j. This line intentionally left blank **2j** ■ _____

k. This line intentionally left blank **2k** ■ _____

Total additions *(add lines 2a through 2k)* **2** ■ _____

3 Total *(add lines 1a, 1b, and 2)* **3** _____



See instructions beginning on page 9.



Name of Corporation/Designated Filer

FEIN

Minnesota Tax ID

4 Subtractions from income

- a. Refund of taxes based on net income included in federal taxable income **4a** ■ _____
- b. Minnesota deduction for capital losses **4b** ■ _____
- c. Certain federal credit expenses (see instructions, pg. 10; attach schedule) . . . **4c** ■ _____
- d. Gross-up for foreign taxes deemed paid under IRC section 78 **4d** ■ _____
- e. Expenses relating to income taxable by Minnesota, but federally exempt **4e** ■ _____
- f. Dividends paid by a bank to the U.S. government on preferred stock **4f** ■ _____
- g. Income/gains from mining operations subject to the occupation tax **4g** ■ _____
- h. Deduction for cost depletion **4h** ■ _____
- i. Subtraction for prior bonus depreciation addback **4i** ■ _____
- j. Subtraction for prior IRC section 179 addback **4j** ■ _____
- k. Delayed business interest **4k** ■ _____
- l. Deferred foreign income (Section 965) **4l** ■ _____
- m. Disallowed section 280E expenses of a licensed cannabis or hemp business . . **4m** ■ _____
- n. This line intentionally left blank **4n** ■ _____
- o. This line intentionally left blank **4o** ■ _____
- p. This line intentionally left blank **4p** ■ _____
- q. This line intentionally left blank **4q** ■ _____
- r. This line intentionally left blank **4r** ■ _____

Total subtractions (add lines 4a through 4r) 4 ■ _____

5 Intercompany eliminations (attach schedule) 5 ■ _____

6 Add lines 4 and 5 6 ■ _____

7 Minnesota net income (subtract line 6 from line 3) 7 ■ _____

8 Total nonapportionable income (see instructions, pg. 11; attach schedule) 8 ■ _____

9 Minnesota apportionable income (subtract line 8 from line 7). Enter on Form M4T, line 1 9 ■ _____





2024 M4A, Apportionment/Fee Calculation

B₁

B₂

B₃

Single/Designated Filer

Corporation Name _____

FEIN _____

Minnesota Tax ID _____

A

Total in and

outside Minnesota

In Minnesota

In Minnesota

In Minnesota

1 Average inventorya1 ■ _____ b1 _____ c1 _____

2 Average tangible property and
land owned/used (at original cost)a2 ■ _____ b2 _____ c2 _____

3 Capitalized rents (gross rents x 8)a3 ■ _____ b3 _____ c3 _____

4 Total property (add lines 1, 2 and 3)a4 ■ _____ b4 _____ c4 _____

5 Payroll/officer's compensationa5 ■ _____ b5 _____ c5 _____

6 MN sales or receiptsa6 ■ _____ b6 _____ c6 _____

7 MN sales of non-filing entities (see instructions pg. 12)a7 ■ _____ b7 _____ c7 _____

8 Sales or receipts (add lines 6 and 7)
(Financial institutions: see inst., pg. 14) . 8 ■ _____ a8 ■ _____ b8 _____ c8 _____

9 Minnesota apportionment factor (divide each
line 8B amount by line 8A; carry to six decimal places)a9 ■ _____ b9 _____ c9 _____
Enter amounts on Form M4T, line 2.

MINIMUM FEE CALCULATION (see inst., pg. 13)

10 Adjustments (see inst., pg. 13 and 14; attach schedule) ...a10 ■ _____ b10 _____ c10 _____

11 Add lines 4, 5, 8 and 10a11 ■ _____ b11 _____ c11 _____

12 Minimum fee (see table below)a12 ■ _____ b12 _____ c12 _____
Enter amounts on Form M4T, line 16.

Minimum Fee Table

If the amount on line 11 is:	Enter this amount on line 12:
less than \$1,220,000	\$0
1,220,000 to \$2,439,999	\$250
\$2,440,000 to \$12,199,999	\$730
\$12,200,000 to \$24,389,999	\$2,440
\$24,390,000 to \$48,779,999	\$4,890
\$48,780,000 or more	\$12,220





2024 M4T, Tax Calculation

	B₁ Single/designated filer	B₂	B₃
Corporation Name	_____	_____	_____
FEIN	_____	_____	_____
Minnesota Tax ID	_____	_____	_____
1 Minnesota apportionable income <i>(enter amount from M4I, line 9, in each column)</i> a1 ■	_____ b1	_____ c1	_____
2 Apportionment factor <i>(from M4A, line 9)</i> a2 ■	_____ b2	_____ c2	_____
3 Net income apportioned to Minnesota <i>(multiply line 1 by line 2)</i> a3 ■	_____ b3	_____ c3	_____
4a Minnesota nonapportionable income <i>(see inst., pg. 15; attach schedule)</i> a4a ■	_____ b4a	_____ c4a	_____
4b Minnesota nonunitary partnership income <i>(see inst., pg. 15; attach schedule)</i> a4b ■	_____ b4b	_____ c4b	_____
5 Taxable net income <i>(add lines 3, 4a, and 4b)</i> a5 ■	_____ b5	_____ c5	_____
6 Net operating loss deduction <i>(from NOL)</i> a6 ■	_____ b6	_____ c6	_____
7 Subtract line 6 from line 5 a7 ■	_____ b7	_____ c7	_____
8 Deduction for dividends received <i>(see inst., pg. 15)</i> a8 ■	_____ b8	_____ c8	_____
9 Taxable income <i>(subtract line 8 from line 7)</i> a9 ■	_____ b9	_____ c9	_____
10 Regular tax <i>(multiply line 9 by 0.098; if result is zero or less, leave blank)</i> a10 ■	_____ b10	_____ c10	_____
11 Alternative minimum tax (AMT) <i>(from AMTT, line 10)</i> a11 ■	_____ b11	_____ c11	_____
12 Add lines 10 and 11 a12 ■	_____ b12	_____ c12	_____
13 AMT credit <i>(from AMTT, line 13)</i> a13 ■	_____ b13	_____ c13	_____
14 Minnesota credit for increasing research activities <i>(from RD, line 45)</i> a14 ■	_____ b14	_____ c14	_____
15 Subtract lines 13 and 14 from line 12. a15 ■	_____ b15	_____ c15	_____
16 Minimum fee <i>(from M4A, line 12)</i> a16 ■	_____ b16	_____ c16	_____
17 Tax liability by corporation <i>(add lines 15 and 16)</i> a17 ■	_____ b17	_____ c17	_____
18 Film Production Tax Credit. a18 ■	_____ b18	_____ c18	_____
Enter the credit certificate number: TAXC - _____			
19 Tax Credit for Owners of Agricultural Assets <i>(see inst.)</i> a19 ■	_____ b19	_____ c19	_____
20 Employer Transit Pass Credit <i>(from ETP, line 4)</i> a20 ■	_____ b20	_____ c20	_____



B₁
Single/designated filer

B₂

B₃

Corporation Name _____

FEIN _____

Minnesota Tax ID _____

21 State Housing Tax Credit a21 ■ _____ b21 _____ c21 _____

Enter the credit certificate number from Minnesota Housing: SHTC - _____ - _____

22 Short Line Railroad Infrastructure Modernization Credit . . . a22 ■ _____ b22 _____ c22 _____

23 Credit for Sales of Manufactured Home Parks to
Cooperatives a23 ■ _____ b23 _____ c23 _____

24 Carryover credits from prior years (see instructions) a24 ■ _____ b24 _____ c24 _____

D — Name of Credit	E — Certificate Number	F — Unused Credit	G — MNID
d1 _____	e1 _____	f1 _____	g1 _____
d2 _____	e2 _____	f2 _____	g2 _____
d3 _____	e3 _____	f3 _____	g3 _____

25 LIFO Recapture Tax Deferral a25 ■ _____ b25 _____ c25 _____

26 Add lines 18 through 25. a26 ■ _____ b26 _____ c26 _____

27 Subtract line 26 from line 17. a27 ■ _____ b27 _____ c27 _____

28 Add all amounts on line 27. This is your **MINNESOTA TAX LIABILITY** 28 ■ _____
Enter on Form M4, line 1.

