



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Withdrawn Dissolved Merged S corp election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** _____



2024 M4I, Page 2

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	\$12,200





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> a 1 ■	b1	c1
2	Apportionment factor <i>(from M4A, line 9)</i> a 2 ■	b2	c2
3	Net income apportioned to Minnesota <i>(multiply line 1 by line 2)</i> a 3 ■	b3	c3
4a	Minnesota nonapportionable income <i>(see inst., pg. 15; attach schedule)</i> a 4a ■	b4a	c4a
4b	Minnesota nonunitary partnership income <i>(see inst., pg. 15; attach schedule)</i> a 4b ■	b4b	c4b
5	Taxable net income <i>(add lines 3, 4a, and 4b)</i> a 5 ■	b5	c5
6	Net operating loss deduction <i>(from NOL)</i> a 6 ■	b6	c6
7	Subtract line 6 from line 5 a 7 ■	b7	c7
8	Deduction for dividends received <i>(see inst., pg. 15)</i> a 8 ■	b8	c8
9	Taxable income <i>(subtract line 8 from line 7)</i> a 9 ■	b9	c9
10	Regular tax <i>(multiply line 9 by 0.098; if result is zero or less, leave blank)</i> a 10 ■	b10	c10
11	Alternative minimum tax (AMT) <i>(from AMTT, line 10)</i> a 11 ■	b11	c11
12	Add lines 10 and 11 a 12 ■	b12	c12
13	AMT credit <i>(from AMTT, line 13)</i> a 13 ■	b13	c13
14	Minnesota credit for increasing research activities <i>(from RD, line 45)</i> a 14 ■	b14	c14
15	Subtract lines 13 and 14 from line 12. a 15 ■	b15	c15
16	Minimum fee <i>(from M4A, line 12)</i> a 16 ■	b16	c16
17	Tax liability by corporation <i>(add lines 15 and 16)</i> a 17 ■	b17	c17
18	Film Production Tax Credit. a 18 ■	b18	c18
	Enter the credit certificate number: TAXC - _____		
19	Tax Credit for Owners of Agricultural Assets <i>(see inst.)</i> a 19 ■	b19	c19
20	Employer Transit Pass Credit <i>(from ETP, line 4)</i> a 20 ■	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 Enter on Form M4, line 1. 28 ■ _____

