



### 2025 M4, Corporation Franchise Tax Return

Do not use staples on anything you submit.

Tax	year beginning (MM/DD/YYYY)/ and end	ding (M	M/DD/YYYY)			
Name of Corporation/Designated Filer			FEIN		Minnesota Tax ID Nu	mber
Mail	ng Address Check if new address		Business Activity	Code (from federal)	-	
City			State		ZIP Code	
Form	er Name (if changed since previous year return)		Federal Consolida	ted Common Parer	nt Name (if different) F	EIN
	Check if filling a combined income return Check if reporting	g Tax Pos				
Is th	s your final C corporation return? If yes, indicate if:	Chec	k if a member of	the group (place	an X in the boxes tha	t apply):
	Withdrawn Dissolved Merged S corp election		is claiming Public Law 86-272	is a Co-op	is in Bankruptcy	owns a captive insurance company
	a federal examination been finalized? (list years)				If there is a change	federal income tax final determination. in tax, you must report
ls a	federal examination now in progress? (list years)				it on Form M4X.  You must round	amounts
Tax	years and expiration date(s) of federal waivers:				to nearest whole	e dollar
1	Minnesota tax liability (from M4T, line 28)			1		
2	Minnesota Nongame Wildlife Fund donation (see instructions, pg. 6)	1			· <b>·</b>	
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	$\label{thm:minnesota} \mbox{Minnesota refundable credit for increasing research activities (from \end{substitute} \mbox{\end{substitute}}$	RD, line	e 37)	7	· <b>-</b>	
8	Minnesota backup withholding			8	·	
9	Amount credited from your 2024 return			9		
10	Total corporate estimated tax payments made for 2025			10		
11	2025 extension payment			11	<b>—</b>	
12	Add lines 4 through 11				12	
13	Tax due. If line 3 is more than line 12, subtract line 12 from line 3			13	·	

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### NEAR FINAL DRAFT 8/22/25 M4I line 2i: fixed incorrectly stated "2h" on right hand side of column



Name of C	orporation/Designated Filer		FEIN	Minnesota Tax ID		
<b>14</b> Per	nalty (see instructions, pg. 6 and 7)		14 ■			
<b>15</b> Inte	erest (see instructions, pg. 7)		15 🗖			
<b>16</b> Add	ditional charge for underpayment of est	imated tax (attach Schedule i	M15C)	·		
17 AM	IOUNT DUE. If you entered an amount o	on line 13, add lines 13 throu	gh 16			
Pay	ment Method: Electronic (see inst.,	pg. 3), or Check (see in	nst., pg. 3)			
and	8 Overpayment. If line 12 is more than the sum of lines 3 and 14 through 16, subtract line 3 and 14 through line 16 from line 12. If line 12 is less than the sum of lines 3 and 14 through 16, see instructions, pg. 7					
<b>19</b> Am	ount of line 18 to be credited to your 20	026 estimated tax	19 ■			
	FUND. Subtract line 19 from line 18 ou have a refund, you must enter your be Type:		20 ■	I		
Che	ecking Savings Routing Num	ber Accou	nt Number (use an account not associat	ed with any foreign banks)		
I declar	e that this return is correct and complet	e to the best of my knowledg	e and belief.			
 Authorized	d Signature	Title	/ / Date (MM/DD/YYYY)	Direct Phone		
Signature	of Preparer	PTIN	/ / Date (MM/DD/YYYY)	Preparer's Direct Phone		
Print name	e of person to contact within corporation to discus	ss this return	Title	Direct Phone		
If you're	a complete copy of your federal return paying by check, see instructions, page Minnesota Department of Revenue Mail Station 1250 600 N. Robert St.		I authorize the M to discuss this ta	finnesota Department of Revenue x return with the preparer. r paid preparer to file my return		
If you're	paying by check, see instructions, page Minnesota Department of Revenue Mail Station 1250		I authorize the N to discuss this ta	x return with the pre		





# 2025 M4I, Income Calculation

See instructions beginning on page 8.

Nam	e 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 deduct (from federal Form 1120, line 28, or see inst., pg. 8)		•
2	b. Interest expense limitation for combined reports	1bl	·
	a. Federal deduction taken for taxes based on net income and minimum fee. $\dots$	.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. Addition due to federal changes not adopted by Minnesota (Schedule M4NC, line 31)	2h ■	
	i. This line intentionally left blank	. 2i ■	<u> </u>
	j. This line intentionally left blank	. 2j ■	_
	k. This line intentionally left blank	.2k ■	<u> </u>
	Total additions (add lines 2a through 2k)	21	I
3	Total (add lines 1a, 1b, and 2)		3

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See instructions beginning on page 9.

**NEAR FINAL DRAFT 8/22/25** 

M4I line 2i: fixed incorrectly stated "2h" on right hand side of column



Name of Corporation/Designated Filer Minnesota Tax ID 4 Subtractions from income a. Refund of taxes based on net income included in federal taxable income ...... 4a 🔳 \_ c. Certain federal credit expenses (see instructions, pg. 10; attach schedule) . . . . 4c ■ \_ e. Expenses relating to income taxable by Minnesota, but federally exempt . . . . . 4e 
\_\_\_ g. Income/gains from mining operations subject to the occupation tax  $\dots$  4g  $\blacksquare$  \_ k. Delayed business interest ......4k ■ m. Disallowed section 280E expenses of a licensed cannabis or hemp business . .4m 
\_\_ o. Subtraction due to federal changes not adopted by Minnesota 

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



# 2025 M4A, Apportionment/Fee Calculation

2025 WI4A, Apporti	omment, ree ca	B <sub>1</sub> Single/Designated Filer	B <sub>2</sub>	B <sub>3</sub>
	Corporation Name			
	FEIN _			
	Minnesota Tax ID			
	<b>A</b> Total in and			
	outside Minnesota	In Minnesota	In Minnesota	In Minnesota
1 Average inventory	a <b>1</b> ■		b1	c1
2 Average tangible property and	.=			_
land owned/used (at original cost) .	a <b>∠</b> ■		b2	c2
<b>3</b> Capitalized rents (gross rents x 8)			b3	c3
4 Total property (add lines 1, 2 and 3)	a <b>4 ■</b>		b4	c4
5 Payroll/officer's compensation	a <b>5 ■</b>		b5	c5
6 MN sales or receipts	a <b>6 ■</b>		b6	c6
7 MN sales of non-filing entities (see in	nstructions pg. 12) a <b>7</b> ■		b7	c7
8 Sales or receipts (add lines 6 and 7)				
(Financial institutions: see inst., pg. 14	l) .8 ■ a8 ■		b8	c8
9 Minnesota apportionment factor (dir line 8B amount by line 8A; carry to si Enter amounts on Form M4T, line 2.	ix decimal places) a <b>9</b> ■		b9	c9
MINIMUM FEE CALCULATION (see in				
<b>10</b> Adjustments (see inst., pg. 13 and 1	14; attach schedule)a <b>10 ■</b>		b10	c10
<b>11</b> Add lines 4, 5, 8 and 10			b11	c11
12 Minimum fee (see table below) Enter amounts on Form M4T, line			b12	c12

Minimum Fee Table			
If the amount Enter this amount			
on line 11 is:	on line 12:		
less than \$1,250,000	\$0		
1,250,000 to \$2,509,999	\$260		
\$2,510,000 to \$12,539,999	\$750		
\$12,540,000 to \$25,069,999	\$2,510		
\$25,070,000 to \$50,139,999	\$5,020		
\$50,140,000 or more	\$12,540		





2025 M4T, Tax Calculation		<b>B</b> <sub>1</sub> Single/designated filer	B <sub>2</sub>	B <sub>3</sub>	
		Corporation Name			
		FEIN			
	Minnonto amantino bio incomo	Minnesota Tax ID			
1	Minnesota apportionable income (enter amount from M4I, line 9, in each co	olumn) a <b>1 ■</b> .	b1	c1	
	Apportionment factor (from M4A, line 9) Net income apportioned to Minnesota	a <b>2 ■</b> .	b2	c2	
<b>4</b> 2	(multiply line 1 by line 2)	a <b>3 ■</b>	b3	c3	
	(see inst., pg. 15; attach schedule) Minnesota nonunitary partnership incom		b4a	c4a	
	(see inst., pg. 15; attach schedule)		b4b	c4b	
5	Taxable net income (add lines 3, 4a, and 4	!b)a <b>5 ■</b>	b5	c5	
6	Net operating loss deduction (from NOL)	a <b>6 ■</b> .	b6	c6	
7	Subtract line 6 from line 5	a7 <b>■</b> .	b7	c7	
8	Deduction for dividends received (see inst.	., pg. 15) a <b>8 ■</b>	b8	c8	
	Taxable income (subtract line 8 from line	7) a <b>9 ■</b> .	b9	c9	
10	Regular tax (multiply line 9 by 0.098; if result is zero or less, leave blank)	a <b>10 ■</b>	b10	c10	
11	Alternative minimum tax (AMT) (from AM	1TT, line 10) a <b>11 ■</b> .	b11	c11	
12	Add lines 10 and 11	a12 ■ .	b12	c12	
13	AMT credit (from AMTT, line 13)	a <b>13 ■</b> .	b13	c13	
14	Minnesota nonrefundable credit for incre research activities (from RD, line 46)	· ·	b14	c14	
15	Subtract lines 13 and 14 from line 12	a <b>15 ■</b> .	b15	c15	
16	Minimum fee (from M4A, line 12)	a <b>16 ■</b> .	b16	c16	
17	Tax liability by corporation (add lines 15 a	nd 16) a <b>17 ■</b> .	b17	c17	
18	Film Production Tax Credit	a18 ■ .	b18	c18	
	Enter the credit certificate number: TAXC				
19	Tax Credit for Owners of Agricultural Asse	ts ( <i>see inst.</i> ) a <b>19 ■</b> _	b19	c19	
20	Employer Transit Pass Credit (from ETP, lin	ne 4) a <b>20 ■</b> _	b20	c20	

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#### NEAR FINAL DRAFT 8/22/25 M4I line 2i: fixed incorrectly stated "2h" on right hand side of column



В, Single/designated filer **Corporation Name** FEIN Minnesota Tax ID Enter the credit certificate number from Minnesota Housing: SHTC - \_\_\_\_\_ - \_\_\_\_ \_\_\_\_\_ c22 \_\_\_ Enter certificate number from the certificate you received from the Minnesota Department of Transportation: MN-SLR \_\_\_\_ 23 Credit for Sales of Manufactured Home Parks to 24 Carryover credits from prior years (see instructions) . . . . . a24 ■ \_\_\_ \_\_\_\_ b24 \_\_\_ \_\_\_ c24 \_\_ D — Name of Credit E — Certificate Number F — Unused Credit \_\_\_\_\_ e1 \_\_\_\_ f1 \_\_\_\_ g1 \_\_\_\_ e2 \_\_\_\_\_ f2 \_\_\_\_\_ g2 \_\_\_\_\_ \_\_\_\_\_\_ e3 \_\_\_\_\_ f3 \_\_\_\_\_ g3 \_\_\_\_\_ 25 LIFO Recapture Tax Deferral ......a25 ■ \_\_\_ \_\_\_\_\_ b25 \_\_ **26** Add lines 18 through 25......a**26** ■ \_\_\_\_ \_\_\_\_\_ b26 \_\_\_ Add all amounts on line 27. This is your MINNESOTA TAX LIABILITY 28 ■ \_\_ Enter on Form M4, line 1.