



2025 M4R, Minnesota Business Activity Report

Corporations are required to file Form M4R if they obtain any business from within Minnesota during the tax year. If you are registered with the Minnesota Secretary of State's Office to do business in this state, you are not required to file Form M4R.

For Calendar Year		Or fiscal year (enter beginning/ending dates)	
1999		Begins 01011966 Ends 01011966	
Name of Corporation		FEIN	Minnesota Tax ID
NAME OF CORPORATIONXXXXXXXXXXXXXXXXXXXX		0123456789	0123456789
Mailing Address		Are you a member of a unitary business?	Do you make retail sales in Minnesota?
MAILING ADDRESSXXXXXXXXXXXX		<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City	State	ZIP Code	
CITYXXXXXXXXXXXX	MN	55555	
Principal Office in Minnesota		Principal Type of Business	
FORMER NAME XXXXXXXXXXXXXXXXXXXXXXX		PRINCIPAL TYPE OF BUSINESS	
Street Address		Principal Product or Service	
STREET ADDRESS		PRINCIPAL PRODUCT OR SERVICE	
City	State	ZIP Code	Amount of Minnesota Sales (wholesale or retail) or Receipts
CITYXXXXXXXXXXXXXXXXXXXX	MN	55555	\$123456789000000000000000000000
Offices and other places of business in Minnesota. (Attach additional sheets if you need more room.)			
Location		Nature of Activity	
LOCATION LOCATION LOCATION LOCATION		NATURE OF ACTIVITY	
LOCATION LOCATION LOCATION LOCATION		NATURE OF ACTIVITY	
LOCATION LOCATION LOCATION LOCATION		NATURE OF ACTIVITY	
Officers, employees, agents and representatives with activity in Minnesota. (Attach a brief job description for each officer and class of employee.)			
Title		Number of Persons	
TITLE		NUMBER OF PERSONS	
TITLE		NUMBER OF PERSONS	
On a separate sheet, explain all "yes" answers below in detail. During the period covered by the report, did the corporation:			
		Yes	No
1 Own or lease tangible or intangible personal property or real property in Minnesota?		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2 Employ or own any other assets in Minnesota?		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3 Own or consign any merchandise located in Minnesota?		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4 Own assets located in Minnesota that are leased to others?		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
5 Perform or contract any training, installation or repair work in Minnesota?		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
6 Perform or contract any warranty work in Minnesota?		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
7 Derive any revenues from services performed by employees or entities for persons or businesses located in Minnesota?		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
8 Derive income from any source within Minnesota, including income from activities conducted by subsidiaries, affiliated entities or partnerships?		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
I certify that this report, including any accompanying material, is true, correct and complete to the best of my knowledge and belief.			
Signature	Title	Date	Direct Phone
	TITLE	11141966	6515555555
Signature of Preparer	PTIN	Date	Direct Phone
	PTIN	11141966	6515555555

Mail to: Minnesota Department of Revenue, Mail Station 5130, 600 N. Robert St., St. Paul, MN 55146-5130