



2026 Schedule M1NR, Nonresidents/Part-Year Residents

Before you complete this schedule, read the instructions and complete lines 1 through 11 of Form M1.

Your First Name and Initial _____ Your Last Name _____ Your Social Security Number _____

Spouse's First Name and Initial _____ Spouse's Last Name _____ Spouse's Social Security Number _____

Residency (Place an X in one box and enter other state of residency)

You: ☐ Full-year Nonresident ☐ Minnesota Resident from _____ to _____ Other State of Residency: _____
(MM/DD/YYYY) (MM/DD/YYYY)

Spouse: ☐ Full-year Nonresident ☐ Minnesota Resident from _____ to _____ Other State of Residency: _____
(MM/DD/YYYY) (MM/DD/YYYY)

		A. Total Amount	B. Minnesota Portion
1	Wages, salaries, tips, etc. (from line 1z of federal Form 1040 or 1040-SR)	1	
2	Taxable interest and ordinary dividend income (lines 2b and 3b of Form 1040 or 1040-SR)	2	
3	Business income or loss (from line 3 of federal Schedule 1)	3	
4	Capital gain or loss (from line 7 of Form 1040 or 1040-SR)	4	
5	IRA distributions, pensions, and annuities (from lines 4b and 5b of Form 1040 or 1040-SR)	5	
6	Net income from rents, royalties, partnerships, S corporations, estates, and trusts (from line 5 of federal Schedule 1)	6	
7	Farm income or loss (from line 6 of federal Schedule 1)	7	
8	Other income (add lines 6b of Form 1040 or 1040-SR and lines 1, 2a, 4, 7, and 9 of federal Schedule 1)	8	
9	Interest and dividends from non-Minnesota state or municipal bonds (add lines 1 and 2 of Schedule M1M)	9	
10	Bonus depreciation addition from line 1 of Schedule M1MB	10 ■	■
11	If you entered an amount on line 10 of Schedule M1REF, see instructions	11 ■	■
12	Suspended loss from line 4 of Schedule M1MB	12 ■	■
13	Other required adjustments from Schedules M1M, M1MB, and M1AR (see instructions)	13 ■	■
14	This line intentionally left blank	14 ■	■
15	Add lines 1 through 14 for each column	15 ■	■

If your Minnesota gross income is below \$15,300 see instructions.

16	Educator expenses, certain business expenses, and Armed Forces moving expenses (add lines 11, 12, and 14 of federal Schedule 1)	16	
17	Self-employed SEP, SIMPLE, and qualified plans and IRA deduction (add lines 16 and 20 of federal Schedule 1)	17	
18	Health savings account and Archer MSA deductions (add lines 13 and 23 of federal Schedule 1)	18	
19	One-half of self-employment tax and self-employed health insurance (add lines 15 and 17 of federal Schedule 1)	19	
20	Deductions for alimony paid and student loan interest (see instructions for line 20, column B)	20	



21	Penalty on early withdrawal of savings (from line 18 of federal Schedule 1)	21	_____	_____
22	Other subtractions from Schedule M1MB (see instructions).	22 ■	_____	■ _____
23	This line intentionally left blank	23 ■	_____	■ _____
24	Subtraction for federal bonus depreciation from line 13 of Schedule M1MB	24 ■	_____	■ _____
25	Net U.S. bond interest and active military pay received while a nonresident (add lines 16 and 24 of Schedule M1M)	25	_____	
26	Subtraction for income from prior year Partnership or S Corp sale (line 17 of Schedule M1MB)	26	_____	_____
27	Add lines 16 through 26 for each column	27	_____	_____
28	Subtract line 27, column B, from line 15, column B. Enter here and on line 13a of Form M1. If your Minnesota gross income is below \$15,300 or the result is zero or less, enter 0	28	_____	_____
29	Subtract line 27, column A, from line 15, column A. Enter the result here and on line 13b of Form M1	29	_____	_____
30	Divide line 28 by line 29, and enter the result as a decimal (carry to five decimal places). If line 28 is more than line 29, enter 1.0. If line 28 is zero, enter 0	30	_____	_____
31	Amount from line 12 of Form M1	31	_____	_____
32	Multiply line 30 by line 31. Enter the result here and on line 13 of Form M1	32	_____	_____

You must include this schedule with Form M1. Enter the amounts from lines 28 and 29 of this schedule on Form M1, lines 13a and 13b.

