





14 Other taxes, such as recapture amounts and the tax on lump-sum distributions (check appropriate boxes)

☐ (a) Schedule M1HOME ☐ (b) Schedule M1529 ☐ (c) Schedule M1LS . . . . . 14 ■ \_\_\_\_\_

15 Tax before credits. Add lines 13 and 14 . . . . . 15 \_\_\_\_\_ 8416

16 Amount from line 21 of Schedule M1C, *Nonrefundable Credits* (enclose Schedule M1C) . . . . . 16 ■ \_\_\_\_\_

17 Subtract line 16 from line 15 (if result is zero or less, leave blank) . . . . . 17 \_\_\_\_\_ 8416

18 Nongame Wildlife Fund contribution (see instructions)

This will reduce your refund or increase the amount you owe . . . . . 18 ■ \_\_\_\_\_

19 Add lines 17 and 18 . . . . . 19 \_\_\_\_\_ 8416

20 **Minnesota income tax withheld.** Complete and enclose Schedule M1W to report

Minnesota withholding from Forms W-2, 1099, and W-2G and Schedules KPI, KS, and KF . . . . . 20 ■ \_\_\_\_\_

21 Minnesota estimated tax and extension payments made for 2023 . . . . . 21 ■ \_\_\_\_\_

22 Amount from line 11 of Schedule M1REF, *Refundable Credits* (see instructions; enclose Schedule M1REF). . . . . 22 ■ \_\_\_\_\_

23 Total payments. Add lines 20 through 22 . . . . . 23 \_\_\_\_\_

24 **REFUND.** If line 23 is more than line 19, subtract line 19 from line 23 (see instructions).

For direct deposit, complete line 25 . . . . . 24 ■ \_\_\_\_\_

25 Direct deposit of your refund (you must use an account not associated with a foreign bank):

☐ Checking ☐ Savings \_\_\_\_\_  
Routing Number Account Number

26 **AMOUNT YOU OWE.** If line 19 is more than line 23, subtract line 23 from line 19 (see instructions). . . . . 26 ■ \_\_\_\_\_ 8567

27 Penalty amount from Schedule M15 (see instructions). Also subtract

this amount from line 24 or add it to line 26 (enclose Schedule M15) . . . . . 27 ■ \_\_\_\_\_ 151

28 Penalty and interest (see instructions) . . . . . 28 ■ \_\_\_\_\_

**IF YOU PAY ESTIMATED TAX** and want part of your refund credited to estimated tax, complete lines 29 and 30.

29 Amount from line 24 you want sent to you . . . . . 29 ■ \_\_\_\_\_

30 Amount from line 24 you want applied to your 2024 estimated tax . . . . . 30 ■ \_\_\_\_\_

**Taxpayer(s):** I declare that this return is correct and complete to the best of my knowledge and belief.

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Spouse's Signature (If Filing Jointly)

\_\_\_\_\_  
Date (MM/DD/YYYY)

\_\_\_\_\_  
Daytime Phone

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Paid Preparer's Signature

\_\_\_\_\_  
Date (MM/DD/YYYY)

\_\_\_\_\_  
PTIN or VITA/TCE # (required)

\_\_\_\_\_  
Preparer's Daytime Phone

\_\_\_\_\_  
Preparer's Email Address

☐ I do not want my paid preparer to file my return electronically.

☐ I authorize the Minnesota Department of Revenue to discuss this tax return with the preparer or the third-party designee indicated on my federal return.

**Include a copy of your 2023 federal return and schedules.**

**Mail to: Minnesota Individual Income Tax, Mail Station 0010, 600 N. Robert St., St. Paul, MN 55146-0010**