



2021 Form M1, Individual Income Tax

Do not use staples on anything you submit.

Your First Name and Initial _____		Last Name _____		Your Social Security Number _____		Your Date of Birth (MM/DD/YYYY) _____	
If a Joint Return, Spouse's First Name and Initial _____		Spouse's Last Name _____		Spouse's Social Security Number _____		Spouse's Date of Birth _____	
Current Home Address _____				Check if Address is:		<input type="checkbox"/> New <input type="checkbox"/> Foreign	
City _____				State _____		ZIP Code _____	

2021 Federal Filing Status (place an X in one box):

(1) Single
 (2) Married Filing Jointly
 (3) Married Filing Separately
 (4) Head of Household
 (5) Qualifying Widow(er)

Spouse Name _____

Spouse SSN _____

Dependents (see instructions):

Dependent 1 First Name _____	Dependent 1 Last Name _____	Dependent 1 SSN _____	Dependent 1 Relationship to You _____
Dependent 2 First Name _____	Dependent 2 Last Name _____	Dependent 2 SSN _____	Dependent 2 Relationship to You _____
Dependent 3 First Name _____	Dependent 3 Last Name _____	Dependent 3 SSN _____	Dependent 3 Relationship to You _____

State Elections Campaign Fund

To grant \$5 to this fund, enter the code for the party of your choice. It will help candidates for state offices pay campaign expenses. This will not increase your tax or reduce your refund.

Political Party Code Numbers:

Democratic/Farmer-Labor . . . 12	Grassroots/Legalize Cannabis 14	Legal Marijuana Now 17
Republican 11	Independence 13	Libertarian 16
		General Campaign Fund 99

Your Code _____ Spouse's Code _____

From Your Federal Return *(see instructions)*

A. Wages, salaries, tips, etc.	B. IRA, pensions, and annuities	C. Unemployment	D. Federal taxable income
<p>1 Federal adjusted gross income <i>(from line 11 of federal Form 1040 and 1040-SR)</i> 1 ■ _____</p> <p>2 Additions to income from line 10 of Schedule M1M and line 9 of Schedule M1MB <i>(see instructions)</i> 2 ■ _____</p> <p>3 Add lines 1 and 2. 3 _____</p> <p>4 Itemized deductions <i>(from Schedule M1SA)</i> or your standard deduction <i>(see instructions)</i> 4 ■ _____</p> <p>5 Exemptions <i>(determine from instructions)</i> 5 ■ _____</p> <p>6 State income tax refund from line 1 of federal Schedule 1 6 ■ _____</p> <p>7 Subtractions from line 32 of Schedule M1M and line 22 of Schedule M1MB <i>(see instructions)</i> 7 ■ _____</p> <p>8 Total subtractions. Add lines 4 through 7 8 _____</p> <p>9 Minnesota taxable income. Subtract line 8 from line 3. If zero or less, leave blank. 9 _____</p> <p>10 Tax from the table in the Form M1 instructions 10 _____</p>			



11 Alternative minimum tax (enclose Schedule M1MT) 11 ■ _____

12 Add lines 10 and 11 12 _____

13 **Full-year residents:** Enter the amount from line 12 on line 13. Skip lines 13a and 13b.
Part-year residents and nonresidents: From Schedule M1NR, enter the amount from line 32 on line 13, from line 28 on line 13a, and from line 29 on line 13b (enclose Schedule M1NR) 13 _____


13a ■ _____ 13b ■ _____

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 _____

16 Amount from line 18 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 _____

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 _____

20 **Minnesota income tax withheld.** Complete and enclose Schedule M1W to report
Minnesota withholding from Forms W-2, 1099, and W-2G (do not send) 20 ■ _____

21 Minnesota estimated tax and extension payments made for 2021 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 ■ _____

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 ■ _____

IF YOU PAY ESTIMATED TAX and want part of your refund credited to estimated tax, complete lines 28 and 29.

28 Amount from line 24 you want sent to you 28 ■ _____

29 Amount from line 24 you want applied to your 2022 estimated tax 29 ■ _____

Taxpayer: 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 2021 federal return and schedules.
Mail to: Minnesota Individual Income Tax, Mail Station 0010, 600 N. Robert St., St. Paul, MN 55145-0010
9995