



- 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 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 _____
 - 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 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 ■ _____
 - 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 ■ _____
 - 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