

2017 Form M1, Individual Income Tax

Leave unused boxes blank. Do not use staples on anything you submit.

Your First Name and Initial Matthew D	Last Name Kanis	Your Social Security Number 490766493
If a Joint Return, Spouse's First Name and Initial Gladys B	Spouse's Last Name Kanis	Spouse's Social Security Number 166393097
Current Home Address 1512 11th St. SW	Check if: <input type="checkbox"/> New Address <input type="checkbox"/> Foreign Address	Your Date of Birth 02031971
City Wadena	State MN Zip Code 56482	Spouse's Date of Birth 01231977

2017 Federal Filing Status

(1) Single
 (2) Married filing jointly
 (3) Married filing separately: Enter spouse name and Social Security number _____
 (4) Head of household
 (5) Qualifying widow(er)

State Elections Campaign Fund

If you want \$5 to go to help candidates for state offices pay campaign expenses, enter the code number for the party of your choice. This will not increase your tax or reduce your refund.

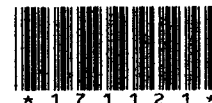
Political party and code number:		Your code _____
Republican 11	Grassroots—Legalize Cannabis . 14	Legal Marijuana Now 17
Democratic/Farmer-Labor . 12	Green 15	General Campaign
Independence 13	Libertarian 16	Fund 99

Spouse code _____

From Your Federal Return <i>(see instructions)</i>	A Wages, salaries, tips, etc. _____ 27682	B IRA, pensions, and annuities _____	C Unemployment _____	D Federal adjusted gross income _____ 6882
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▲ Place an X in box if a negative number

1 Federal taxable income (from line 43 of federal Form 1040, line 27 of Form 1040A, or line 6 of Form 1040EZ) (if a negative number, place an X in the box)	1 <input type="checkbox"/> _____ 6882
2 State income tax or sales tax addition. If you itemized deductions on federal Form 1040, complete the worksheet in the instructions	2 _____
3 Other additions to income, including disallowed itemized deductions, personal exemptions, non-Minnesota bond interest, and domestic production activities deduction (see instructions; enclose Schedule M1M)	3 _____
4 Add lines 1 through 3 (if a negative number, place an X in the box)	4 <input type="checkbox"/> _____ 6882
5 State income tax refund from line 10 of federal Form 1040	5 _____
6 Other subtractions, such as net interest or mutual fund dividends from U.S. bonds, Title 10 military retirement pay, or K-12 education expenses (see instructions; enclose Schedule M1M)	6 _____
7 Total subtractions. Add lines 5 and 6	7 _____
8 Minnesota taxable income. Subtract line 7 from line 4. If zero or less, leave blank.	8 _____ 6882
9 Tax from the table in the M1 instructions	9 _____ 366
10 Alternative minimum tax (enclose Schedule M1MT)	10 _____
11 Add lines 9 and 10	11 _____ 366
12 Full-year residents: Enter the amount from line 11 on line 12. Skip lines 12a and 12b. Part-year residents and nonresidents: From Schedule M1NR, enter the amount from line 27 on line 12, from line 23 on line 12a, and from line 24 on line 12b (enclose Schedule M1NR)	12 _____ 366
a _____ b <input type="checkbox"/> _____ (Place an X in box if a negative number)	
13 Tax on lump-sum distribution (enclose Schedule M1LS)	13 _____



14 Tax on non-qualified first-time homebuyer withdrawals (enclose Schedule M1HOME) 14 _____

15 Tax before credits. Add lines 12, 13, and 14 15 _____


16 Marriage Credit for joint return when both spouses have taxable earned income
or taxable retirement income (enclose Schedule M1MA) 16 ■ _____

17 Credit for taxes paid to another state (enclose Schedule(s) M1CR and M1RCR) 17 ■ _____

18 Other nonrefundable credits (enclose Schedule M1C) 18 ■ _____

19 Total nonrefundable credits. Add lines 16, 17, and 18 19 _____

20 Subtract line 19 from line 15 (if result is zero or less, leave blank) 20 _____

21 Nongame Wildlife Fund contribution (see instructions)
This will reduce your refund or increase the amount you owe  21 ■ _____

22 Add lines 20 and 21 22 _____

23 Minnesota income tax withheld. Complete and enclose Schedule M1W to report
Minnesota withholding from W-2, 1099, and W-2G forms (do not send) 23 ■ _____ 368

24 Minnesota estimated tax and extension payments made for 2017 24 ■ _____

25 Refundable credits (enclose Schedule M1REF): Child and Dependent Care Credit, Working Family Credit,
K-12 Education Credit, Credit for Parents of Stillborn Children, and Credit for Tax Paid to Wisconsin. 25 ■ _____

26 Business and investment credits (enclose Schedule M1B) 26 ■ _____

27 Total payments. Add lines 23 through 26 27 _____ 368

28 REFUND. If line 27 is more than line 22, subtract line 22 from line 27 (see instructions).
For direct deposit, complete line 29 28 ■ _____ 2

29 Direct deposit of your refund (you must use an account not associated with a foreign bank):
Account Type Routing Number Account Number
 Checking Savings _____

30 AMOUNT YOU OWE. If line 22 is more than line 27, subtract
line 27 from line 22 (see instructions) 30 ■ _____

31 Penalty amount from Schedule M15 (see instructions). Also subtract
this amount from line 28 or add it to line 30 (enclose Schedule M15) 31 ■ _____

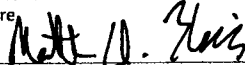
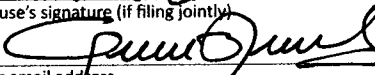
IF YOU PAY ESTIMATED TAX and want part of your refund credited to estimated tax, complete lines 32 and 33.

32 Amount from line 28 you want sent to you 32 ■ _____ 0

33 Amount from line 28 you want applied to your 2018 estimated tax 33 ■ _____ 2

I declare that this return is correct and complete to the best of my knowledge and belief.

Paid preparer: You must sign below.

Your signature 	Date 7/14/20	Paid preparer's signature	Date
Spouse's signature (if filing jointly) 	Taxpayer's daytime phone 2186398437	Preparer's daytime phone	PTIN or VITA/TCE # (required)
Your email address mattkanis@gmail.com		Preparer's email address	

Include a copy of your 2017 federal return and schedules.

Mail to: Minnesota Individual Income Tax
St. Paul, MN 55145-0010

To check on the status of your refund, visit www.revenue.state.mn.us

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

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