



**2023 Form M1, Individual Income Tax**

Do not use staples on anything you submit.

RAJAT GUPTA 893965067 12191992  
 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 \_\_\_\_\_

815 E 61ST STREET \_\_\_\_\_  
 Current Home Address Check if Address is:  New  Foreign

MINNEAPOLIS \_\_\_\_\_ MN \_\_\_\_\_ 55417 \_\_\_\_\_  
 City State ZIP Code

**2023 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 Surviving Spouse

Spouse Name \_\_\_\_\_  
 Spouse SSN \_\_\_\_\_

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

Your Code \_\_\_\_\_ Spouse's Code \_\_\_\_\_

**From Your Federal Return (see instructions)**

<u>199955</u>	<u>0</u>	<u>0</u>	<u>179321</u>
A. Wages, salaries, tips, etc.	B. IRA, pensions, and annuities	C. Unemployment	D. Federal taxable income
<b>1 Federal adjusted gross income (from line 11 of federal Form 1040 and 1040-SR) . . . . . 1 ■ <u>199955</u></b>			
<b>2 Additions to income from line 10 of Schedule M1M and line 9 of Schedule M1MB (see instructions) . . . . . 2 ■ _____</b>			
<b>3 Add lines 1 and 2. . . . . 3 <u>199955</u></b>			
<b>4 Itemized deductions (from Schedule M1SA) or your standard deduction (see instructions) . . . . . 4 ■ <u>13825</u></b>			
<b>5 Exemptions (from Schedule M1DQC) . . . . . 5 ■ _____</b>			
<b>6 State income tax refund from line 1 of federal Schedule 1 . . . . . 6 ■ _____</b>			
<b>7 Subtractions from line 35 of Schedule M1M and line 21 of Schedule M1MB (see instructions) . . . . . 7 ■ _____</b>			
<b>8 Total subtractions. Add lines 4 through 7. . . . . 8 <u>13825</u></b>			
<b>9 Minnesota taxable income. Subtract line 8 from line 3. If zero or less, leave blank. . . . . 9 <u>186130</u></b>			
<b>10 Tax from the table or schedules in the Form M1 instructions . . . . . 10 <u>13194</u></b>			
<b>11 Alternative minimum tax (enclose Schedule M1MT) . . . . . 11 ■ _____</b>			
<b>12 Add lines 10 and 11 . . . . . 12 <u>13194</u></b>			
<b>13 Full-year residents: Enter the amount from line 12 on line 13. Skip lines 13a and 13b.</b>			
<b>Part-year residents and nonresidents: From Schedule M1NR, enter the amount from line 32 on</b>			
<b>line 13, from line 28 on line 13a, and from line 29 on line 13b (enclose Schedule M1NR) . . . . . 13 <u>7228</u></b>			
<b>13a ■ <u>109534</u></b>	<b>13b ■ <u>199955</u></b>		







# 2023 Schedule M1NR, Nonresidents/Part-Year Residents

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

RAJAT \_\_\_\_\_ GUPTA \_\_\_\_\_ 893965067 \_\_\_\_\_  
 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

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

You:  Full-year Nonresident  Part-Year Resident from 06012023 to 12312023 Other State of Residency: TX  
 (MM/DD/YYYY) (MM/DD/YYYY)

Your Spouse:  Full-year Nonresident  Part-Year 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 199955	109534
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 0	0
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 9 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 ■ 199955	109534

**If your Minnesota gross income is below \$13,825 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	Social Security benefit from line 12 of Schedule M1M (see instructions). . . . .	23	■ _____	■ _____
24	Subtraction for federal bonus depreciation from line 10 of Schedule M1MB . . . . .	24	■ _____	■ _____
25	Net U.S. bond interest and active military pay received while a nonresident (add lines 14 and 22 of Schedule M1M) . . . . .	25	_____	_____
26	Subtraction for federal section 179 expensing (from line 11 of Schedule M1MB) . . . . .	26	_____	_____
27	Add lines 16 through 26 for each column . . . . .	27	_____	0 _____ 0
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 \$13,825 or the result is zero or less, enter 0 . . . . .	28	_____	109534
29	Subtract line 27, column A, from line 15, column A. Enter the result here and on line 13b of Form M1 . . . . .	29	_____	199955
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	_____	.54779
31	Amount from line 12 of Form M1 . . . . .	31	_____	13194
32	Multiply line 30 by line 31. Enter the result here and on line 13 of Form M1 . . . . .	32	_____	7228

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.





# 2023 Schedule M1W, Minnesota Income Tax Withheld

Complete this schedule to report Minnesota income tax withheld. Include this schedule when you file your return.

RAJAT  
Your First Name and Initial

GUPTA  
Last Name

893965067  
Your Social Security Number

\_\_\_\_\_  
If a Joint Return, Spouse's First Name and Initial

\_\_\_\_\_  
Spouse's Last Name

\_\_\_\_\_  
Spouse's Social Security Number

If you received a federal Form W-2, 1099, W-2G, 1042-S, or Minnesota Schedule KPI, KS, or KF showing Minnesota income tax withheld, complete this schedule to determine line 20 of Form M1. List only the forms that report Minnesota income tax withheld. Round dollar amounts to the nearest whole dollar. You must include this schedule when you file your return. **DO NOT** send in your Forms W-2, 1099, or W-2G; keep them with your tax records. All instructions are included on this schedule.

**1** Minnesota wages and Minnesota tax withheld on Forms W-2, other than from Forms W-2G. If you have more than five Forms W-2, complete line 5 on the back.

<b>A</b>	<b>B—Box 13</b>	<b>C—Box 15</b>	<b>D—Box 16</b>	<b>E—Box 17</b>
If the Form W-2 is for:	If Retirement Plan box is checked, mark an X below.	Employer's seven-digit Minnesota Tax ID Number	State wages, tips, etc. <i>(round to nearest whole dollar)</i>	Minnesota tax withheld <i>(round to nearest whole dollar)</i>
• you, enter 1				
• spouse, enter 2				
a1 <u>1</u>	b1 <input checked="" type="checkbox"/>	c1 MN <u>6221500</u>	d1 <u>109534</u>	e1 <u>7723</u>
a2 _____	b2 <input type="checkbox"/>	c2 MN _____	d2 _____	e2 _____
a3 _____	b3 <input type="checkbox"/>	c3 MN _____	d3 _____	e3 _____
a4 _____	b4 <input type="checkbox"/>	c4 MN _____	d4 _____	e4 _____
a5 _____	b5 <input type="checkbox"/>	c5 MN _____	d5 _____	e5 _____

Subtotal for additional Forms W-2 (from line 5 on page 2) ..... \_\_\_\_\_

**Total Minnesota tax withheld on all Forms W-2 (add amounts in line 1, column E) ..... 1 ■ 7723**

**2** Minnesota tax withheld on Forms 1099, W-2G, and 1042-S. If you have more than four forms, complete line 6 on the back.

<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>
If the Form 1099, W-2G, or 1042-S is for:	Payer's seven-digit Minnesota Tax ID Number (if unknown, contact the payer)	Income amount (see the table on the back for amounts to include)	Minnesota tax withheld <i>(round to nearest whole dollar)</i>
• you, enter 1			
• spouse, enter 2			
a1 _____	b1 MN _____	c1 _____	d1 _____
a2 _____	b2 MN _____	c2 _____	d2 _____
a3 _____	b3 MN _____	c3 _____	d3 _____
a4 _____	b4 MN _____	c4 _____	d4 _____

Subtotal for additional 1099, W-2G, and 1042-S (from line 6 on page 2) ..... \_\_\_\_\_

**Total Minnesota tax withheld on all 1099, W-2G, and 1042-S (add amounts in line 2, column D) ..... 2 ■ \_\_\_\_\_**

**3 Total Minnesota tax withheld by partnerships, S corporations, and fiduciaries (from line 7 on page 2) ..... 3 ■ \_\_\_\_\_**

**4 Total.** Add the Minnesota tax withheld on lines 1, 2, and 3.  
Enter the total here and on line 20 of Form M1 ..... **4 ■ 7723**

**Include this schedule with your Form M1.  
If required, include Schedules KPI, KS, and KF.**