



**2019 Form M2X, Amended Income Tax Return for Estates and Trusts**

Tax year beginning (mm/dd/yyyy) \_\_\_\_\_ and ending (mm/dd/yyyy) \_\_\_\_\_

Name of Estate or Trust  Check if name has changed:  Federal ID Number Minnesota Tax ID Number Number of Schedules KF

Name and Title of Fiduciary Decedent's Social Security Number Date of Death Number of Beneficiaries

Current Address of Fiduciary City State ZIP Code

Decedent's Last Address or Grantor's Address When Trust Became Irrevocable City State ZIP Code

**Check all that apply:**

Composite Income Tax  Installment Sale of Pass-through Assets or Interests

**Check reason you are amending:**

Amended Federal Return  Court Case  
 IRS Adjustment  Net Operating Loss Carried Back From Tax Year Ending \_\_\_\_\_  
 Changes Affect Schedules KF  Other — \_\_\_\_\_

|  | A—As previously reported | B—Net change | C—Corrected amount |
|--|--------------------------|--------------|--------------------|
| 1 Federal taxable income (from federal Form 1041) . . . . .  | 1 ■ _____                | ■ _____      | _____              |
| 2 Deductions and losses not allowed (from Form M2, line 2) . . . . .   | 2 ■ _____                | ■ _____      | _____              |
| 3 Capital gain amount of lump-sum distribution. . . . .  | 3 ■ _____                | ■ _____      | _____              |
| 4 Additions (from line 55, column E, on page 4 of this form) . . . . .   | 4 ■ _____                | ■ _____      | _____              |
| 5 Add lines 1 through 4 . . . . .  | 5 ■ _____                | ■ _____      | _____              |
| 6 Subtractions (from line 55, column E, on page 4 of this form) . . . . .  | 6 ■ _____                | ■ _____      | _____              |
| 7 Fiduciary's income from non-Minnesota sources . . . . .  | 7 ■ _____                | ■ _____      | _____              |
| 8 Add lines 6 and 7 . . . . .  | 8 ■ _____                | ■ _____      | _____              |
| 9 Minnesota taxable net income (subtract line 8 from line 5) . . . . .   | 9 ■ _____                | ■ _____      | _____              |
| 10 Tax from table on pages 10–13 of the M2 instructions . . . . .  | 10 ■ _____               | ■ _____      | _____              |
| 11 Tax from S portion of ESBT (from Schedule M2SB) . . . . .   | 11 ■ _____               | ■ _____      | _____              |
| 12 Total of tax from (enclose appropriate schedules):<br><input type="checkbox"/> Schedule M1LS <input type="checkbox"/> Schedule M2MT . . . . . | 12 ■ _____               | ■ _____      | _____              |
| 13 Composite income tax for nonresidents (enclose Schedules KF) . . . . .  | 13 ■ _____               | ■ _____      | _____              |
| 14 Total income tax (add lines 10 through 13) . . . . .  | 14 ■ _____               | ■ _____      | _____              |
| 15 Estimated tax and/or extension payments . . . . .   | 15 ■ _____               | ■ _____      | _____              |
| 16 Minnesota tax withheld (enclose documentation) . . . . .  | 16 ■ _____               | ■ _____      | _____              |





- 17 Other refundable credits ..... 17 ■ \_\_\_\_\_
- 18 a. Other nonrefundable credits ..... 18a ■ \_\_\_\_\_
- b. Tax Credit for Owners of Agricultural Assets ..... 18b ■ \_\_\_\_\_  
Enter the certificate number from the certificate  
you received from the Rural Finance Authority: AO \_\_\_\_ - \_\_\_\_\_
- c. Unused credit for owners of agricultural assets from a prior year .. 18c ■ \_\_\_\_\_  
AO \_\_\_\_ - \_\_\_\_\_
- 19 Amount due from original Form M2 (see instructions) ..... 19 ■ \_\_\_\_\_
- 20 Total credits and tax paid (add lines 15 column C through 18 column C and line 19) ..... 20 ■ \_\_\_\_\_
- 21 Refund amount from original Form M2, line 21 (see instructions) ..... 21 ■ \_\_\_\_\_
- 22 Subtract line 21 from line 20 (if result is less than zero, enter the negative amount) ..... 22 ■ \_\_\_\_\_
- 23 Tax you owe (if line 14C is more than line 22, subtract line 22  
from line 14C. If line 22 is a negative amount, see instructions) ..... 23 ■ \_\_\_\_\_
- 24 If you failed to timely report federal changes or the IRS assessed a penalty (see instructions) ..... 24 ■ \_\_\_\_\_
- 25 Add lines 23 and 24 ..... 25 ■ \_\_\_\_\_
- 26 Interest (see instructions) ..... 26 ■ \_\_\_\_\_
- 27 **AMOUNT DUE** (add lines 25 and 26). Payment method:  Electronic  Check (attach voucher) ..... 27 ■ \_\_\_\_\_
- 28 **REFUND DUE** (if line 22 is more than line 14C, subtract line 14C from line 22) ..... 28 ■ \_\_\_\_\_
- 29 To have your refund direct deposited, enter the following. Otherwise, you will receive a check.

|  |   |  |
|--|---|--|
| <b>Account type:</b>   | <b>Routing number</b>                     | <b>Account number (use an account not associated with any foreign banks)</b> |
| <input type="checkbox"/> Checking <input type="checkbox"/> Savings | <input style="width: 100%;" type="text"/> | <input style="width: 100%;" type="text"/>                                    |

I authorize the Minnesota Department of Revenue to discuss this tax return with the preparer.

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

|  |                       |                           |      |               |
|--|-----------------------|---------------------------|------|---------------|
| Signature of fiduciary or officer representing fiduciary | Print name of contact | MN ID or Soc. Sec. number | Date | Daytime Phone |
| Paid preparer's signature                                | Preparer's PTIN       |                           | Date | Daytime phone |

**Explain net changes on next page.**

Mail to:  
Minnesota Amended Fiduciary Tax  
Mail Station 1310  
600 N. Robert St.  
St. Paul, MN 55145-1310





A—As previously reported      B—Net change      C—Corrected amount

**Additions to Income**

|           |  |           |         |         |       |
|-----------|--|-----------|---------|---------|-------|
| <b>30</b> | State and municipal bond interest from outside Minnesota . . . . .   | <b>30</b> | ■ _____ | ■ _____ | _____ |
| <b>31</b> | State income tax deducted on federal return . . . . .  | <b>31</b> | ■ _____ | ■ _____ | _____ |
| <b>32</b> | Expenses deducted on your federal return that are attributable to income not taxed by Minnesota ( <i>other than U.S. bond interest</i> ) . . . . . | <b>32</b> | ■ _____ | ■ _____ | _____ |
| <b>33</b> | 80 percent of suspended loss from 2001-2005 or 2008-2018 on federal return generated by bonus depreciation . . . . .                               | <b>33</b> | ■ _____ | ■ _____ | _____ |
| <b>34</b> | 80 percent of federal bonus depreciation . . . . .   | <b>34</b> | ■ _____ | ■ _____ | _____ |
| <b>35</b> | Section 199A qualified business income . . . . .   | <b>35</b> | ■ _____ | ■ _____ | _____ |
| <b>36</b> | Addition due to federal changes not adopted by Minnesota . . . . .   | <b>36</b> | ■ _____ | ■ _____ | _____ |
| <b>37</b> | Net operating loss carryover adjustment . . . . .  | <b>37</b> | ■ _____ | ■ _____ | _____ |
| <b>38</b> | Foreign derived intangible income (FDII) deduction . . . . .   | <b>38</b> | ■ _____ | ■ _____ | _____ |
| <b>39</b> | Special deduction under section 965 . . . . .  | <b>39</b> | ■ _____ | ■ _____ | _____ |
| <b>40</b> | This line intentionally left blank . . . . .   | <b>40</b> | ■ _____ | ■ _____ | _____ |
| <b>41</b> | This line intentionally left blank . . . . .   | <b>41</b> | ■ _____ | ■ _____ | _____ |
| <b>42</b> | Add lines 30 through 41. Also enter the amount from line 42C on line 56, column E, under Additions . . . . .                                       | <b>42</b> | ■ _____ | ■ _____ | _____ |

**Subtractions from Income**

|           |  |           |         |         |       |
|-----------|--|-----------|---------|---------|-------|
| <b>43</b> | Interest on U.S. government bond obligations, minus expenses deducted on federal return that are attributable to this income . . . . . | <b>43</b> | ■ _____ | ■ _____ | _____ |
| <b>44</b> | State income tax refund included on federal return . . . . .   | <b>44</b> | ■ _____ | ■ _____ | _____ |
| <b>45</b> | Federal bonus depreciation subtraction . . . . .   | <b>45</b> | ■ _____ | ■ _____ | _____ |
| <b>46</b> | Subtraction due to federal changes not adopted by Minnesota . . . . .  | <b>46</b> | ■ _____ | ■ _____ | _____ |
| <b>47</b> | Subtraction for prior addback of reacquisition of business indebtedness income . . . . .   | <b>47</b> | ■ _____ | ■ _____ | _____ |
| <b>48</b> | Subtraction for railroad maintenance expenses . . . . .  | <b>48</b> | ■ _____ | ■ _____ | _____ |
| <b>49</b> | Net operating loss carryover adjustment . . . . .  | <b>49</b> | ■ _____ | ■ _____ | _____ |
| <b>50</b> | Deferred foreign income (section 965) . . . . .  | <b>50</b> | ■ _____ | ■ _____ | _____ |
| <b>51</b> | Global intangible low-taxed income (GILTI) . . . . .   | <b>51</b> | ■ _____ | ■ _____ | _____ |
| <b>52</b> | Disallowed section 280E expenses of medical cannabis manufacturers . . . . .   | <b>52</b> | ■ _____ | ■ _____ | _____ |
| <b>53</b> | Add lines 43 through 52. Also enter the amount from line 53C on line 56, column E, under Subtractions . . . . .                        | <b>53</b> | ■ _____ | ■ _____ | _____ |



|    | A<br>Name of each beneficiary | B<br>Beneficiary's Social Security number | C<br>Share of federal distributable net income | D<br>Percent of total on line 56, column C | E<br>Shares assignable to beneficiary and to fiduciary |              |
|----|-------------------------------|---|--|--|--|--------------|
|    |                               |   |  |  | Additions  | Subtractions |
| 54 |                               |   |  | %  |  |              |
|    |                               |   |  | %  |  |              |
|    |                               |   |  | %  |  |              |
|    |                               |   |  | %  |  |              |
|    |                               |   |  | %  |  |              |
| 55 | Fiduciary                     |   |  | %  |  |              |
| 56 | <b>Total</b>                  |   |  | <b>100%</b>                                |  |              |

**EXPLANATION OF CHANGE**—Explain each change in detail in the space provided below. Use a separate sheet, if needed. If the changes involve items requiring supporting information, be sure to attach the appropriate schedule, statement or form to Form M2X to verify the correct amount.

# Instructions for 2019 Form M2X

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For additional information, see the 2019 Form M2 instructions

## Who Should File M2X?

This form should be filed by fiduciaries to correct—or amend—an original 2019 Minnesota fiduciary return.

**Federal return adjustments.** If the Internal Revenue Service (IRS) changes or audits your federal return or you amend your federal return and it affects your Minnesota return or distributions to beneficiaries, you must file an amended Minnesota return with 180 days. If you are filing Form M2X based on an IRS adjustment, check the box at the top of the form and attach a copy of your amended federal return or correction notice you received from the IRS to Form M2X.

If the changes do not affect your Minnesota return or Schedules K-1, you have 180 days to send a letter of explanation and a copy of your amended federal return or the correction notice to: Minnesota Fiduciary Tax, Mail Station 5140, 600 N. Robert St., St. Paul, MN 55146-5140. If you fail to report as required, a 10 percent penalty will be assessed on any additional tax. See line 24 instructions.

**Claim for refund.** Use Form M2X to make a claim for refund and report changes to your Minnesota liability. If you make a claim for a refund and we do not act on it within six months of the date filed, you may bring an action in the district court or the tax court.

## When to File

File Form M2X only after you have filed your original return. You may file Form M2X within 3½ years after the return was due or within one year from the date of an order assessing tax, whichever is later. If you filed your original return under an extension by the extended due date, you have up to 3½ years from the extended due date to file the amended return.

## Filing Reminders

- **The amended return must be signed** by the fiduciary or authorized officer of the organization receiving, controlling or managing the income of the estate or trust. The person must also include his or her ID number.
- **If someone other than the fiduciary prepared the return**, the preparer must also sign.
- **Round amounts to the nearest dollar.** Drop amounts less than 50 cents and increase amounts 50 cents or more to the next higher dollar.
- **Forms and information** are available on our website at [www.revenue.state.mn.us](http://www.revenue.state.mn.us).

If you need help completing your amended return, call 651-556-3075. We'll provide information in other formats upon request.

## Explanation

On page 4 of Form M2X, include a detailed explanation of why the original return was incorrect. Providing this information will help us verify the amended amounts.

## Use of Information

All information provided on this form is private, except for your Minnesota tax ID number, which is public. Private information cannot be given to others except as provided by state law.

The identity and income information of the beneficiaries are required under state law so the department can determine the beneficiaries' correct Minnesota taxable income and verify if the beneficiaries have filed returns and paid the tax. The Social Security numbers of the beneficiaries are required to be reported on Schedule KF under M.S. 289A.12, subd. 13.

## Line Instructions

### Columns A, B, C

- **Column A:** Enter the amounts shown on your original return or as later adjusted by an amended return or audit report.
- **Column B:** Enter the dollar amount of each change as an increase or decrease for each line you are changing. Show all decreases in parentheses. On the back of Form M2X, explain the changes in detail. If the changes involve items requiring supporting information, attach to Form M2X the appropriate schedule, statement or form to verify the corrected amount.
- **Column C:** Enter the corrected amounts after the increases or decreases. If there are no changes, enter the amount from column A.

### Lines 18b and 18c

If you received a credit certificate from the Minnesota Rural Finance Authority for selling or leasing agricultural assets to a beginning farmer, enter the certificate number in the space provided and credit amount on line 18b.

If you have multiple credits, enter the certificate number your fiduciary received directly from the Rural Finance Authority within the certificate number box. If you have multiple credits and received all credits from other pass-through entities, enter the certificate number relating to the largest credit amount within the certificate number box. Subtotal all credit amounts on Line 18b.

If you have unused credits from prior years you can use this year, enter the unused credit amount on line 18c and the certificate number associated to that credit amount in the space provided.

### Line 19

Enter the total of the following tax amounts, whether or not paid.

1. For the original 2019 M2 return, the amount from line 16.
2. For all previously filed 2019 M2X Returns, the amount from line 23.
3. Additional tax due as the result of an audit or notice of change.

**Do not** include any amounts that were paid for penalty, interest or underpayment of estimated tax.

*Continued*

## 2019 Form M2X instructions (continued)

### Line 21

Enter the total of the following refund amounts, whether or not the refund has been received.

1. For the original 2019 M2 return, the amount from line 21.
2. For all previously filed 2019 M2X Returns, the amount from line 28.
3. Refund or reduction in tax from a protest or other type of audit adjustment.

Include any amount that was credited to estimated tax or applied to pay past due taxes. Do not include any interest that may have been included in the refunds you received.

If the refund amount on your original return was reduced by an additional charge for underpaying estimated tax reported on line 19 of the 2019 M2, then when figuring the amount to enter on the 2019 M2X Line 21, add the amount from this line to the amount reported on line 21 of the 2019 M2.

### Lines 23 and 28

Lines 23 and 28 should reflect the changes to your tax and/or credits as reported on lines 1 through 18 of Form M2X. If you have unpaid taxes on your original Form M2, this amended return is not intended to show your corrected balance due.

### Line 23

If line 22 is a negative amount, treat it as a positive amount and add it to line 14C. Enter the result on line 23. This is the amount you owe, and is due when you file your amended return. You *cannot* use your estimated tax account to pay this amount.

### Line 24

If only one of the penalties below applies, you must multiply line 23 by 10 percent (.10). If both penalties apply, multiply line 23 by 20 percent (.20). Enter the result on line 24.

- The IRS assessed a penalty for negligence or disregard of rules or regulations.
- You failed to report federal changes to the department within 180 days as required.

### Line 26

Interest is calculated as simple interest and accrues on unpaid tax and penalties from the regular due date until it is paid in full. Use the formula below with the appropriate interest rate: Interest = line 25 x number of days past the due date x interest rate ÷ 365

If the days fall in more than one calendar year, you must determine the number of days separately for each year.

The interest rate for 2019 is 5 percent.

Penalty will be assessed if the additional tax and interest are not paid with the amended return.

### Line 27

**Pay Electronically.** Visit our website at [www.revenue.state.mn.us](http://www.revenue.state.mn.us) and log in to e-Services. If you don't have internet access, call 1-800-570-3329 to pay by phone. When paying electronically, you must use an account not associated with any foreign banks.

**Pay by Check.** Visit our website at [www.revenue.state.mn.us](http://www.revenue.state.mn.us) and click on **Make a Payment** and then **Check or Money Order** to create a voucher. Print and mail the voucher with a check made payable to Minnesota Department of Revenue. When you pay by check, you authorize us to make a one-time electronic fund transfer from your account. You may not receive your cancelled check.

### Line 28

If you want your refund to be directly deposited into your bank account, complete line 29. Your bank statement will indicate when your refund was deposited to your account. Otherwise, skip line 29 and your refund will be sent to you in the mail.

This refund *cannot* be applied to your estimated tax account.

### Line 29

If you want your refund to be directly deposited into your checking or savings account, enter the routing and account numbers. The **routing number** must have nine digits. The **account number** may contain up to 17 digits (both numbers and letters). If your account number contains less than 17 digits, enter the number and leave out any hyphens, spaces and symbols. If the routing or account number is incorrect or is not accepted by your financial institution, your refund will be sent to you in the form of a paper check.

You can find your bank's routing number and account number on the bottom of your check.



### Lines 30–53

If you enter a corrected amount in Column C of lines 30 through 53, you may be required to notify beneficiaries of any adjustments to their income. Report the corrected information on a new Schedule KF, and check the "Amended KF" box toward the top of the schedule.

## Signature

The return must be signed by the fiduciary or authorized officer of the organization receiving, controlling or managing the income of the estate or trust. The person must also include his or her ID number.

If someone other than the fiduciary prepared the return, the preparer must also sign and include their ID and phone number.

You may check the box in the signature area to give us your permission to discuss your return with the paid preparer. This authorization remains in effect until you notify the department in writing (either by mail or fax) that the authorization is revoked. Checking the box does not give your preparer the authority to sign any tax documents on your behalf or to represent you at any audit or appeals conference. For these types of authorities, you must file Form REV184, *Power of Attorney*.