DEPARTMENT OF REVENUE



2023 Schedule M1LTI, Long-Term Care Insurance Credit

Your First N	lame and Initial	Last Name	So	cial Security Number	
If you (or your spouse, if filing a joint return) paid premiums in 2023 for a qualified long-term care insurance policy, complete this schedule to determine the amount of the credit you may claim when filing Form M1, <i>Individual Income Tax</i> . To qualify for this credit, both of these must apply to your long-term care insurance policy: It qualifies as an itemized deduction on Schedule M1SA, <i>Minnesota Itemized Deductions</i>, regardless of income limitations It has a lifetime long-term care benefit limit of \$100,000 or more There are no separate instructions for Schedule M1LTI.					
Policy Information (only one qualifying policy per person): Name of Insured		Insurance Company	Policy Num	Policy Number	
filing a joi	ne information in the appropriate column for each nt return and both you and your spouse are covere miums in column A and half in column B (below).		Round amounts to A —You	the nearest whole dollar. B —Spouse	
•	miums paid in 2023 for the qualifying long-term ca Did you file Schedule M1SA? If no , skip lines 2, 3, and 4, and enter amounts from If yes , continue with line 2. ount of premiums paid on this policy that are inclu	n line 1 on line 5.			
	ount from line 4 of Schedule M1SA (If you and you miums paid, enter half of this amount in each colui	-	. 3		
4 Am	ount from line 2 or line 3, whichever is less		4		
5 Sub	stract line 4 from line 1		5		
6 Mu	ltiply line 5 by 25% (.25)		6		
7 The	e maximum credit is \$100 per person		71	100 100	
8 Am	ount from line 6 or line 7, whichever is less		8		
	d line 8, columns A and B I- year residents: Also enter this amount on line 2 o			9	
Part-year Residents and Nonresidents 10 Multiply line 9 by line 30 of Schedule M1NR. Enter the result here and on line 2 of Schedule M1C 10					
You must include this schedule with your Form M1.					