

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

Your First Name and Initial

Last Name

Your Social Security Number

Place
an X if a
Foreign
Address:

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

Spouse's Last Name

Spouse's Social Security Number

Current Home Address (Street, Apartment Number, Route)

Your Date of Birth

City

State

Zip Code

Spouse's Date of Birth

2014 Federal

Filing Status

☐

(1) Single

☐

(2) Married filing joint

☐

(3) Married filing separate:

(place an X in
one oval box):☐(4) Head of
household☐

(5) Qualifying widow(er)

Enter spouse's name and
Social Security number here

State Elections Campaign Fund

Political Party and Code Number:

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

Republican 11 Grassroots 14

Democratic Farmer-Labor 12 Libertarian 16

Independent 13 General Campaign Fund 99

From Your Federal Return (for line references see instructions), enter the amount of:

A Wages, salaries, tips, etc.:


B IRA, Pensions and annuities:

C Unemployment:

D Federal adjusted gross income:

Do not send W-2s. Enclose Schedule M1W to
claim Minnesota withholding.

- 1 **Federal taxable income** (from line 43 of federal Form 1040,
line 27 of Form 1040A or line 6 of Form 1040EZ) 1 ■
- 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 oval box) 4
- 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
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
- 9 **Tax** from the table in the M1 instructions 9
- 10 Alternative minimum tax (enclose Schedule M1MT) 10 ■
- 11 Add lines 9 and 10 11
- 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 tax from line 27 on
line 12, from line 23 on line 12a, and from line 24 on line 12b (enclose Schedule M1NR) 12
 - a. ■
 - b. ■
- 13 Tax on lump-sum distribution (enclose Schedule M1LS) 13 ■
- 14 Tax before credits. Add lines 12 and 13 14

- 15** Tax before credits. Amount from line 14 **15**
- 16** Marriage credit for joint return when both spouses have taxable earned income
or taxable retirement income (*enclose Schedule M1MA*) **16** ■
- 17** Other nonrefundable credits (*enclose Schedule M1C*) **17** ■
- 18** Total nonrefundable credits. Add lines 16 and 17 **18**
- 19** Subtract line 18 from line 15 (*if result is zero or less, leave blank*) **19**
- 20** Nongame Wildlife Fund contribution (*see instructions, page 15*)
This will reduce your refund or increase amount owed  **20** ■
- 21** Add lines 19 and 20 **21**
- 22 Minnesota income tax withheld.** Complete and enclose Schedule M1W to report
Minnesota withholding from W-2, 1099 and W-2G forms (*do not send*) **22** ■
- 23** Minnesota estimated tax and extension payments made for 2014 **23** ■
- 24** Child and Dependent Care Credit (*enclose Schedule M1CD*). Enter number of qualifying persons here: **24** ■
- 25** Minnesota Working Family Credit (*enclose Schedule M1WFC*). Enter number of qualifying children here: **25** ■
- 26** K-12 Education Credit (*enclose Schedule M1ED*). Enter number of qualifying children here: **26** ■
- 27** Reading Credit (*enclose Schedule M1READ*). Enter number of qualifying children here: **27** ■
- 28** Business and investment credits (*enclose Schedule M1B*) **28** ■
- 29** Total payments. Add lines 22 through 28 **29**
- 30 REFUND.** If line 29 is more than line 21, subtract line 21 from line 29
(*see instructions*). For direct deposit, complete line 31 **30** ■
- 31** Direct deposit of your refund (*you must use an account not associated with a foreign bank*):
- Checking Savings
- 32 AMOUNT YOU OWE.** If line 21 is more than line 29, subtract
line 29 from line 21 (*see instructions*) **32** ■
- 33** Penalty amount from Schedule M15 (*see instructions*). Also subtract
this amount from line 30 or add it to line 32 (*enclose Schedule M15*) **33** ■
- IF YOU PAY ESTIMATED TAX** and want part of your refund credited to estimated tax, complete lines 34 and 35.
- 34** Amount from line 30 you want sent to you **34** ■
- 35** Amount from line 30 you want applied to your 2015 estimated tax **35** ■

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

Paid preparer: You must sign below.
Paid preparer's signature _____ Date _____

Spouse's signature (if filing jointly) _____

Taxpayer's daytime phone _____

Preparer's daytime phone _____

Include a copy of your 2014 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.