|  | You  | ur First Name an                                       | d Initial   | Last Name  |                                  |  | Your Social Secu   | rity Number     |
|--|--|--|---|--|----------------------------------|--|--------------------|-----------------|
| Marl<br>an X   | if a   |  | ouse's First Name and Initial   | Spouse's Last Name   | e                                |  | Spouse's Social S  | Security Number |
| forei<br>addr  |  | Current Home Address (Street, Apartment Number, Route) |   |  |                                  |  | Your Date of Birth |                 |
|  | Cit  | ty   |   |  | State                            | Zip Code                               | Spouse's Date of   | f Birth         |
|  | rk an X  |  |   |  |                                  |  |                    |                 |
|  | e oval b<br>it apply   |  | Renter  | Homeowner  |                                  | sing Home or Adult<br>er Care Resident | Mobile<br>Owner    | e Home<br>r     |
| on<br>for  | your 201<br>state offi   | 4 Form M1, and you<br>ices for campaign ex             | d. If you did not designate<br>u want \$5 to go to candidates<br>xpenses, enter the code number<br>s will not reduce your refund. | Political party and code<br>Republican<br>Democratic/Farmer-Labor<br>Independent | 11 Grassroots<br>12 Libertarian. |  | You<br>cod         |                 |
| 1  | Federal adjusted gross income (from line 37 of federal Form 1040,<br>line 21 of Form 1040A, or line 4 of Form 1040EZ) 1■   |  |   |  |                                  |  |                    |                 |
| 2  | Nontaxable Social Security and/or Railroad Retirement Board benefits received and not included in line 1 above (determine from instructions)                               |  |   |  |                                  |  |                    |                 |
| 3  | Deduc  | tion for contribu                                      | utions to a qualified retire  | ment plan (add lines   | 28 and 32 of f                   | federal                                |                    |                 |
| 4  | Form 1040 or from line 17 of Form 1040A). Also see line 33 <b>3</b><br>Total payments from programs including MFIP (MN Family Investment Program), MSA (MN Supplemental    |  |   |  |                                  |  |                    |                 |
| 5  |  |  | ecurity Income), GA (General As   | , , ,  | •                                | sing) <b>4</b> 🗖                       |                    |                 |
| 5 Additional nontaxable income such as distributions from a Roth account and worker's compensation benefits (see instructions) |  |  |   |  |                                  |  |                    |                 |
| 6  | Income Types:<br>Add lines 1 through 5. If your income is less than the rent you paid, enclose an explanation 6  |  |   |  |                                  |  |                    |                 |
|  |  |  |   |  |                                  |  |                    |                 |
| 7  | Dependent, elderly and retirement contribution subtraction (you must use Schedule 2, on back)7   |  |   |  |                                  |  |                    |                 |
| 8  | Total household income. Subtract line 7 from line 6 (if result is zero or less, leave blank) 8   |  |   |  |                                  |  |                    |                 |
| 9 Renters: Line 3 of your 2014 Certificate(s) of Rent Paid (CRP).  |  |  |   |  |                                  |  |                    |                 |
| 10   |  |  | ; this amount is not your r   |  |                                  |  |                    |                 |
| 10   | <ul> <li>Renters: Using the amounts on line 8 and line 9, find the amount to enter here from the renters refund table in the instructions. Continue with line 15</li></ul> |  |   |  |                                  |  |                    |                 |
| AL   | L HOMI   | EOWNERS: REG   | QUIRED — Property ID nu   | mber (use numbers (  | only):                           |  |                    |                 |
|  | 5  | which the prope  |   |  |                                  |  |                    |                 |
| 11   | Property tax from line 1 of Statement of Property<br>(Mobile home owners: See instructions)  |  | ty Taxes Payable in <b>2015 11</b> ∎  |  |                                  |  |                    |                 |
| 12   | <b>2</b> If claiming the special refund, enter amount from line 30, Schedule 1 (see instructions) <b>12</b>  |  |   |  |                                  |  |                    |                 |
| 13   |  |  | l line 11 (if result is zero o  |  |                                  | 13                                     |                    |                 |
| 14   |  |  | efund: Using the amounts<br>from the homeowners re  |  |                                  | 14                                     |                    |                 |
| 15   | Add lines 10, 12 and 14  |  |   |  |                                  |  |                    |                 |
| 16   | Nonga  | ame Wildlife Fun                                       | nd contribution. Your refur   | nd will be reduced by  | this amount .                    | 16 🔳                                   |                    |                 |
| 17   | YOUR   | REFUND. Subtr  | ract line 16 from line 15,  |  |                                  |  |                    |                 |

Leave unused boxes blank. DO NOT USE STAPLES.

| Jan  | nedule 1—Special refund. To qualify, you must have owned and lived in this home<br>uary 2, 2014, and on January 2, 2015. If you qualify, see the instructions.                            |  | Г |  |  |  |  |  |
|--|---|--|---|--|--|--|--|--|
| 18   | Line 1 of Statement of Property Taxes Payable in 2015. If the Statement does not list a   |  |   |  |  |  |  |  |
| 10   | new improvements or expired exclusions, skip lines 19 and 20 and enter this amount  |  |   |  |  |  |  |  |
| 19   | If the Statement lists an amount for new improvements or expired exclusions, compl<br>and enclose Worksheet 3 from the instructions and enter the percentage from step                    |  |   |  |  |  |  |  |
|  |   |  |   |  |  |  |  |  |
| 20   | Multiply line 18 by the percentage on line 19   | 20   |   |  |  |  |  |  |
| 21   | If you did not have new improvements or expired exclusions, enter the amount from   |  |   |  |  |  |  |  |
|  | If you had new improvements or expired exclusions, subtract line 20 from line 18  | <b>21</b>  |   |  |  |  |  |  |
| 22   | From your Statement of Property Taxes Payable in 2015, enter the amount from  |  |   |  |  |  |  |  |
|  | line 2 (2014 column). If there is no amount on line 2, see instructions   | 22   |   |  |  |  |  |  |
| 23   | Special refund (not your regular refund) from line 12 of your <b>2012</b> Form M1DD   | 22   |   |  |  |  |  |  |
| 23<br>24   | Special refund (not your regular refund) from line 12 of your <b>2013</b> Form M1PR Subtract line 23 from line 22 ( <i>if result is more than line 21</i> , or <i>is a negative numbe</i> |  |   |  |  |  |  |  |
| 24   | stop here; you are not eligible for the special refund)   |  |   |  |  |  |  |  |
| 25   | Subtract line 24 from line 21 (if result is less than \$100,  |  |   |  |  |  |  |  |
|  | stop here; you are not eligible for the special refund)   |  |   |  |  |  |  |  |
|  |   |  |   |  |  |  |  |  |
| 26   | Amount from line 24         X 12% (.12)   |  |   |  |  |  |  |  |
| 07   | America from line OC or \$400 which ever is greater   | 07   |   |  |  |  |  |  |
| 27   | Amount from line 26 or \$100, whichever is greater  |  |   |  |  |  |  |  |
| 28   | stop here; you are not eligible for the special refund)   | 28   |   |  |  |  |  |  |
|  |   |  |   |  |  |  |  |  |
| 29   | Multiply line 28 by 60% (.60)   |  |   |  |  |  |  |  |
| 30   | Special refund. Amount from line 29 or \$1,000, whichever is less.  |  |   |  |  |  |  |  |
|  | Enter the amount here and on line 12 of this Form M1PR  |  |   |  |  |  |  |  |
|  |   |  |   |  |  |  |  |  |
|  | edule 2–Subtractions  |  |   |  |  |  |  |  |
| 31   | Subtraction for 65 or older or disabled: If you (or your spouse if filing a joint return) or one 65 or older or one disabled enter $$2,050$ :   |  |   |  |  |  |  |  |
| are age 65 or older or are disabled enter \$3,950: |   |  |   |  |  |  |  |  |
|  | Mark an X if you or your spouse are: 65 or older: disabled:   |  |   |  |  |  |  |  |
|  |   |  |   |  |  |  |  |  |
| 32   | Dependent Subtraction: Enter your subtraction for dependents. (determine from in  | nstructions) 32  |   |  |  |  |  |  |
|  |   |  |   |  |  |  |  |  |
|  | Number of dependents from worksheet in the instructions:  |  |   |  |  |  |  |  |
|  | Names and Social Security numbers of dependents:  |  |   |  |  |  |  |  |
|  |   |  |   |  |  |  |  |  |
| 33   | Retirement Account Subtraction: If you (or your spouse) contributed to a 401(k), IR   | RA, 457(b).  |   |  |  |  |  |  |
|  | or other retirement plan, or had an amount on line 3, see instructions  |  |   |  |  |  |  |  |
|  |   |  |   |  |  |  |  |  |
| 34   | Add lines 31 through 33, enter the result here and on line 7 of this form $\texttt{M1PR}$   |  |   |  |  |  |  |  |
| 05   |   |  |   |  |  |  |  |  |
| 35   | <b>35</b> Direct deposit of your refund (you must use an account not associated with a foreign bank):   |  |   |  |  |  |  |  |
|  | Checking Savings  |  |   |  |  |  |  |  |
| ١d   |   | eparer: You must sign below.   |   |  |  |  |  |  |
|  | ir signature Date   |  |   |  |  |  |  |  |
| _  |   |  |   |  |  |  |  |  |
| Sp   | buse's signature (if filing jointly) Daytime phone  |  |   |  |  |  |  |  |
|  | ( )   |  |   |  |  |  |  |  |
| Po   | nters — Include your 2014 CBP   | Louthorize the Minnesote Department of Dever   |   |  |  |  |  |  |
|  | nters — Include your 2014 CRP<br>il to: Minnesota Property Tax Refund   | I authorize the Minnesota Department of Revenue to<br>discuss this return with my paid preparer. |   |  |  |  |  |  |
| IVIC   | St. Paul, MN 55145-0020   | alouss and return warmy paid preparet.   |   |  |  |  |  |  |