

M4 MINNESOTA REVENUE Corporation Franchise Tax Return 2014

14401



Tax year beginning _____, 2014, and ending _____

| | | | |
|---|-------|--|------------------|
| Name of corporation/designated filer | | FEIN | Minnesota tax ID |
| Current address <input type="checkbox"/> Check if new address | | Business activity code (from federal) _____ | |
| City | State | Are you filing a combined income return? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Zip code | | Is this your final C corporation return? If yes, indicate if: | |
| Former name (if changed since 2012 return) | | <input type="checkbox"/> Withdrawn <input type="checkbox"/> Dissolved <input type="checkbox"/> Merged <input type="checkbox"/> S corp election | |
| Federal consolidated common parent name (if different) | FEIN | This corporation is (place an X in the boxes that apply): | |
| | | <input type="checkbox"/> a co-op <input type="checkbox"/> in bankruptcy | |

Has a federal examination been finalized? (list years) _____ Report changes to federal income tax within 180 days of final determination.
 Is a federal examination now in progress? (list years) _____ If there is a change in tax, you must report it on Form M4X.
 Tax years and expiration date(s) of federal waivers: _____

You must round amounts to nearest whole dollar

| | |
|--|-------------|
| 1 Minnesota tax liability (from M4T, line 23) | 1 ■ |
| 2 Minnesota Nongame Wildlife Fund donation (see instructions, pg. 5) | 2 ■ |
| 3 Add lines 1 and 2 | 3 ■ |
| 4 Enterprise Zone Credit (attach Schedule EPC) | 4 ■ |
| 5 Jobs Credit for participating in a Job Opportunity Building Zone (JOBZ) (attach Schedule JOBZ) .. | 5 ■ |
| 6 Historic Structure Rehabilitation Credit (attach credit certificate) and enter NPS project number: | 6 ■ |
| 7 Greater Minnesota Internship Credit (see instructions, pg. 5) | 7 ■ |
| 8 Amount credited from your 2013 return | 8 ■ |
| 9 Total corporate estimated tax payments made for 2014 | 9 ■ |
| 10 2014 extension payment | 10 ■ |
| 11 Add lines 4 through 10 | 11 ■ |
| 12 Tax due. If line 3 is more than line 11, subtract line 11 from line 3 | 12 ■ |
| 13 Penalty (see instructions, pg. 5) | 13 ■ |
| 14 Interest (see instructions, pg. 5) | 14 ■ |
| 15 Additional charge for underpayment of estimated tax (attach Schedule M15C) | 15 ■ |
| 16 AMOUNT DUE. If you entered an amount on line 12, add lines 12 through 15. Payment method: <input type="checkbox"/> Electronic (see inst., pg. 2), or <input type="checkbox"/> Check (see inst., pg. 2) | 16 ■ |
| 17 Overpayment. If line 11 is more than the sum of lines 3 and 15, subtract line 3 and line 15 from line 11. If line 11 is less than the sum of lines 3 and 15, see instructions, pg. 5 | 17 ■ |
| 18 Amount of line 17 to be credited to your 2015 estimated tax | 18 ■ |
| 19 REFUND. Subtract line 18 from line 17 | 19 ■ |

If you have a refund, you must enter your banking information below.

| | | |
|--|----------------|---|
| Account type: | Routing number | Account number (use an account not associated with any foreign banks) |
| <input type="checkbox"/> Checking <input type="checkbox"/> Savings | | |

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

| | | | | |
|---|-------|------|---------------|--|
| Authorized signature | Title | Date | Daytime phone | <input type="checkbox"/> I authorize the Minnesota Department of Revenue to discuss this tax return with the preparer. |
| Signature of preparer | PTIN | Date | Daytime phone | |
| Print name of person to contact within corporation to discuss this return | Title | Date | Daytime phone | |

Attach a complete copy of your federal return including schedules as filed with the IRS. If you're paying by check, see inst., pg. 2.

Mail to: Minnesota Revenue, Mail Station 1250, St. Paul, MN 55145-1250

Print or Type

Tax, Payments and Credits

Amount Due or Overpaid

Sign Here

Income Calculation 2014

See instructions beginning on page 6.

| | | |
|--------------------------------------|------|------------------|
| Name of corporation/designated filer | FEIN | Minnesota tax ID |
|--------------------------------------|------|------------------|

You must round amounts to nearest whole dollar

| | | |
|--|---|-------------|
| Income | 1 Federal taxable income before net operating loss deduction and special deductions <i>(from federal Form 1120, line 28, or see inst., pg. 6)</i> | 1 ■ |
| | 2 Additions to income | |
| | a Federal deduction taken for taxes based on net income and minimum fee | 2a ■ |
| Additions to Income | b Federal deduction for capital losses <i>(IRC sections 1211 and 1212)</i> | 2b ■ |
| | c Interest income exempt from federal income tax | 2c ■ |
| | d Exempt interest dividends <i>(IRC section 852[b][5])</i> | 2d ■ |
| | e Losses from mining operations subject to occupation tax | 2e ■ |
| | f Federal deduction for percentage depletion <i>(IRC sections 611-614 and 291)</i> | 2f ■ |
| | g Federal bonus depreciation and suspended loss <i>(IRC section 168[k])</i> | 2g ■ |
| | h Domestic production activities deduction | 2h ■ |
| | i Eighty percent of excess IRC section 179 deduction | 2i ■ |
| | j Fines, fees and penalties deducted federally as a trade or business expense | 2j ■ |
| | k The need for line 2k has been eliminated. Leave blank..... | 2k ■ |
| | Total additions <i>(add lines 2a through 2j)</i> | 2 ■ |
| 3 Total <i>(add lines 1 and 2)</i> | 3 ■ | |
| Subtractions From Income | 4 Subtractions from income | |
| | a Refund of taxes based on net income included in federal taxable income | 4a ■ |
| | b Minnesota deduction for capital losses | 4b ■ |
| | c Sum of research expenses, IRC sections 45A(a) and 51 salary expenses, disability access expenditures, and IRC section 45G(a) railroad track maintenance expenses disallowed for federal tax purposes <i>(attach schedule)</i> | 4c ■ |
| | d Foreign dividend gross-up required under IRC section 78 | 4d ■ |
| | e Expenses relating to income taxable by Minnesota, but federally exempt | 4e ■ |
| | f Dividends paid by a bank to the U.S. government on preferred stock | 4f ■ |
| | g Income/gains from mining operations subject to the occupation tax | 4g ■ |
| | h Deduction for cost depletion | 4h ■ |
| | i Minnesota depreciation for pre-1987 certified pollution control facilities | 4i ■ |
| | j Subtraction for prior bonus depreciation addback | 4j ■ |
| | k Subtraction for prior IRC section 179 addback | 4k ■ |
| | l Subtraction for prior addback of reacquisition of indebtedness income | 4l ■ |
| m The need for line 4m has been eliminated. Leave blank..... | 4m ■ | |
| Total subtractions <i>(add lines 4a through 4l)</i> | 4 ■ | |
| Apportionable Income | 5 Intercompany eliminations <i>(attach schedule)</i> | 5 ■ |
| | 6 Add lines 4 and 5 | 6 ■ |
| | 7 Minnesota net income <i>(subtract line 6 from line 3)</i> | 7 ■ |
| | 8 Total nonapportionable income <i>(see instructions, pg. 9; attach schedule)</i> | 8 ■ |
| | 9 Minnesota apportionable income <i>(subtract line 8 from line 7). Enter on M4T, line 1</i> | 9 ■ |

Apportionment/Fee Calculation 2014

| | | B ₁ | B ₂ | B ₃ |
|---|---|-------------------------|----------------|----------------|
| | | Single/Designated Filer | | |
| Corporation Name | | | | |
| FEIN | | | | |
| Minnesota Tax ID | | | | |
| A | | | | |
| Total in and outside Minnesota | | In Minnesota | In Minnesota | In Minnesota |
| | | | | |
| Minnesota Payroll and Property | 1 Average inventory | 1 ■ | | |
| | 2 Average tangible property and land owned/used (at original cost) | 2 ■ | | |
| | 3 Capitalized rents (gross rents x 8) | 3 ■ | | |
| | 4 Total property (add lines 1, 2 and 3) | 4 ■ | | |
| | 5 Payroll/officer's compensation | 5 ■ | | |
| Sales Ratio/ Apportionment | 6 MN sales or receipts | 6 ■ | | |
| | 7 MN sales of non-filing entities (see instructions pg. 9) | 7 ■ | | |
| | 8 Sales or receipts (add lines 6 and 7) (Financial institutions: see inst., pg. 11) .. | 8 ■ | | |
| | 9 Minnesota apportionment factor (divide each line 8B amount by line 8A; carry to six decimal places) | 9 ■ | | |
| Enter amounts on M4T, line 2. | | | | |
| Minimum Fee | MINIMUM FEE CALCULATION (see inst., pg. 10) | | | |
| | 10 Adjustments (see inst., pg. 10; attach schedule) | 10 ■ | | |
| | 11 Add lines 4, 5, 8 and 10 | 11 ■ | | |
| 12 Minimum fee (see table below) | 12 ■ | | | |
| Enter amounts on M4T, line 19. | | | | |

| | | | |
|----------------------------------|-------------------------------|------------------------------------|-------------------------------|
| If the amount on line 11 is: | Enter this amount on line 12: | If the amount on line 11 is: | Enter this amount on line 12: |
| less than \$950,000 | \$0 | \$9,500,000 to \$18,999,999 | \$1,900 |
| \$950,000 to \$1,899,999 | \$190 | \$19,000,000 to \$37,989,999 | \$3,800 |
| \$1,900,000 to \$9,499,999 | \$570 | \$37,990,000 or more | \$9,500 |

Tax Calculation 2014

| | | B₁ | B₂ | B₃ |
|---|--|-------------------------|----------------------|----------------------|
| | | Single/designated filer | | |
| | | Corporation name _____ | _____ | _____ |
| | | FEIN _____ | _____ | _____ |
| | | Minnesota tax ID _____ | _____ | _____ |
| Income | 1 Minnesota apportionable income (enter amount from M4I, line 9, in each column) | 1 ■ | _____ | _____ |
| | 2 Apportionment factor (from M4A, line 9) | 2 ■ | _____ | _____ |
| | 3 Net income apportioned to Minnesota (multiply line 1 by line 2) | 3 ■ | _____ | _____ |
| | 4 Minnesota nonapportionable income (see inst., pg. 13, and attach schedule) | 4 ■ | _____ | _____ |
| | 5 Taxable net income (add lines 3 and 4) | 5 ■ | _____ | _____ |
| Deductions From Income | 6 Net operating loss deduction (from NOL) | 6 ■ | _____ | _____ |
| | 7 Subtract line 6 from line 5 | 7 ■ | _____ | _____ |
| | 8 Deduction for dividends received | | | |
| | a Amount from DIV, line 15 | 8a ■ | _____ | _____ |
| | b Multiply line 8a by line 2 above for each column | 8b ■ | _____ | _____ |
| | 9 Job Opportunity Building Zone (JOBZ) exemptions (from JOBZ, line 17) | 9 ■ | _____ | _____ |
| 10 Add lines 8b and 9 | 10 ■ | _____ | _____ | |
| 11 Taxable income (subtract line 10 from line 7) | 11 ■ | _____ | _____ | |
| Tax | 12 Regular tax (multiply line 11 by 0.098; if zero or less, enter zero) | 12 ■ | _____ | _____ |
| | 13 Alternative minimum tax (AMT) (from AMTT, line 10) | 13 ■ | _____ | _____ |
| | 14 Add lines 12 and 13 | 14 ■ | _____ | _____ |
| Credits Against Tax | 15 AMT credit (from AMTT, line 13) | 15 ■ | _____ | _____ |
| | 16 Subtract line 15 from line 14 | 16 ■ | _____ | _____ |
| | 17 Minnesota credit for increasing research activities (from RD, line 33) | 17 ■ | _____ | _____ |
| | 18 Subtract line 17 from line 16 | 18 ■ | _____ | _____ |
| Tax Liability | 19 Minimum fee (from M4A, line 12). If you are a qualified business with all property and payroll located in a JOBZ zone, enter zero . . . | 19 ■ | _____ | _____ |
| | 20 Tax liability by corporation (add lines 18 and 19) | 20 ■ | _____ | _____ |
| | 21 Employer Transit Pass Credit (from ETP, line 4) | 21 ■ | _____ | _____ |
| | 22 Subtract line 21 from line 20 (if zero or less, enter zero) | 22 ■ | _____ | _____ |
| | 23 Add all amounts on line 22. This is your MINNESOTA TAX LIABILITY | 23 ■ | _____ | _____ |

Enter on M4, line 1.