

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 Withdrawn 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	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 ■	
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 ■	
Apportionable Income		

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	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. 12, 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.