

Nonrefundable Credits

15 Tax before credits. Amount from line 14 15 .00


16 Marriage credit for joint return when both spouses have taxable earned income or taxable retirement income (enclose Schedule M1MA) 16 ■ .00

17 Other nonrefundable credits (enclose Schedule M1C) 17 ■ .00

18 Total nonrefundable credits. Add lines 16 and 17 18 .00

Tax

19 Subtract line 18 from line 15 (if result is zero or less, leave blank) 19 .00

20 Nongame Wildlife Fund contribution (see instructions, page 15) This will reduce your refund or increase amount owed  20 ■ .00

21 Add lines 19 and 20 21 .00

Total Payments

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 ■ .00

23 Minnesota estimated tax and extension payments made for 2014 23 ■ .00

24 Child and Dependent Care Credit (enclose Schedule M1CD). Enter number of qualifying persons here: 24 ■ .00

25 Minnesota Working Family Credit (enclose Schedule M1WFC). Enter number of qualifying children here: 25 ■ .00

26 K-12 Education Credit (enclose Schedule M1ED). Enter number of qualifying children here: 26 ■ .00

27 Reading Credit (enclose Schedule M1READ). Enter number of qualifying children here: 27 ■ .00

28 Business and investment credits (enclose Schedule M1B) 28 ■ .00

29 Total payments. Add lines 22 through 28 29 .00

Refund or Amount Due

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 ■ .00

31 Direct deposit of your refund (you must use an account not associated with a foreign bank):

Account Type Routing Number Account Number

Checking Savings

32 AMOUNT YOU OWE. If line 21 is more than line 29, subtract line 29 from line 21 (see instructions) 32 ■ .00

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 ■ .00

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 ■ .00

35 Amount from line 30 you want applied to your 2015 estimated tax 35 ■ .00

Sign Here

I declare that this return is correct and complete to the best of my knowledge and belief.		Paid preparer: You must sign below.	
Your signature	Date	Paid preparer's signature	Date
Spouse's signature (if filing jointly)	Taxpayer's daytime phone	Preparer's daytime phone	PTIN or VITA/TCE # (required)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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.