U.S. Individual Income Ta

ax Return (99) 2014 OMB No. 1545-0074 RS Use Only - Do not write or staple in this space.

For the year Jan. 1-Dec	. 31, 2	014, or other tax year beginning		, 2014, ending 20								See separate instructions			
Your first name and	initia		Last name	ie							Your	social security nu	ımber		
MARK B.			DAYTO	NC							* :	**-**-*	***		
If a joint return, spo	use's	first name and initial	Last name	ie							Spou	ıse's social securi	ty number		
Home address (num	nber a	nd street). If you have a P.O	. box, see in	structions	S.				Apt. ı	10.	. N	Make sure the SSI	V(s) above		
80 S. 8TH	I S	T., 1800 IDS	CENTE	ΞR							<b>▲</b> a	and on line 6c are	correct.		
	Last name and initial				Presi	idential Election C	ampaign								
MINNEAPOL	ıIS	, MN 55402-4	4523								if filir	ck here if you, or y ng jointly, want \$3 fund. Checking a	to go to		
Foreign country nan	ne		ı	Foreign pı	rovince/state/county			Foreig	n postal	code	will n	not change your ta	ax or refund.		
												You	Spouse		
Filing Status	1	X Single				4	Head of I	househo	ld (with	qualifyi	ng pe	erson). If the qu	ualifying		
· ming otatao	2		-		•		-		but not y	our de	pend	ent, enter this	child's		
Check only	3	Married filing separate	ely. Enter sp	oouse's SS	SN above		_	_							
one box.							」 Qualifyin	g widov	(er) with	depen	dent	child Boxes checked			
Exemptions			-									on 6a and 6b			
•				·····		······	(2) Don	ondont's		(4)√ if (	<u>)</u> hild	No. of children on 6c who:			
	С	•	Looknoom				relation	nship to		under ag gualifying	e 17 for child	lived with yo     did not live w			
		(1) First name	Last nam	ne			У	ou		tax cre	dit	you due to divo	rce		
If we are the sections												(see instruction	s)		
dependents, see						_						Dependents on			
instructions and	η.											not entered abo	ove		
CHECK HEIE		Total number of evernation	ne claimed									Add numbers on lines above	1		
	_										Τ		809.		
income											+		219.		
Your first name and MARK B.  If a joint return, spot Home address (nut 80 S. 8 Ti City, town or post offic MINNEAPO) Foreign country na  Filing Status Check only one box.  Exemptions  If more than four dependents, see instructions and check here ▶  Income  Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.  If you did not get a W-2, see instructions.  Adjusted Gross Income		Tax-exempt interest. Do n	ot include o	on line 8a		8b									
` '	9a									9a		65,	318.		
		Qualified dividends				9b		65	,318						
	10														
	11										1				
was withinclu.	12	Business income or (loss)	. Attach Sch	hedule C o	r C-EZ					12					
If you did not	13									13		198,	684.		
	14									14					
	15a														
	16a														
	17	Rental real estate, royalties	s, partnershi	ips, S corp	porations, trusts, etc. At	tach Sch	edule E			17			0.		
	18										┸				
	19	Unemployment compensa	ition							19	$\perp$				
			_	20a		<b>b</b> Tax	able amou	nt			_				
		* * * * * * * * * * * * * * * * * * * *								21	_	200	020		
			he far right o	column fo	r lines 7 through 21. Thi			me	<b>&gt;</b>	22	+	380,	030.		
Adiusts		Educator expenses Certain business expenses of r	reservists, perf	forming arti	sts, and fee-basis governme	23	_								
										_					
moome															
										_					
							_			_					
						٠	_								
	34														
	35	Domestic production activ													
	36	Add lines 23 through 35								36					
410001 12-31-14	37	Subtract line 36 from line								37		380,	030.		

Form 1040 (2014)	M	ARK B. DAYTON	***_**		Page 2		
Tax and	38	Amount from line 37 (adjusted gross income)		38	380,030.		
Credits		Check \( \overline{X} \) You were born before January 2, 1950, \( \square \) Blind. \( \) T					
Standard		if: Spouse was born before January 2, 1950, Blind.					
Deduction for -  ■ People who	b	If your spouse itemizes on a separate return or you were a dual-status alien, check					
check any box L on line 39a or	40	Itemized deductions (from Schedule A) or your standard deduction (see left marg		40	29,724.		
on line 39a or 39b <b>0f</b> who can be claimed as a	41	Subtract line 40 from line 38		41	350,306.		
dependent, see instructions.	42	<b>Exemptions.</b> If line 38 is \$152,525 or less, multiply \$3,950 by the number on line		42	0.		
	43	<b>Taxable income.</b> Subtract line 42 from line 41. If line 42 is more than line 41, enter		43	350,306.		
	44	Tax. Check if any from: a Form(s) 8814 b Form 4972 c		44	57,038.		
	45	Alternative minimum tax. Attach Form 6251		45	12,729.		
All others:	46	Excess advance premium tax credit repayment. Attach Form 8962		46			
Single or Married filing	47	Add lines 44, 45, and 46		47	69,767.		
separately,	48		48   3,279.	41	03,707		
\$6,200 Married filing	49	• • • • • • • • • • • • • • • • • • • •	49				
jointly or			50				
Qualifying widow(er),	50	,	51				
\$12,400 Head of	51		52				
household,	52	, I	53				
\$9,100	53	Residential energy credits. Attach Form 5695  Other credits from Form: a 3800 b 8801 c					
	54				3,279.		
	55	Add lines 48 through 54. These are your total credits		55	66,488.		
		Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-		56	00,400.		
Othor	57	Self-employment tax. Attach Schedule SE  Unreported social security and Medicare tax from Form: <b>a</b> 4137 <b>b</b> 8	0.40	57			
Other				58			
Taxes		Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if re		59	14,791.		
	ьоа	Household employment taxes from Schedule H		60a	14,/31.		
	D	First-time homebuyer credit repayment. Attach Form 5405 if required	▼	60b			
	61	Health care: Individual responsibility (see instructions)  Full-year coverage	Δ	61 62	5,523.		
		Taxes from: a Form 8959 b X Form 8960 c Inst.; enter code(s)			86,802.		
Dormonto		Add lines 56 through 62. This is your total tax		63	00,002.		
Payments							
If you have a		2014 estimated tax payments and amount applied from 2013 return					
qualifying		a Earned income credit (EIC)	66a				
child, attach Schedule EIC.		Nontaxable combat pay election	0.7				
		Additional child tax credit. Attach Schedule 8812	67				
	68	American opportunity credit from Form 8863, line 8	68				
		Net premium tax credit. Attach Form 8962	69				
		Amount paid with request for extension to file	70				
	71	Excess social security and tier 1 RRTA tax withheld	71				
	72	Credit for federal tax on fuels. Attach Form 4136	72				
	73	Credits from Form: a 2439 b Reserved c Reserved d L	73		73,166.		
Refund	74	Add lines 64, 65, 66a, and 67 through 73. These are your <b>total payments</b>		74	73,100.		
Retund	75 76 a	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you		75			
Direct deposit?		Amount of line 75 you want <b>refunded to you</b> . If Form 8888 is attached, check here only number to Type: Checking Savings defaction of the Account Checking Savings defaction.		76a			
See instructions.		· · · · · · · · · · · · · · · · · · ·	77				
Amount	-	Amount of line 75 you want applied to your 2015 estimated tax	77	70	13,673.		
You Owe	78 70	Amount you owe. Subtract line 74 from line 63. For details on how to pay, see inst	٦	78	13,073.		
Third Part		Estimated tax penalty (see instructions)	· · · · · · · · · · · · · · · · · · ·	0111	No		
Designee	_		10115)! [21] 165. Complete bei	Personal id	lentification		
Sign		Under penalties of perjury, I declare that I have examined this return and accompanying schedules		number (PI knowledge			
Here		correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of w Your signature   Date   Your occupation	which preparer has any knowledge.	ı Daytime	e phone number		
Joint return?		S SSCAPARION			3397151		
See instructions. Keep a copy		Spouse's signature. If a joint return, <b>both</b> must sign. Date Spouse's occupation	on	_	S sent you an Identity		
for your records.				Protecti enter it	ion PIN,		
	Prin	t/Type preparer's name Preparer's signature	Date Check	if PTIN			
Paid		Tropaid 3 Signature	self-employed				
	T.O	RI HUME LORI HUME		₽O.	1263847		
		NI HOME DOKE HOME    's name ►WIPFLI, LLP	Final Fai	_ ++ ++++++			
	- 411	7601 FRANCE AVE S. #400	Firm's EIN		48-3400		
410000			Phone no.	<del></del>			

410002 12-31-14 Firm's address ►MINNEAPOLIS, MN 55435

# **2210**

### Underpayment of Estimated Tax by Individuals, Estates, and Trusts

▶ Information about Form 2210 and its separate instructions is at www.irs.gov/form2210 ·

Attach to Form 1040, 1040A, 1040NR, 1040NR-EZ, or 1041.

OMB No.1545-0074

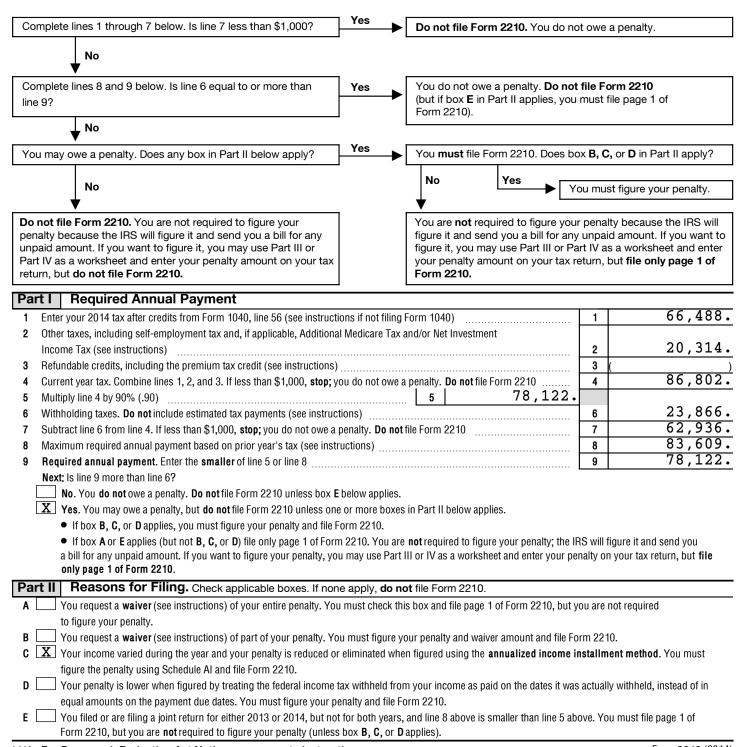
Sequence No. 06

Identifying number

Department of the Treasury Internal Revenue Service Name(s) shown on tax return

\*\*\*\_\*\*\_\*\*\* MARK B. DAYTON

### Do You Have To File Form 2210?



LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 2210 (2014)

26. Do not file Form 2210 unless you checked a box in Part II

Part IV Regular Method (See the instructions if you are filing Form 1040NR or 1040NR-EZ.) **Payment Due Dates Section A - Figure Your Underpayment (b)** 6/15/14 (a) 4/15/14 (c) 9/15/14 (**d**) 1/15/15 18 Required installments. If box C in Part II applies, enter the amounts from Schedule Al, line 25. Otherwise, enter 17,094. 17,110. 17,101 26,817. 25% (.25) of line 9, Form 2210, in each column 18 19 Estimated tax paid and tax withheld. For column (a) only, also enter the amount from line 19 on line 23. If line 19 is equal to or more than line 18 for all payment periods, stop here; you do not owe a penalty. 26,967. 10,967. 18,967 16,265. Do not file Form 2210 unless you checked a box in Part II 19 Complete lines 20 through 26 of one column before going to line 20 of the next column. 20 Enter the amount, if any, from line 26 in the previous 9,873. 3,730 5,596. 20 20,840. 22,697. 21,861. **21** Add lines 19 and 20 21 22 Add the amounts on lines 24 and 25 in the previous column ..... 22 23 Subtract line 22 from line 21. If zero or less, enter -0-. 26,967. 20,840. 22,697 21,861. For column (a) only, enter the amount from line 19 ...... 23 24 If line 23 is zero, subtract line 21 from line 22. 0. 0. Otherwise, enter -0-24 25 Underpayment. If line 18 is equal to or more than line 23, subtract line 23 from line 18. Then go to line 20 of 4,956. the next column. Otherwise, go to line 26 25 26 Overpayment. If line 23 is more than line 18, subtract line 9,873. 3,730. 5,596 18 from line 23. Then go to line 20 of the next column 26 Section B - Figure the Penalty (Use the Worksheet for Form 2210, Part IV, Section B - Figure the Penalty in the instructions.) 27 Penalty. Enter the total penalty from line 14 of the Worksheet for Form 2210, Part IV, Section B - Figure the Penalty. Also include this amount on Form 1040, line 79; Form 1040A, line 51; Form 1040NR, line 76; Form 1040NR-EZ, line 26; or Form 1041, line

Form **2210** (2014)

SEE ATTACHED WORKSHEET

27

	m 2210 (2014) MARK B. DATTON chedule AI - Annualized Income Installment Me	thor	(See the instruction	ne )		* - * * * Page <b>4</b>
_					(2)	(4)
	ates and trusts, <b>do not</b> use the period ending dates shown to the		(a)	(b)	(c)	(d)
-	nt. Instead, use the following: 2/28/14, 4/30/14, 7/31/14, and		1/1/14 - 3/31/14	1/1/14 - 5/31/14	1/1/14 - 8/31/14	1/1/14 - 12/31/14
	30/14. art I   Annualized Income Installments					
_						
1	Enter your adjusted gross income for each period (see instructions).					
	(Estates and trusts, enter your taxable income without your		00 150	146 015	025 065	200 020
	exemption for each period)	1	88,150.	146,917.	235,067.	380,030.
2	Annualization amounts. (Estates and trusts, see instructions)	2	4	2.4	1.5	1
3	Annualized income. Multiply line 1 by line 2	3	352,600.	352,601.	352,601.	380,030.
4	If you itemize, enter itemized deductions for the period shown in					
	each column. All others enter -0-, and skip to line 7. Exception:					
	Estates and trusts, skip to line 9 and enter amount from line 3	4	9,158.	13,795.	24,005.	29,724.
5	Annualization amounts	5	4	2.4	1.5	1
6	Multiply line 4 by line 5 (See instr. if line 3 is more than \$152,525)	6	36,632.	33,108.	36,008.	29,724.
7	In each column, enter the full amount of your standard deduction					
	from Form 1040, line 40, or Form 1040A, line 24. (Form 1040NR					
	or 1040NR-EZ filers, enter -0 Exception: Indian students and					
	business apprentices, see instructions)	7	7,750.	7,750.	7,750.	7,750.
8	Enter the larger of line 6 or line 7	8	36,632.	33,108.	36,008.	29,724.
9	Subtract line 8 from line 3	9	315,968.	319,493.	316,593.	350,306.
10						
	claimed (see instructions if line 3 is more than \$152,525). (Estates,					
	trusts, and Form 1040NR or 1040NR-EZ filers, see instructions)	10	790.	790.	790.	0.
11	Subtract line 10 from line 9. If zero or less, enter -0-	11	315,178.	318,703.	315,803.	350,306.
	Figure your tax on the amount on line 11 (see instructions)	12	63,174.	63,174.	63,174.	57,038.
	, , , , , , , , , , , , , , , , , , , ,	12	03,174.	03,174.	03,174.	37,030.
13	Self-employment tax from line 34	13	0.	0.	0.	0.
	(complete Part II below)	13	0.	0.	0.	0.
14	Enter other taxes for each payment period including, if applicable,	44	12 001	12 02/	12,834.	22 042
	Additional Medicare Tax and/or Net Investment Income Tax	14 15	12,801.	12,834.		33,043.
	Total tax. Add lines 12, 13, and 14	10	75,975.	76,008.	76,008.	90,081.
16	For each period, enter the same type of credits as allowed on Form	4.0	0	0	0	2 270
	2210, Part I, lines 1 and 3 (see instructions)	16	0.	0.	0.	3,279.
	Subtract line 16 from line 15. If zero or less, enter -0-	17	75,975.	76,008.	76,008.	86,802.
	Applicable percentage	18	22.5%	45%	67.5%	90%
19	Multiply line 17 by line 18	19	17,094.	34,204.	51,305.	78,122.
	Complete lines 20-25 of one column before going					
	to line 20 of the next column.					-4
	Enter the total of the amounts in all previous columns of line 25 $\dots$	20		17,094.	34,204.	51,305.
21	Subtract line 20 from line 19. If zero or less, enter -0-	21	17,094.	17,110.	17,101.	26,817.
22	Enter 25% (.25) of line 9 on page 1 of Form 2210 in each column $\dots$	22	19,530.	19,530.	19,531.	19,531.
23	Subtract line 25 of the previous column from line 24 of that					
	column	23		2,436.	4,856.	7,286.
24	Add lines 22 and 23	24	19,530.	21,966.	24,387.	26,817.
25	Enter the <b>smaller</b> of line 21 or line 24 here and on Form 2210,					
	Part IV, line 18	25	17,094.	17,110.	17,101.	26,817.
P	art II Annualized Self-Employment Tax (Form 104	40 an	d Form 1040NR filers	s only)		_
26	Net earnings from self-employment for the period (see instructions)	26				
27	Prorated social security tax limit	27	\$29,250	\$48,750	\$78,000	\$117,000
28	Enter actual wages for the period subject to social security tax or					
	the 6.2% portion of the 7.65% railroad retirement (tier 1) tax.					
	<b>Exception:</b> If you filed Form 4137 or Form 8919, see instructions	28				
29	Subtract line 28 from line 27. If zero or less, enter -0-	29				
	Annualization amounts	30	0.496	0.2976	0.186	0.124
31		31	51.55	3.20. 0	51.55	2
	Annualization amounts	32	0.116	0.0696	0.0435	0.029
	Multiply line 26 by line 32	33	3.1.10	3.5300	3.3 100	0.020
	Add lines 31 and 33. Enter here and on line 13 above	34				
	The miss of and our enter here and on the To above	U T				

412551 12-23-14

### **UNDERPAYMENT OF ESTIMATED TAX WORKSHEET**

Name(s)				Identifyin	g Number
MARK B. DAY	TON			***_	**_***
(A)	(B)	(C) Adjusted	(D) Number Days	(E) Daily	(F)
*Date	Amount	Balance Due	Balance Due	Penalty Rate	Penalty
04/15/14	17,094.	-0- 17,094.			
04/15/14	-5,967.	11,127.			
04/15/14	-21,000.	-9,873.			
06/15/14	17,110.	7,237.			
06/15/14	-5,967.	1,270.			
06/15/14	-5,000.	-3,730.			
09/15/14	17,101.	13,371.			
09/15/14	-5,967.	7,404.			
09/15/14	-13,000.	-5,596.			
01/15/15	26,817.	21,221.			
01/15/15	-5,965.	15,256.			
01/15/15	-10,300.	4,956.	90	.00008219	92 37
enalty Due (Sum of Colun	nn F).			1	35

<sup>\*</sup> Date of estimated tax payment, withholding credit date or installment due date.

412511 05-01-14

### **SCHEDULE A** (Form 1040)

Department of the Treasury Internal Revenue Service Name(s) shown on Form 1040

### **Itemized Deductions**

▶ Information about Schedule A and its separate instructions is at www.irs.gov/schedulea ► Attach to Form 1040.

OMB No. 1545-0074

MARK B.	DA	YTON			* *	**-	**-***
Medical		Caution. Do not include expenses reimbursed or paid by others.		•			
and	1	Medical and dental expenses (see instructions)	1				
Dental	2	Enter amount from Form 1040, line 38					
Expenses	3	Multiply line 2 by 10% (.10). But if either you or your spouse was born before	1				
-		January 2, 1950, multiply line 2 by 7.5% (.075) instead	3				
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-				4	
Taxes You	5	State and local (check only one box):					
Paid		a X Income taxes, or	5	31	,641	L.	
		b General sales taxes			-		
	6	Real estate taxes (see instructions)	6				
	7	Personal property taxes	7				
	8	Other taxes. List type and amount					
			8				
	9	Add lines 5 through 8				9	31,641.
Interest	10	Home mortgage interest and points reported to you on Form 1098	10			Ť	· · · · · ·
You Paid	11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address					
Note.			11				
Your mortgage	12	Points not reported to you on Form 1098. See instructions for special rules	12				
interest deduction may	13	Mortgage insurance premiums (see instructions)	13				
be limited (see	14	Investment interest. Attach Form 4952 if required. (See instructions.)	14				
instructions).		Add lines 10 through 14	-			15	
Gifts to		Gifts by cash or check. If you made any gift of \$250 or more, see instructions	16			-	
Charity		Other than by cash or check. If any gift of \$250 or more, see instructions.	1				
If you made a		You <b>must</b> attach Form 8283 if over \$500	17				
gift and got a benefit for it,	18	Carryover from prior year	18				
		Add lines 16 through 18				19	
Casualty and							
Theft Losses	20	Casualty or theft loss(es). Attach Form 4684. (See instructions.)				20	
Job Expenses and Certain Miscellaneous	21	Unreimbursed employee expenses - job travel, union dues, job education, etc.  Attach Form 2106 or 2106-EZ if required. (See instructions.) ▶					
Deductions			24				
	22	Tax preparation fees	21 22			$\dashv$	
		Tax preparation fees  Other expenses - investment, safe deposit box, etc. List type and amount ►  INVESTMENT, TAX & ACCOUNT	22				
			22	9	, 459	a	
	24	Add lines 01 through 00	23 24		, 459		
	25	Add lines 21 through 23	24		, = 5 -	<b>~</b>	
	26	Enter amount from Form 1040, line 38 [25] 380,030.	26	7	,601	ا ، ا	
	27	Multiply line 25 by 2% (.02) Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-				27	1,858.
Other	28	Other - from list in instructions. List type and amount					
Miscellaneous Deductions	20					28	
	29	Is Form 1040, line 38, over \$152,525?				-3	
	23	<b>No.</b> Your deduction is not limited. Add the amounts in the far right column	)		- 1		
Total		for lines 4 through 28. Also, enter this amount on Form 1040, line 40.			].	29	29,724.
Itemized		Yes. Your deduction may be limited. See the Itemized Deductions	···		·····		==,,==
Deductions		Worksheet in the instructions to figure the amount to enter.	J				
	30	If you elect to itemize deductions even though they are less than your standard deductions are the arrows and the instructions of the instructions of the instructions are the arrows and instructions are the arrows and instructions are the arrows are less than your standard deductions are the instructions are the arrows	uctio	n			
		check here		<b>&gt;</b>			

### **SCHEDULE B**

(Form 1040A or 1040)

## **Interest and Ordinary Dividends**

► Attach to Form 1040A or 1040.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99) ▶ Information about Schedule B and its instructions is at www.irs.gov/scheduleb Name(s) shown on return

MARK B. I	AY	TON	* *	*-**-	***	*
Part I	1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the		Ar	nount	
Interest		property as a personal residence, see instructions and list this interest first. Also, show that				
		buyer's social security number and address ▶				
		SEVEN HUNDRED COMPANY			2	19.
			1			
Note. If you						
received a Form 1099-INT.						
Form 1099-OID,						
or substitute statement from						
a brokerage firm,						
list the firm's name as the						
payer and enter the total interest						
shown on that	2	Add the amounts on line 1	2		2	19.
form.	3	Excludable interest on series EE and I U.S. savings bonds issued after 1989.				
		Attach Form 8815	3			
	4	Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a	4		2	19.
	Not	e. If line 4 is over \$1,500, you must complete Part III.		A	mount	
Part II	5	List name of payer				
Ordinary		FROM K-1 - BRUCE B DAYTON 2004 CRUT		6	55,3	18.
Dividends						
			5			
Note. If you			5			
received a Form 1099-DIV or						
substitute statement from						
a brokerage firm,						
list the firm's						
name as the payer and enter						
the ordinary dividends shown						
on that form.						
	6	Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a	6	6	55,3	<del>18.</del>
		e. If line 6 is over \$1,500, you must complete Part III.			-	
		must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had	a forei	gn		
Part III	acc	ount; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.			Yes	No
Foreign	7a	At any time during 2014, did you have a financial interest in or signature authority over a financial	accoun	t (such		
Accounts		as a bank account, securities account, or brokerage account) located in a foreign country? See in				Х
and		If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts	(FBAF	3),		
Trusts		to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for	or filing			
		requirements and exceptions to those requirements				
	b	If you are required to file FinCen Form 114, enter the name of the foreign country where the finance	ial acco	ount		
		is located				
427501	8	During 2014, did you receive a distribution from, or were you the grantor of, or transferor to, a fore	-			
427501 11-07-14		If "Yes," you may have to file Form 3520. See instructions				X

### **SCHEDULE D** (Form 1040)

Department of the Treasury Internal Revenue Service (99)

See instructions for how to figure the amounts to

## **Capital Gains and Losses**

► Attach to Form 1040 or Form 1040NR.

▶ Information about Schedule D and its separate instructions is at www.irs.gov/scheduled · ▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

(h) Gain or (loss)

Name(s) shown on return

Your social security number

(g)

MARK B. DAYTON

Short-Term Capital Gains and Losses - Assets Held One Year or Less

	on the lines below.	(d)	(e)	Adjustment		Subtract column (e)			
	form may be easier to complete if you round off s to whole dollars.	Proceeds (sales price)	Cost (or other basis)	to gain or loss Form(s) 8949, F line 2, column	Part I,	from column (d) and combine the result with column (g)			
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b								
1b	Totals for all transactions reported on Form(s)								
	8949 with <b>Box A</b> checked								
2	Totals for all transactions reported on Form(s)								
3	8949 with <b>Box B</b> checked								
Ū	8949 with <b>Box C</b> checked								
4	Short-term gain from Form 6252 and short-term	gain or (loss) from Forms	s 4684, 6781, and 8824		4				
5	Net short-term gain or (loss) from partnerships, S								
	from Schedule(s) K-1				5				
6	Short-term capital loss carryover. Enter the amou	unt, if any, from line 8 of	your <b>Capital Loss</b>						
	Carryover Worksheet in the instructions				6	()			
7	Net short-term capital gain or (loss). Combine	1_							
_	capital gains or losses, go to Part II below. Other				7				
Pa	t II Long-Term Capital Gains and Lo	sses - Assets Hel	d More Than One	Year					
See i	nstructions for how to figure the amounts to			(g)		(h) Gain or (loss)			
	on the lines below.	(d) Proceeds	(e) Cost	Adjustment to gain or loss		Subtract column (e) from column (d) and			
	form may be easier to complete if you round off s to whole dollars.	(sales price)	(or other basis)	Form(s) 8949, F	Part II,	combine the result with column (g)			
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b								
8b	Totals for all transactions reported on Form(s)								
	8949 with <b>Box D</b> checked								
9	Totals for all transactions reported on Form(s)								
40	8949 with <b>Box E</b> checked								
10	Totals for all transactions reported on Form(s)								
11	8949 with <b>Box F</b> checked	Forms 2/30 and 6252:	and long-term gain or (le	) 	1				
••					11				
	from Forms 4684, 6781, and 8824	SEE ST	ATEMENT 2		<u> </u>				
12	Net long-term gain or (loss) from partnerships, S		12	198,684.					
13	Capital gain distributions				13				
14	Long-term capital loss carryover. Enter the amou								
	Worksheet in the instructions				14	()			
15	Net long-term capital gain or (loss). Combine I								
	Part III on page 2				15	198,684.			
LHA	For Paperwork Reduction Act Notice, see you	ur tax return instructio	ns.		Schedule D (Form 1040) 2014				

Pa	rt III Summary		
16	Combine lines 7 and 15 and enter the result	16	198,684.
	<ul> <li>If line 16 is a gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below.</li> <li>If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22.</li> </ul>		
	• If line 16 is <b>zero</b> , skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22.		
17	Are lines 15 and 16 both gains?  X Yes. Go to line 18.  No. Skip lines 18 through 21, and go to line 22.		
18	Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet in the instructions	18	
19	Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet in the instructions	19	
20	Are lines 18 and 19 both zero or blank?  X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). Do not complete lines 21 and 22 below.		
	No. Complete the Schedule D Tax Worksheet in the instructions. Do not complete lines 21 and 22 below.		
21	If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the <b>smaller</b> of:		
	<ul> <li>The loss on line 16 or</li> <li>(\$3,000), or if married filing separately, (\$1,500)</li> </ul>	21 (	)
	Note. When figuring which amount is smaller, treat both amounts as positive numbers.		
22	Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b?		
	Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42).		
	No. Complete the rest of Form 1040 or Form 1040NR.		

Schedule D (Form 1040) 2014

	e(s) shown on return K B. DAYTON				Your SSN	***-**-**
Bef	ore you begin:  See the instructions for line 44 to see if y  Before completing this worksheet, comp  If you do not have to file Schedule D and checked the box on line 13 of Form 1040	lete Form 104 I you received	0 throu	ıgh line 43.		
1.	Enter the amount from Form 1040, line 43. However, if you are fil	ing Form				
	2555 or 2555-EZ (relating to foreign earned income), enter the an	nount from				
	line 3 of the Foreign Earned Income Tax Worksheet  Enter the amount from Form 1040, line 9b* 2		1	350,306	<u>•</u>	
2.	Enter the amount from Form 1040, line 9b* 2.	55,318.				
3.	Are you filing Schedule D?*					
	X Yes. Enter the smaller of line 15 or 16 of Schedule D. If either line 15 or line 16 is blank or a loss, enter -0-  No. Enter the amount from Form 1040, line 13  3					
4.	Add lines 2 and 3 4. 26	4,002.				
5.	If filing Form 4952 (used to figure investment					
	interest expense deduction), enter any amount					
	from line 4g of that form. Otherwise, enter -0 5.	0.				
6.	Subtract line 5 from line 4. If zero or less, enter -0-		6	264,002	<u>•</u>	
7.	Subtract line 6 from line 1. If zero or less, enter -0-		7	86,304	•	
8.	Enter:					
	\$ 36,900 if single or married filing separately,					
	\$ 73,800 if married filing jointly or qualifying widow(er),		8	36,900	<u>•</u>	
	\$ 49,400 if head of household.					
9.	Enter the smaller of line 1 or line 8		9	36,900	<u>•</u>	
10.	Enter the smaller of line 7 or line 9		10.	36,900	•	
1 11.	Subtract line 10 from line 9. This amount is taxed at 0%		11.	U	•	
12.	Enter the smaller of line 1 or line 6		12.	204,002	•	
13.	Enter the amount from line 11		13	U	•	
14.	Subtract line 13 from line 12		14	264,002	<u>•</u>	
15.	Enter:					
	\$ 406,750 if single,					
	\$ 228,800 if married filing separately,		15	406,750	<u>•</u>	
	\$ 457,600 if married filing jointly or qualifying widow(er),					
	\$ 432,200 if head of household.					
16.	Enter the smaller of line 1 or line 15		16	350,306	<u>•</u>	
17.	Add lines 7 and 11		17	86,304	<u>•</u>	
18.			18	<b>464,004</b>	•	
19.	Enter the smaller of line 14 or line 18			264,002	_	20.500
20.	Multiply line 19 by 15% (.15)			064 000	20	39,600.
21.	Add lines 11 and 19			A		
22.	Subtract line 21 from line 12			0	<u>•</u>	•
23.	Multiply line 22 by 20% (.20)				23	0.
24.	5					15 420
	figure the tax. If the amount on line 7 is \$100,000 or more, use the					17,438.
25.	Add lines 20, 23, and 24				<b>25.</b>	57,038.
26.	5					00 450
	figure the tax. If the amount on line 1 is \$100,000 or more, use the				<b>26.</b>	99,459.
27.	Tax on all taxable income. Enter the smaller of line 25 or line 26					
	1040, line 44. If you are filing Form 2555 or 2555-EZ, do not enter					E7 020
	Instead, enter it on line 4 of the Foreign Earned Income Tax Work	sheet			27	57,038.
*If y	ou are filing Form 2555 or 2555-EZ, see the footnote in the Foreign	n Earned Inco	me Tax	Worksheet before com	pleting th	is line.

Schedule E (Form 1040) 2014

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43

Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below

Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code V; and Schedule K-1 (Form 1041), box 14, code F (see instructions)

Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate

Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18

Net farm rental income or (loss) from **Form 4835**. Also, complete line 42 below

activities in which you materially participated under the passive activity loss rules

0.

Part V Summary

Sche	dule E	Ē					P	ASSTHROU	IGH RECAP	- BASIC IN	NFORMATIO	N						2014
MAR	KВ.	DAYTO	N														***_**_*	***
T	(	Schedul	e K-1 Line	Reference: (	1065/1120S/	1041)	1/1/6	2/2/7	3/3/8	*	*	5/4/1	*	6a/5a/2a	7/6/*	8/7/3	9a/8a/4a	4/*/*
	Entity No.	Act. No.			Name	,	Ordinary Income (Loss)	Rental Real Estate Inc. (Loss)	Other Rental Income (Loss)	Passive Activity Loss C/O	AMT Passive Activity Loss C/O	Interest	US Treasury Bond Interest	Dividends	Royalties	Short-Term Capital Gain (Loss)	Net Long- Term Capital Gain (Loss)	Guaranteed Payments to Partner
T E	3	500	BRUCE	B DAYTON		ľ	(====)	(====)	(====)		-, -			65,318.		Gu (2000)	198684.	10 1 41 11 101
$\top$														,				
$\top$																		
$\top$																		
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$\top$																		
+																		
$\top$																		
$\top$																		
+																		
 Fotals	<u>-</u>		1											65,318.			198684.	
	onent	of:					Schedule E, Page 2, Various	Schedule E, Page 2, Various	Schedule E, Page 2, Various	Form 8582 Line 3c	Form 8582 AMT, Line 3c	Schedule B, Line 1	Schedule B, Line 1	Schedule B, Line 5	Schedule E, Line 4	Schedule D, Line 5	Schedule D, Line 12	Schedule E Page 2, Various
											2		1					
Cabadi	ule K-1																	
Line Re	eference 1120S/1		10/9/*	*	11/10/*	13/12/*	12/11/*	13/12/*	13/12/*	13/12/*	*/*	20/17/14	13/*/*	*	14/*/*	17/15/12	*/*/12	*/*/12
Entity No.	/ Ad		ction 1231 iin (Loss)	Ordinary Gain (Loss) Form 4797	Other Income	Charitable Contributions 50%	Section 179 Expense	Deductions Related to Portfolio Income (2%)	Other Deductions	Investment Int. Expense (Schedule A)	Investment Int. Expense (Schedule E)	Investment Income	SE Health Insurance Premium	Wages for More Than 2% Shareholders	Net SE Earnings	AMT Depr Adj on Post '86 Property	Minimum Tax Adjustment	Exclusion Items
	-	-		<del>                                     </del>	<del>                                     </del>	<del> </del>			<del> </del>		1	<b> </b>	<del>                                     </del>		<del>                                     </del>	<del>                                     </del>	<del></del>	<b>-</b>

Entity No.	Act. No.	Section 1231 Gain (Loss)	Ordinary Gain (Loss) Form 4797	Other Income	Charitable Contributions 50%	Section 179 Expense	Deductions Related to Portfolio Income (2%)	Other Deductions	Investment Int. Expense (Schedule A)	Investment Int. Expense (Schedule E)	Investment Income	SE Health Insurance Premium	Wages for More Than 2% Shareholders		AMT Depr Adj on Post '86 Property	Minimum Tax Adjustment	Exclusion Items
Totals																	
Compor	nent of:	Form 4797, Line 2	Form 4797, Line 10	Schedule E, Page 2, Various	Schedule A, Lines 16 & 17	Form 4562, Line 6	Schedule A, Line 23	Schedule E, Page 2, Various	Schedule A, Line 14	Schedule E, Page 2, Various	Form 4952, Line 4a	Form 1040, Line 29	Form 1040, Line 7	Schedule SE, Line 2	Form 6251, Line 19	Form 6251, Line 16	2014 Form 8801

 $<sup>^{\</sup>star}\;$  - No specific Schedule K-1 line reference for these amounts.

Sche	dule E			PA	SSTHROU	GH RECAP	- ADDITION	AL INFORM	IATION AND	PRIOR YE	AR BASIS (	CARRYOVE	RS			2014
MARK	B. DAY	YTON													***_**_*	***
Schedule Line Refe (1065/11)		6b/5b/2b	11/10/*	13/*/*	13/12/14	13/12/*	15/13/*	15/13/13	15/13/13	15/13/*	15/13/*	20/17/13	*/*/*			
Entity No.	Act. No.	Qualified Dividends	Sec. 1256 Contracts & Straddles	Dependent Care Benefits	Qualified Production Activities Income	Employer's W-2 Wages	Undistributed Capital Gains	Empowerment Zone Credit	Credit for Increasing Research Activities	New Markets Credit	Credit for SS & Medicare Taxes	Recapture of Low-income Housing Credit	Royalty/ Depletion Expenses			
3	500	65,318.										- roughly or our	широпосо			
otale		65,318.														
	nent of:	Form 1040, Line 9b	Form 6781, Line 1	Form 2441 Line 14	Form 8903, Line 7	Form 8903, Line 15	Form 1040, Line 70	Form 8844, Line 3	Form 6765, Line 37	Form 8874, Line 2	Form 8846, Line 5	Form 8611, Line 8	Schedule E, Page 1 or 2			
					l						l			ı ı	1	
Schedule Line Refe (1065/11)		*	*	*	*	*	*	*	*	*	*	*	*			
Entity No.	Act. No.	Schedule E Basis Carryover	AMT Schedule E Basis Carryover	ST Basis Carryover	AMT Basis Carryover	LT Basis Carryover	AMT LT Basis Carryover	Sec. 1231 Basis Carryover	AMT Sec. 1231 Basis Carryover	4797-Ord. Basis Carryover	AMT 4797-Ord. Basis Carryover	Other Basis Carryovers	AMT Other Basis Carryovers			
otals																
	nent of:	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet			

# Foreign Tax Credit (Individual, Estate, or Trust)

► Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

Department of the Treasury Internal Revenue Service (99)

▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.

Na	me	-						ldentifying numb	er as shown	on page	e 1 of your tax return
M	ARK B. D	AYTON						***_**_	****		
	e a separate Form ounts in U.S. doll				w. See <b>Categories</b>	of Income in th	e instructions.	Check only one b	ox on each f	orm 1	I 116. Report all
		ategory incom		Section 901	(i) income		e I um	np-sum distributio	ns		
b	=	ategory incom	_	_	me re-sourced by t	reaty	C Lun	ip dam alouiloudo	110		
f F	Resident of (name	e of country)	► UNITE	D STATE	IS						
No	ote: If you paid to	axes to only	one foreign co	untry or U.S. į	oossession, use o	column A in Pa	art I and line	A in Part II. If yo	u paid taxe	s tom	ore than one
					and line for each						
Р	Part I Taxab	ole Income	or Loss From	Sources Out	side the United	-		-			
					Foreign Country or U.S. Possession					/ A -l -l	Total
_	F				OTHER		В	С		(Add (	cols. A, B, and C.)
g			oreign countr		COUNTRIE	g					
1:			within country s		COONTRIE	5					
10	and of the type		,	mown above							
	and of the type	o onookou abo									
					16,8	02.			1:	a	16,802.
ı	Check if line 1a	a is compensa	ation for persona	l services as							<u> </u>
	an employee, y	your total com	pensation from	all sources is							
	\$250,000 or m	nore, and you	used an alternat	ive basis to							
			structions)								
De	eductions and I	losses ( <sub>Cau</sub>	tion: See instru	uctions):							
2	Expenses <b>defi</b> (attach statem	nitely related ent)	to the income o	n line 1a							
3	Pro rata share	of other dedu	ctions <b>not defin</b>	itely related:							
á			or standard ded		29,7	24.					
ŀ			itement)								
(	c Add lines 3a ai				29,7						
(			e		16,8						
•			ces		380,0						
1	F Divide line 3d I				1,3						
,					1,3	14.					
4	Pro rata share			for							
ā		•	e the Worksheet the instructions)								
,	• Other interest (		.116 111311 46110113)					1			
5	Losses from fo							1			
6	Add lines 2, 3g	-			1,3	14.			6	;	1,314.
	Subtract line 6 f	from line 1a. E	nter the result h		15, page 2				> 7		1,314. 15,488.
			s Paid or A	ccrued							
	Credit is claimed for taxes				Foreig	n taxes paid	or accrued				
	(you must		In forei	gn currency	1			In U.S. dolla	ars		
Ę	check one)	Tauras	مستمم فماما ما ما ما مافاند		(n) Other	Ta	ممد عمل المام المانيين		(r) Oth		(s)Total foreign
Country	(h) X Paid		vithheld at sourc	e on:	foreign taxes paid or	raxes	withheld at so	ource on:	foreigi taxes pai		taxes paid or accrued (add cols.
				accrued	(0) Dividends	( <b>p</b> ) Rents and royalties	d (q) Interest	accrue		(o) through (r))	
<del>,</del>	vv or accrued	(v) Dividends	(I) Rents and royalties	(III) interest		3,279.	" ' royalties	(4) micresi			3,279.
A B		1				3,2/3.		+			3,213.
c								+			
8	Add lines A thr	ough C, colur	nn (s). Enter the	total here and	on line 9, page 2				<b>b</b>	8	3,279.
_	A For Paperv									_	Form <b>1116</b> (2014)

P	art III Figuring the Credit					
9	Enter the amount from line 8. These are your total foreign taxes paid or accrued					
	for the category of income checked above Part I	9	3,279	<u>.</u>		
10	Carryback or carryover (attach detailed computation)	10				
	can your or tan your (amon companies)	<u> </u>		1		
11	Add lines 9 and 10	11	3,279	<u>. </u>		
12	Reduction in foreign taxes	12				
13	Taxes reclassified under high tax kickout	13				
44	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit					3,279.
	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the	Ι Ι		14	_	5,275
13	United States (before adjustments) for the category of income checked above Part I	15	15,488			
	of the dates (before adjustments) for the dategory of mounte enterior above t art t		23,100	4		
16	Adjustments to line 15	16				
	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income.					
	(If the result is zero or less, you have no foreign tax credit for the category of income					
	you checked above Part I. Skip lines 18 through 22. However, if you are filing more than					
	one Form 1116, you must complete line 20.)	17	15,488	•		
18	Individuals: Enter the amount from Form 1040, line 41, or Form 1040NR, line 39.					
	Estates and trusts: Enter your taxable income without the deduction for your					
	exemption SEE STATEMENT 3	18	186,308	•		
	Caution: If you figured your tax using the lower rates on qualified dividends or capital ga	ins, s	ee instructions.			
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"			19		.08313
20	Individuals: Enter the amounts from Form 1040, lines 44 and 46. If you are a nonresident alien, e	nter tl	ne amounts from			
	Form 1040NR, lines 42 and 44. Estates and trusts: Enter the amount from Form 1041, Schedule (		•			
	of Form 990-T, lines 36 and 37			20		57,038.
	$\textbf{Caution:} \textit{If you are completing line 20 for separate category}_{\textbf{e}} \textit{ (lump-sum distributions)},$					
21	Multiply line 20 by line 19 (maximum amount of credit)			21	↓	4,742.
22	Enter the <b>smaller</b> of line 14 or line 21. If this is the only Form 1116 you are filling, skip lines 23 thr					2 050
_	amount on line 28. Otherwise, complete the appropriate line in Part IV		<b>)</b>	22		3,279.
	art IV Summary of Credits From Separate Parts III	11				
	Credit for taxes on passive category income	23		_		
	Credit for taxes on general category income	24		_		
	Credit for taxes on certain income re-sourced by treaty	25 26				
				27	1	
21	Add lines 23 through 26  Enter the smaller of line 20 or line 27			28	+	3,279.
20	Enter the <b>smaller</b> of line 20 or line 27 Reduction of credit for international boycott operations			29	+	5,275
	Subtract line 29 from line 28. This is your <b>foreign tax credit</b> . Enter here and on Form 1040, line 4			29	$\vdash$	
50	Form 1040NR line 46: Form 1041. Schedule G. line 2a: or Form 990-T. line 40a	٠,	•	30		3.279.

Form **1116** (2014)

Department of the Treasury Internal Revenue Service (99) **Alternative Minimum Tax - Individuals** 

► Information about Form 6251 and its separate instructions is at www.irs.gov/form6251.

► Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074

2014

Attachment
Sequence No. 32

Name(s) shown on Form 1040 or Form 1040NR

Your social security number

ARK B. DAYTON	**	*-**-***
Part I Alternative Minimum Taxable Income		
If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41, and go to line 2. Otherwise, enter the		250 204
amount from Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.)	1	350,306
Medical and dental. If you or your spouse was 65 or older, enter the <b>smaller</b> of Schedule A (Form 1040), line 4,		,
or 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-	2	(
Taxes from Schedule A (Form 1040), line 9	3	31,641
Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet in the instructions for this line	4	4 0 =
Miscellaneous deductions from Schedule A (Form 1040), line 27	5	1,858
If Form 1040, line 38, is \$152,525 or less, enter -0 Otherwise, see instructions	6	-3,77
Tax refund from Form 1040, line 10 or line 21	7	
Investment interest expense (difference between regular tax and AMT)	8	
Depletion (difference between regular tax and AMT)	9	
Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	10	
Alternative tax net operating loss deduction	11	
Interest from specified private activity bonds exempt from the regular tax	12	
Qualified small business stock (7% of gain excluded under section 1202)	13	
Exercise of incentive stock options (excess of AMT income over regular tax income)	14	
Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	15	
Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	16	
Disposition of property (difference between AMT and regular tax gain or loss)	17	
Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	18	
Passive activities (difference between AMT and regular tax income or loss)	19	
Loss limitations (difference between AMT and regular tax income or loss)	20	
Circulation costs (difference between regular tax and AMT)	21	
	22	
Long-term contracts (difference between AMT and regular tax income)	23	
Mining costs (difference between regular tax and AMT)		
Research and experimental costs (difference between regular tax and AMT)	24	
Income from certain installment sales before January 1, 1987	25	
Intangible drilling costs preference	26	
Other adjustments, including income-based related adjustments	27	
Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is		200 02
more than \$242,450, see instructions.)	28	380,03
art II Alternative Minimum Tax (AMT)		
Exemption. (If you were under age 24 at the end of 2014, see instructions.)		
IF your filing status is AND line 28 is not over THEN enter on line 29		
Single or head of household \$117,300 \$52,800		
Married filing jointly or qualifying widow(er) 156,500 82,100		
Married filing separately 78,250 41,050	29	
If line 28 is <b>over</b> the amount shown above for your filing status, see instructions.		
Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0- here and on lines 31, 33, and 35, and go to line 34	30	380,03
● If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter.		
• If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends		
on Form 1040, line 9b; <b>or</b> you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured		
for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 64 here.  • All others: If line 30 is \$182,500 or less (\$91,250 or less if married filing separately), multiply line 30 by	31	69,76
26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,650 (\$1,825 if married filing		
separately) from the result.		
Alternative minimum tax foreign tax credit (see instructions)	32	3,27
Tentative principal and the Couletonat line 00 from line 01	33	66,48
Add Form 1040, line 44 (minus any tax from Form 4972), and Form 1040, line 46. Subtract from the result any		,
foreign tax credit from Form 1040, line 48. If you used Sch J to figure your tax on Form 1040, line 44, refigure		
rologii tax orealt ironii romo romo, iiile mo. Il you used son o to ligure your tax on Fonni 1040, iiile 44, feligure	34	53,75
that tay without using Schodulo I hefore completing this line (see instructions)		22,12
that tax without using Schedule J before completing this line (see instructions) <b>AMT.</b> Subtract line 34 from line 33. If zero or less, enter -0 Enter here and on Form 1040, line 45	35	12,72

# Part III Tax Computation Using Maximum Capital Gains Rates Complete Part III only if you are required to do so by line 31 or by the Foreign Earned Income Tax Worksheet in the instructions.

	Complete Part III only if you are required to do so by line 31 or by the Foreign Earned Income Tax Worksh	eet in the	instructions.
36	Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555-EZ, enter the amount from		
	line 3 of the worksheet in the instructions for line 31	36	380,030.
37	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions		
	for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheet in the instructions for		
	Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see instructions). If		
	you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	37	264,002.
38	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see		
	instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	38	
39	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount		
	from line 37. Otherwise, add lines 37 and 38, and enter the <b>smaller</b> of that result or the amount from line		
	10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555 or		
	2555-EZ, see instructions for the amount to enter	39	264,002.
40	Enter the <b>smaller</b> of line 36 or line 39	40	264,002.
	Subtract line 40 from line 36	41	116,028.
	If line 41 is \$182,500 or less (\$91,250 or less if married filing separately), multiply line 41 by 26% (.26). Otherwise,		<u> </u>
	multiply line 41 by 28% (.28) and subtract \$3,650 (\$1,825 if married filing separately) from the result	42	30,167.
43	Enter:		·
	• \$73,800 if married filing jointly or qualifying widow(er),		
		43	36,900.
	• \$36,900 if single or married filing separately, or • \$49,400 if head of household.	<del>   </del>	,
11	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions		
	for Form 1040, line 44, or the amount from line 14 of the Schedule D Tax Worksheet in the instructions for		
	Schedule D (Form 1040), whichever applies (as figured for the regular tax). If you did not complete either		
	worksheet for the regular tax, enter the amount from Form 1040, line 43; if zero or less, enter -0 If you		86 304
4-	are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	44	86,304. 0.
	Subtract line 44 from line 43. If zero or less, enter -0-	45	264,002.
46	Enter the <b>smaller</b> of line 36 or line 37	46	
47	Enter the <b>smaller</b> of line 45 or line 46. This amount is taxed at 0%	47	0.
	Subtract line 47 from line 46	48	264,002.
49	Enter:		
	<ul> <li>\$406,750 if single</li> <li>\$228,800 if married filing separately</li> <li>\$457,600 if married filing jointly or qualifying widow(er)</li> <li>\$432,200 if head of household</li> </ul>	49	406,750.
50	Enter the amount from line 45	50	0.
	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions		
٠.	for Form 1040, line 44, or the amount from line 19 of the Schedule D Tax Worksheet, whichever applies		
	(as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the		
	amount from Form 1040, line 43; if zero or less, enter -0 If you are filing Form 2555 or Form 2555-EZ,		
		51	86,304.
<b>5</b> 2	see instructions for the amount to enter	52	86,304.
52	Add line 50 and line 51	53	320,446.
	Subtract line 52 from line 49. If zero or less, enter -0-		264,002.
54	Enter the smaller of line 48 or line 53	54	39,600.
	Multiply line 54 by 15% (.15)	55	264,002.
90	Add lines 47 and 54	56	204,002.
	If lines 56 and 36 are the same, skip lines 57 through 61 and go to line 62. Otherwise, go to line 57.		0.
	Subtract line 56 from line 46	57	0.
58	Multiply line 57 by 20% (.20)	58	
	If line 38 is zero or blank, skip lines 59 through 61 and go to line 62. Otherwise, go to line 59.		
59	Add lines 41, 56, and 57	59	
60	Subtract line 59 from line 36	60	
	Multiply line 60 by 25% (.25)	61	CO 0.00
	Add lines 42, 55, 58, and 61	62	69,767.
63	If line 36 is \$182,500 or less (\$91,250 or less if married filing separately), multiply line 36 by 26% (.26).		100 ===
	Otherwise, multiply line 36 by 28% (.28) and subtract \$3,650 ( $$1,825$ if married filing separately) from the result	63	102,758.
64	Enter the <b>smaller</b> of line 62 or line 63 here and on line 31. If you are filing Form 2555 or 2555-EZ, do not enter		<b>.</b>
725	this amount on line 31. Instead, enter it on line 4 of the worksheet in the instructions for line 31	64	69,767.
419	91		Form <b>6251</b> (2014)

11-24-14

Form **6251** (2014)

### ALTERNATIVE MINIMUM TAX

# Foreign Tax Credit (Individual, Estate, or Trust)

► Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

Department of the Treasury Internal Revenue Service (99)

▶ Information about Form 1116 and its separate instructions is at www.irs.gov/form1116.

Name				Identifying number as shown on page 1 of your tax return				
MARK B. DAYTON				***_**_	***			
Use a separate Form 1116 for each category of income listed below amounts in U.S. dollars except where specified in Part II below.	ow. See <b>Categories</b>	of Income in the	e instructions. (	Check only one b	ox on each Fo	m 1116. Report all		
a X Passive category income c Section 90	1(i) income		e Lumi	p-sum distributio	ne			
	ome re-sourced by t	reaty	C Luiii	p sum distributio	113			
f Resident of (name of country)  UNITED STATE								
Note: If you paid taxes to only one foreign country or U.S.	possession, use	column A in Pa	rt I and line A	in Part II. If you	u paid taxes	<sup>to</sup> more than one		
foreign country or U.S. possession, use a separate column								
Part I Taxable Income or Loss From Sources Out		-			-			
		Foreign Coun	_			Total		
	A		В	С	( <i>P</i>	dd cols. A, B, and C.)		
g Enter the name of the foreign country or U.S.	OTHER	<u>_</u>						
possession	COUNTRIE	S						
<b>1a</b> Gross income from sources within country shown above								
and of the type checked above:								
	16.0	00				16 000		
	16,8	02.			1a	16,802.		
<b>b</b> Check if line 1a is compensation for personal services as								
an employee, your total compensation from all sources is								
\$250,000 or more, and you used an alternative basis to	1							
determine its source (see instructions)								
<b>Deductions and losses</b> (Caution: See instructions):								
2 Expenses <b>definitely related</b> to the income on line 1a (attach statement)								
3 Pro rata share of other deductions <b>not definitely related</b> :								
a Certain itemized deductions or standard deduction								
<b>b</b> Other deductions (attach statement)								
c Add lines 3a and 3b								
d Gross foreign source income	16,8							
e Gross income from all sources	380,0							
f Divide line 3d by line 3e	.04	421						
g Multiply line 3c by line 3f								
4 Pro rata share of interest expense:								
a Home mortgage interest (use the Worksheet for								
Home Mortgage Interest in the instructions)								
<b>b</b> Other interest expense								
5 Losses from foreign sources								
<b>6</b> Add lines 2, 3g, 4a, 4b, and 5					6			
7 Subtract line 6 from line 1a. Enter the result here and on line	15, page 2				> 7	16,802.		
Part II Foreign Taxes Paid or Accrued   Credit is claimed								
fortaves	Foreig	n taxes paid o	or accrued	In II C. dalla				
(you must In foreign currency				In U.S. dolla				
check one) (h) X Paid Taxes withheld at source on:	(n) Other	Tayon	withheld at sou	iroo on:	(r) Other	(s)Total foreign		
(h) X Paid Taxes withheld at source on:	foreign taxes paid or	Taxes	Willineiu al Sul	arce on.	foreign taxes paid o	taxes paid or accrued (add cols.		
(i) Accrued (j) Date paid (k) Dividends (I) Rents and royalties (m) Interest royalties	accrued	(0) Dividends	(D) Rents and	(q) Interest	accrued	(o) through (r))		
	accrued (0) Dividends (p) Rents and royalties 3,279.		(4) 1110/651		3,279.			
	+	3,413.		+		3,413.		
A B C	1					<del> </del>		
8 Add lines A through C, column (s). Enter the total here and	l d on line 9 name 2				•	8 3,279.		
LHA For Paperwork Reduction Act Notice, see instru						Form <b>1116</b> (2014)		

\*\*\*-\*\*- Page 2

	art III   Figuring the Credit		•		- " " - " " Faye 2
	Enter the amount from line 8. These are your total foreign taxes paid or accrued				
9	for the category of income checked above Part I	9	3,279.		
	Tot allo datogory or moonto dinomod abover arti	<del>                                     </del>	0,2.00	1	
10	Carryback or carryover (attach detailed computation)	10			
	, , , , , , , , , , , , , , , , , , , ,			1	
11	Add lines 9 and 10	11	3,279.		
				1	
12	Reduction in foreign taxes	12			
13	Taxes reclassified under high tax kickout	13			
	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	 I I		14	3,279.
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the		16 000		
	United States (before adjustments) for the category of income checked above Part I	15	16,802.	4	
	A. II				
	Adjustments to line 15	16		_	
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income.				
	(If the result is zero or less, you have no foreign tax credit for the category of income				
	you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17	16,802.		
10	Individuals: Enter the amount from Form 1040, line 41, or Form 1040NR, line 39.		10,002.	-	
10	Estates and trusts: Enter your taxable income without the deduction for your				
		18	257,454.		
	Caution: If you figured your tax using the lower rates on qualified dividends or capital ga				
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"			19	.06526
	<b>Individuals:</b> Enter the amounts from Form 1040, lines 44 and 46. If you are a nonresident alien, et				
	Form 1040NR, lines 42 and 44. Estates and trusts: Enter the amount from Form 1041, Schedule 0				
	of Form 990-T, lines 36 and 37			20	69,767.
	Caution: If you are completing line 20 for separate category e (lump-sum distributions),				
21	Multiply line 20 by line 19 (maximum amount of credit)			21	4,553.
	Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 three	ough 27	and enter this		
_	amount on line 28. Otherwise, complete the appropriate line in Part IV		<b>&gt;</b>	22	3,279.
	art IV Summary of Credits From Separate Parts III				1
		23		4	
	Credit for taxes on general category income	24		_	
	Credit for taxes on certain income re-sourced by treaty	25		-	
	Credit for taxes on lump-sum distributions	26		-	
27	Add lines 23 through 26			27	3,279.
28	Enter the smaller of line 20 or line 27			28	
29	Reduction of credit for international boycott operations  Subtract line 29 from line 28. This is your <b>foreign tax credit</b> . Enter here and on Form 1040, line 48			29	
30	Form 1040NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a			20	3,279.
_	i orni Totolvin, ilile 40, i orni Toti i, Scriedule d, ilile 2a, Or Forni 990-1, ilile 40a			30	5,213.

Form **1116** (2014)

### SCHEDULE H (Form 1040)

Department of the Treasury Internal Revenue Service (99)

## **Household Employment Taxes**

(For Social Security, Medicare, Withheld Income, and Federal Unemployment (FUTA) Taxes)

► Attach to Form 1040, 1040NR, 1040-SS, or 1041.

▶ Information about Schedule H and its separate instructions is at www.irs.gov/scheduleh.

OMB No. 1545-1971

Name of employer

Social security number \*\*\*\_\*\*

Employer identification number

MAF	K B	• DAYTON	**_****
Caler	dar ye	ar taxpayers having no household employees in 2014 do not have to complete this form for 2014.	
A	,	ou pay <b>any one</b> household employee cash wages of \$1,900 or more in 2014? (If any household employed age 21, your parent, or anyone under age 18, see the line A instructions before you answer this questic	, , , , ,

		,,,		
	X Yes. No.	Skip lines B and C and go to line 1. Go to line B.		
В	Did you with	hold federal income tax during 2014 for any household employee?		
	Yes.	Skip line C and go to line 7. Go to line C.		
С		total cash wages of \$1,000 or more in <b>any</b> calendar <b>quarter</b> of 2013 or 2014 to <b>all</b> household emplont cash wages paid in 2013 or 2014 to your spouse, your child under age 21, or your parent.)	yees?	
	No. Yes.	<b>Stop.</b> Do not file this schedule. Skip lines 1-9 and go to line 10.		
P	art I Socia	al Security, Medicare, and Federal Income Taxes		
1	Total cash wag	ges subject to social security tax		
2	Social security	tax. Multiply line 1 by 12.4% (.124)	2	6,926
3	Total cash wag	ges subject to Medicare tax 3 55,854.		
4	Medicare tax.	Multiply line 3 by 2.9% (.029)	4	1,620
5	Total cash wag	ges subject to Additional Medicare Tax withholding 5		
6	Additional Med	dicare Tax withholding. Multiply line 5 by 0.9% (.009)	6	
7	Federal income	e tax withheld, if any	7	6,203
В	Total social se	ecurity, Medicare, and federal income taxes. Add lines 2, 4, 6, and 7	8	14,749
9		tal cash wages of \$1,000 or more in any calendar quarter of 2013 or 2014 to all household employe cash wages paid in 2013 or 2014 to your spouse, your child under age 21, or your parent.)	es?	

9	, , ,	total cash wages of \$1,000 or more in any calendar quarter of 2013 or 2014 to all household employees? It cash wages paid in 2013 or 2014 to your spouse, your child under age 21, or your parent.)
	☐ No.	Stop. Include the amount from line 8 above on Form 1040, line 60a. If you are not required to file Form 1040, see the

X Yes. Go to line 10.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions. Schedule H (Form 1040) 2014

		arr D. DAI											Page 2
Part II	rederal U	nemployment (	ruia) iax									Vac	No
40 Did				16								Yes	No
		ment contributions									40	X	<del>                                     </del>
see instru	ctions and c	heck "No.")nemployment contri	butions for 2014 by		150 Figgel ve	or filo					10	X	<del>                                     </del>
											11	X	<u> </u>
		e taxable for FUTA t ' <b>Yes"</b> box on <b>all</b> the				ii iax	٠				12		
		<b>No</b> " box on <b>any</b> of t				Secti	on B.						
			···- ····-	Section A									
13 Name of t	he state whe	ere you paid unempl	ovment contribution	ns	<b>&gt;</b>		MN						
		, , ,	,						-				
14 Contribut	ions paid to	our state unemploy	ment fund		14			56					
		ect to FUTA tax							15			7,0	00.
		e 15 by .6% (.006). E											42.
				Section E	3								
17 Complete	all columns	below that apply (if	ou need more spa	ce, see instru	ctions):								
(a)	(b) ble wages (as	State expe	rience rate	(d) State	(e) Multiply col.	(b)	(f)		(g		C0	(h) ntributio	ono
of defin	ed in state act)	per	iod	experience	by .054	(0)	Multiply c by col.		Subtract from co If zero o	ol. (e). `	pa	id to sta	ate
state		From	То	rate					enter		une	fund	iciii
								1 +					
40 Tatala								40					
		a) of line 19						18					
		n) of line 18ect to FUTA tax (see							20				
		% (.060)											
		% (.054)							- 21				
		ne 19 or line 22							_				
		reduction state mus							23				
		e 23 from line 21. Er											
		sehold Employi							•	•			
25 Enter the	amount from	line 8. If you check	ed the "Yes" box or	n line C of pag	ge 1, enter -C	-			25		1	$\overline{4,7}$	49.
26 Add line 1	6 (or line 24)	and line 25							. 26		1	4,7	91.
27 Are you re	equired to file	Form 1040?											
X Yes.	Stop. Includ	e the amount from li	ne 26 above on Fo	rm 1040, line	60a. <b>Do not</b>	comp	lete Part I\	/ below.					
		ve to complete Part											
		nd Signature - on box if mail is not delivered.		only if require	ed. See the li	ne 27	instruction	ıs.	I Ant -		ito no		
Address (Humber a	and Sireet) or F.O	. DOX II Mail is not delivere	to street address						Apt., II	oom, or su	iite iio.		
City, town or post	office state and	7IP code											
ony, town or poor	omoo, otato, and	211 0000											
Under penalties of	neriury I declare	that I have examined this	schedule including accor	mnanving stateme	ents and to the h	est of m	v knowledge :	and helief it	is true cor	rect and	omnlete	No par	t of any
payment made to which preparer has	a state unemploy	ment fund claimed as a cre	edit was, or is to be, dedu	cted from the pay	ments to employ	ees. De	claration of pre	eparer (other	than taxpa	yer) is bas	sed on all	informa	tion of
which preparer has	s any knowledge.												
Employer's s	signature					- 🏓	Date						
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<del></del>	preparer's name	Prenarer's	signature	<del></del>	Date	<u> </u>	Check	if	PTIN			
Paid	Into Type	proparor s riamic	Ti Teparer s	, signature		Date		self- em		' ' ' ' '			
Preparer	Firm's name	e <b>&gt;</b>	ı					Firm's		<u> </u>			
Use Only													
	Firm's addr	ess <b>&gt;</b>						Phone	no.				
		•						1					

Schedule H (Form 1040) 2014

**Net Investment Income Tax -**Individuals, Estates, and Trusts

► Attach to your tax return.

OMB No. 1545-2227

Attachment Sequence No. **72** 

Department of the Treasury Internal Revenue Service (99)

▶ Information about Form 8960 and its separate instructions is at www.irs.gov/form8960.

	s) shown on your tax return  K B DAYTON				You		curity number or EIN * * _ * * * *
Part		Section 6013(g) election (see in	structions)				
		Section 6013(h) election (see in					
		Regulations section 1.1411-10(	,	ee instr	ructions)		
1	Taxable interest (see instructions)					1	219.
2		าร)					65,318.
3							<u> </u>
4a	Rental real estate, royalties, partne			I			
	, , , , , , ,			4a			
b	Adjustment for net income or loss						
-	•	ess (see instructions)		4b			
С						4c	
5a		f property (see instructions)		5a	198,68		
b	Net gain or loss from disposition o		·····		· · · · · · · · · · · · · · · · · · ·		
	_	structions)		5b			
С	Adjustment from disposition of pa		·····				
_	-			5c			
d						5d	198,684.
6	0	e for certain CFCs and PFICs (see ins					<u> </u>
7	Other modifications to investment	income (see instructions)	SEE	STA	TEMENT 5	7	-104,120.
8	Total investment income. Combine	e lines 1, 2, 3, 4c, 5d, 6, and 7				8	160,101.
Part		Allocable to Investment Inc					-
9a	Investment interest expenses (see			9a			
b	·	x (see instructions)		9b	12,90	8.	
С		es (see instructions)		9c	1,85	8.	
d		,			-	9d	14,766.
10		uctions)					
11		s. Add lines 9d and 10					14,766.
Part	III Tax Computation						
12		Part II, line 11 from Part I, line 8. Indivi	iduals comple	ete line	s 13-		
		nes 18a-21. If zero or less, enter -0-	=			12	145,335.
	Individuals:						
13	Modified adjusted gross income (s	ee instructions)		13	380,03	0.	
14		ee instructions)		14	200,00	0.	
15		o or less, enter -0-		15	180,03	0.	
16		15				16	145,335.
17	Net investment income tax for indi	viduals. Multiply line 16 by 3.8% (.038	B). <b>Enter here</b>	and			
	include on your tax return (see in	structions)				17	5,523.
	Estates and Trusts:						
18a	Net investment income (line 12 ab	ove)		18a			
b	Deductions for distributions of net						
	deductions under section 642(c) (s	see instructions)		18b			
С		me. Subtract line 18b from 18a (see					
	instructions). If zero or less, enter-	0-		18c			
19a	Adjusted gross income (see instru			19a			
b	Highest tax bracket for estates an	d trusts for the year (see					
	instructions)			19b			
С		zero or less, enter -0		19c			
20	Enter the smaller of line 18c or line	19c				20	
21	Net investment income tax for esta	ates and trusts. Multiply line 20 by 3.8	3% (.038). <b>En</b> t	ter her	е		
	and include on your tax return (s	ee instructions)		<u></u>		21	

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form **8960** (2014)

Par	t I - Application of Section 67 to Deductions Prope	rly Allocable	to Investment In	ncom	е		
1.	Enter the amount of Miscellaneous Itemized Deductions	s properly					
allocable to investment income before any itemized deduction limitations							
	(Description and Form 8960 line number where they will	be reported):					
	Description	<u>Line</u>	Amount				
	(a) INVESTMENT, TAX &						
	(b) ACCOUNT SERVICES	9C	9,459.				
2.	Enter the total of all items listed in line 1			2.	9,459.		
3.	Enter the amount of all Miscellaneous Itemized Deduction	ons after the					
	application of the section 67 limitation (Schedule A (For	m 1040),			4 050		
	line 27)						1 050
4.	Enter the lesser of the total reported on line 2 or line 3 $_{\mbox{\tiny}}$					4.	1,858.
Par	t II - Application of Section 67 Limitation to Specific	c Deductions					
					(B)		
					(B)  IF line 3 is less than		
					line 2, <b>THEN</b> divide		
					line 3 by line 2 <b>AND</b>		
					enter the amount in		
					column (B).		
					IF amounts reported		(C)
					on Part I, lines 2 and		Multiply the individual amounts
					4 are equal, <b>THEN</b>		in column (A) by the
	(A)				enter 1.00 in column		amount in column
	Reenter the amounts and descriptions	from Part I, lin	e 1.		(B).		(B).
	Description	Line	Amount				
	(a) INVESTMENT, TAX &			Χ		=	
	(b) ACCOUNT SERVICES	9C	9,459.	Χ	.1964	=	1,858.
_	Individuals - Use the amounts in column (C) on Pa	art III line 1 to	determine the ar	noun	t of these deductions th	at ar	-
Т	allowable after the application of the section 68 lin	nitation.	determine the an	noun	t of these deductions th	at ar	<del>-</del>
•	Estates or trusts - Enter the amounts in column (0		priate location on	lines	9 and 10. Do not come	lete l	Parts
	III or IV of this worksheet.	o, the appro	chate location on	103	c and ro. Bo not comp		arto.

423251 01-09-15

Keep for Your Records

cont	nued					Keep for Your Records
Par	III - Application of Section 68 to deductions pro	perly allo	cable to investment in	ncome (li	ndividuals Only)	
	Enter the amount of Miscellaneous Itemized Deduction	one properl	v allocable to	-		
"	investment income from column (C) of Part II:	ons propen	y allocable to			
	Description	Line	Amount			
	(a) INVESTMENT, TAX &	LIIIE	Amount			
	(b) ACCOUNT SERVICES	9C	1,858.			
2.	Enter the amount of state, local, and foreign income					
-	allocable to investment income			2.	12,908.	
3.	Enter the amounts of other Itemized Deductions sub	ect to the s	section 68 limitation		<u> </u>	
	and properly allocable to investment income before a	any itemizeo	d deduction			
	limitations (Description and Form 8960 line number):					
	Description	Line	Amount			
	(a)					
	(b)					
4.	Enter the total deductions properly allocable to inves			on 68 limit	ation. Enter	
	the sum of lines 1 through 3					414,766.
5.	Enter the amount of total itemized deductions report		,			
	line 40			5	29,724.	
6.	Enter all other itemized deductions allowed but not s					
	deduction limitation:					
	(a) Investment Interest Expense	<u></u>				
	(b) Casualty Losses (other than losses described in					
	section 165(c)(1))	<u></u>				
	(c) Medical Expenses					
	(d) Gambling Losses	<u></u>				
	(e) Total of lines 6(a) through 6(d)			6e		
	Subtract line 6e from line 5					
8.	Enter the lesser of line 7 or line 4					8. 14,766.
	This is the amount of itemized deductions that	are nronerli	v allocable to investmen	t income .	after the application	of the sections 67
T	and 68 deduction limitations. Use Part IV of this					
	on Form 8960, lines 9 and 10.					
Par	IV - Reconciliation of Schedule A Deductions to	Form 89	60, lines 9 and 10 (Inc	dividuals	Only)	
					(B)	
				<b>IF</b> P	art III, line 8 is less	
					an Part III, line 4,	(0)
					EN divide line 8 by 4 AND enter the	<b>(C)</b> Multiply the individual
					ount in column (B).	amounts in column
					F the amounts	(A) by the amount in
					orted on Part III,	column (B). Enter
	(4)			lir	nes 4 and 8 are	these amounts in the
	(A)  Reenter the amounts and descriptions	from Part I	II lings 1 2		ual, <b>THEN</b> enter	appropriate location
	<u> </u>		11, 1111e5 1 - 3.	1.0	00 in column (B).	on lines 9 and 10.
I	cellaneous Itemized Deductions properly allocable	το				
inve	stment income:	Lina	Amount			
.	Description (a) INVESTMENT, TAX &	<u>Line</u>	<u>Amount</u>	v		_
1.	(b) ACCOUNT SERVICES	9C	1 858	· —	1.0000	_ 1 858
2	Otata land and familia in a sure tarra		12 908	· —	1.0000	1,858. 12,908.
	ized Deductions Subject to Section 68 included or			^		
	nzed Deductions Subject to Section 66 included or Part III:	ı Lille				
ı o ur						
1	(2)			Υ		_
1	(a)(b)			× —		=

# **Net Investment Income Tax - Individuals, Estates, and Trusts**

2014

### MINNESOTA

Name MAF	e(s) LK B DAYTON		Y		ecurity number or EIN _ * * _ * * * *
Par	t I Investment Income Section 6013(g) election				
	Regulations section 1.1411-10(g) election				
1	Taxable interest (Form 1040, line 8a; or Form 1041, line 1)				219.
2	Ordinary dividends (Form 1040, line 9a; or Form 1041, line 2a)			2	65,318.
3	Annuities from nonqualified plans			3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts,				
	etc. (Form 1040, line 17; or Form 1041, line 5)	4a			
b	Adjustment for net income or loss derived in the ordinary course of				
	a non-section 1411 trade or business	4b			
С	Combine lines 4a and 4b			4c	
5a	Net gain or loss from disposition of property from Form 1040,				
	combine lines 13 and 14; or from Form 1041, combine lines 4 and 7	5a	198,6	84.	
b	Net gain or loss from disposition of property that is not subject to				
	net investment income tax	5b			
С	Adjustment from disposition of partnership interest or S corporation				
	stock	5c			
d	Combine lines 5a through 5c			5d	198,684.
6	Changes in investment income for certain CFCs and PFICs				
7	Other modifications to investment income			7	-104,120.
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7			8	160,101.
Par	t II State Income Tax Pro-ration for 2014 Income Tax Paymen	ts			
9	State total income			9	380,030.
10	State income tax payments for 2014 SE	E ST	ATEMENT	6 10	24,236.
11	2014 state income tax payments attributable to investment income, line 8 divided by	y line 9 t	imes line 10	11	10,210.
Par	t III State Income Tax Pro-ration for 2013 Estimate Payments	Made i	n 2014		
12	State estimate payments for 2013			12	2,200.
13	Percent of state income taxes attributable to investment income for 2013				.364361
14	2013 state estimate payments attributable to investment income. Line 12 times line				802.
Par	t IV State Income Tax Pro-ration for Balance of Prior Years Ta	x Plus	Extension P	ayments	Paid in 2014
15	Balance of prior years tax plus extension payments paid in 2014			15	5,205.
16	Percent of state income taxes attributable to investment income for 2013				.364361
17	Balance of prior years tax and extension payments attributable to investment incor				1,896.
Par					
18	Reduction of state tax deduction			18	( )
19	Percent of state income taxes attributable to investment income for 2013				.364361
20	Reduction of state tax deduction attributable to investment income. Line 18 times				( )
Par	t VI Total State Income Tax Payments Attributable to Investme				,
21	Combine lines 11, 14, 17 and 20. Carry to Form 8960, Line 9 Worksheet, Part III, lin			21	12,908.
<u> </u>	, , , , , , , , , , , , , , , , , , , ,			– - 1	

Form **8960** (2014)

Form 1116	U.S. and Foreign Source Income Summary		
NAME MARK B. DAYTON			***_**_***
MARK B. DAITON			FOREIGN
INCOME TYPE	TOTAL	U.S.	PASSIVE
Compensation	115,809.	115,809.	
Dividends/Distributions	65,318.	65,318.	
Interest	219.	219.	
Capital Gains	198,684.	198,684.	
Business/Profession			
Rent/Royalty			
State/Local Refunds			
Partnership/S Corporation			
Trust/Estate			
Other Income		-16,802.	16,802
Gross Income	380,030.	363,228.	16,802
	-		
Less:			
Section 911 Exclusion			
Capital Losses			
Capital Gains Tax Adjustment	200 020	262 220	16 000
Total Income - Form 1116	380,030.	363,228.	16,802.
Deductions:			
Business/Profession Expenses			
Rent/Royalty Expenses			
Partnership/S Corporation Losses			
Trust/Estate Losses			
Capital Losses			
Non-capital Losses			
Individual Retirement Account			
Moving Expenses			
Self-employment Tax Deduction			
Self-employment Health Insurance			
Keogh Contributions			
Alimony			
Forfeited Interest			
Foreign Housing Deduction			
Other Adjustments			
Capital Gains Tax Adjustment			
Total Deductions			
Adjusted Gross Income	380,030.	363,228.	16,802.
Less Itemized Deductions:			
Specifically Allocated			
Home Mortgage Interest			
Other Interest			
Ratably Allocated	29,724.	28,410. 28,410.	1,314 1,314
Total Adjustments to Adjusted Gross Income	29,724.	28,410.	1,314.
Taxable Income Before Exemptions	350,306.	334,818.	15,488

### **Allocation of Itemized Deductions**

NAME

MARK B. DAYTON \*\*\*\_\*\*\*

	Total Itemized	Itemized Deductions After Sec. 68		Form 1116		
	Deductions	Reduction	Specifically U.S.	Specifically Foreign	Ratable	
Taxes	31,641.	28,075.			28,075.	
Interest - Not Including Investment Interest						
Contributions						
Miscellaneous Deductions Subject to 2%	1,858.	1,649.			1,649.	
Other Miscellaneous Deductions - Not Including Gambling Losses						
Foreign Adjustment						
Total Itemized Deductions Subject to Sec. 68	33,499.	29,724.				
Add Itemized Deductions Not Subject to Sec. 68:						
Medical/Dental						
Investment Interest						
Casualty Losses						
Gambling Losses						
Foreign Adjustment						
Total Itemized Deductions	33,499.					
Total Allowed on Schedule A		29,724.			29,724.	

### Foreign Tax Credit Carryover Statement (Page 1 of 2)

NAME

### MARK B. DAYTON

\*\*\*\_\*\*

### Foreign Income Category

## PASSIVE INCOME

Regu	lar	2009	2010	2011	2012	2013	2014
1.	Foreign tax paid/accrued						3,279.
2.	FTC carryback to 2014						
	for amended returns						
3.	Reduction in foreign						
	taxes						
4.	Foreign tax available						3,279.
5.	Maximum credit allowable						4,742.
6.	Unused foreign tax ( + )						
	or excess of limit ( - )						-1,463.
7.	Foreign tax carryback						
8.	Foreign tax carryforward						
9.	Foreign tax or excess						_
	limit remaining						-1,463.
	Total foreign taxes from all	available years to be ca	rried to next year				

		2004	2005	2006	2007	2008
1.	Foreign tax paid/accrued					
2.	FTC carryback to 2014					
	for amended returns					
3.	Reduction in foreign					
	taxes					
4.	Foreign tax available					
5.	Maximum credit allowable					
6.	Unused foreign tax ( + )					
	or excess of limit ( - )					
7.	Foreign tax carryback					
8.	Foreign tax carryforward					
	Foreign tax or excess					
	limit remaining					

### Foreign Tax Credit Carryover Statement (Page 2 of 2)

NAME

### MARK B. DAYTON

\*\*\*\_\*\*\*

### Foreign Income Category

PASSIVE	INCOME
---------	--------

AMT		2009	2010	2011	2012	2013	2014
1.	Foreign tax paid/accrued						3,279.
2.	FTC carryback to 2014						
	for amended returns						
3.	Reduction in foreign						
	taxes						
4.	Foreign tax available						3,279.
5.	Maximum credit allowable						4,553.
6.	Unused foreign tax ( + )						
	or excess of limit ( - )						-1,274.
7.	Foreign tax carryback						
8.	Foreign tax carryforward						
9.	Foreign tax or excess						
	limit remaining						-1,274.
	Total foreign taxes from all	available years to be ca	rried to next year		_		

		2004	2005	2006	2007	2008
1.	Foreign tax paid/accrued					
2.	FTC carryback to 2014					
	for amended returns					
3.	Reduction in foreign					
	taxes					
4.	Foreign tax available					
5.	Maximum credit allowable					
	Unused foreign tax ( + )					
	or excess of limit ( - )					
7.	Foreign tax carryback					
	Foreign tax carryforward					
	Foreign tax or excess					
	limit remaining					

FORM 1040	QUALIFIED DIVIDEND	S	STATEME	INT	1
NAME OF PAYER		ORDINARY DIVIDENDS	QUALI DIVII		
FROM K-1 - BRUCE B DAYTON 2004	CRUT	65,318.	6	55,31	.8.
TOTAL INCLUDED IN FORM 1040, L	INE 9B	_	6	55,31	.8.
	NG-TERM GAIN OR LOS S CORPORATIONS, AN		STATEME	NT	2
DESCRIPTION OF ACTIVITY		GAIN OR LOSS	28%	GAIN	1
BRUCE B DAYTON 2004 CRUT		198,684.			
TOTAL TO SCHEDULE D, PART II,	LINE 12	198,684.			

FORM	WORLDWIDE CAPITAL GAINS WORKSHEET FOR LINE 18	STATEMENT 3
1	ENTER THE AMOUNT FROM FORM 1040, LINE 41. IF YOU ARE A NONRESIDENT ALIEN, ENTER THE AMOUNT FROM FORM 1040NR, LINE 39	350,306.
2	ENTER WORLDWIDE 28% GAINS	
3	MULTIPLY LINE 2 BY 0.2929	
4	ENTER WORLDWIDE 25% GAINS	
5	MULTIPLY LINE 4 BY 0.3687	
6	ENTER WORLDWIDE 20% GAINS AND QUALIFIED DIVIDENDS	
7	MULTIPLY LINE 6 BY 0.4949	
8	ENTER WORLDWIDE 15% GAINS AND QUALIFIED DIVIDENDS 264,00	02.
9	MULTIPLY LINE 8 BY 0.6212 163,99	98.
10	ENTER WORLDWIDE 0% GAINS AND QUALIFIED DIVIDENDS	
11	ADD LINES 3, 5, 7, 9 AND 10	163,998.
12	SUBTRACT LINE 11 FROM LINE 1. ENTER THE RESULT HERE AND ON FORM 1116, LINE 18	186,308.

FOR	M 1116	ALTERNATIVE MINIMUM TAX FORE: WORLDWIDE CAPITAL ( WORKSHEET FOR LIN	GAINS	STATEMENT	4
1	ENTER THE A	MOUNT FROM FORM 6251, LINE 28		380,0	30.
2	ENTER WORLD	VIDE 25% GAINS			
3	MULTIPLY LI	NE 2 BY 0.1071			
4		VIDE 20% GAINS ED DIVIDENDS			
5	MULTIPLY LI	NE 4 BY 0.2857			
6		VIDE 15% GAINS ED DIVIDENDS	264,002.		
7	MULTIPLY LI	NE 6 BY 0.4643	122,576.		
8	ENTER WORLD	VIDE 0% GAINS ED DIVIDENDS			
9	ADD LINES 3	5, 7 AND 8		122,5	76.
10		NE 9 FROM LINE 1. ENTER THE AND ON FORM 1116 AMT, LINE 18		257,4!	54.
FOR:	м 8960	OTHER MODIFICATIONS TO IN	VESTMENT INCOME	STATEMENT	5
BRU	CE B DAYTON 2	2004 CRUT		-104,12	20.
AMO <sup>°</sup>	UNT TO FORM 8	3960, LINE 7		-104,12	20.
FOR	м 8960	STATE INCOME TAX PA	AYMENTS	STATEMENT	6
MIN	NESOTA				
DES	CRIPTION			AMOUNT	
MIN MIN	NESOTA 2ND QU	OTA JARTER ESTIMATE PAYMENT JARTER ESTIMATE PAYMENT JARTER ESTIMATE PAYMENT		7,53 8,30 2,90 5,50	00.

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

		MARK B			D	AYTON			******
an	lace n X if a preign								
	ddress:		ГН ST., 18(	)	ים כי	ENTED			01261947
			-	, O II	)5 C.	ENIEK			
		MINNEAPO	DLIS				MN	5540	02
		4 Federal g Status X	(1) Single	(2) N	1arried f	filing joint	(3) Married filin	a separat	e:
		e an X in	(4) Head of			9,1	Enter spouse's	•	
		box):	household			ng widow(er)	Social Security	y number	here
		Elections Campa ant \$5 to go to help cand	•		-	and Code Nu 11	<b>ımber:</b> Grassroots	14	
		campaign expenses, you number for the party of	f your choice. This				ibertarian		
wil		ncrease your tax or redu	uce your refund.  Return (for line refere	•			General Campaign Fund	l 99	
		Vages, salaries, tip	•			and annuities		ent:	<b>D</b> Federal adjusted gross income:
		115809	9						380030
0	4	Federal tayable	income (from line	12 of f	odoral	Form 1040			
₹	'		,			,		1 ■	350306
e B.	2		ax or sales tax add					_	21974
ne du oldin	3		1040, complete th to income, includin				ions STMT 2	2 2 ■	21974
Sch	Ū		tions, non-Minnesot	-					
close ota w		activities deduct	ion (see instruction	s; enclo	se Sch	hedule M1M	)	3 ■	
Do not send W-2s. Enclose Schedule M1W to claim Minnesota withholding.	4	Add lines 1 throu	ugh 3 <i>(if a negative</i>	number,	, place	an X in the	oval box)	4	372280
send W claim N	5	State income tax	x refund from line 1	0 of fed	deral Fo	orm 1040		5 ■	
nots	6		,				nds from U.S. bonds		
°		or K-12 education	on expenses (see II	nstructio	ns; enc	ciose Schedi	ule M1M)	6 ■	
	7	Total subtraction	ns. Add lines 5 and	6				7	
	8	Minnesota taxab	ole income. Subtrac	t line 7	from lin	ne 4. If zero o	or less, leave blank	8	372280
	9	Tax from the tab	ole in the M1 instru	ctions				9	32551
	10	Alternative minim	num tax <i>(enclose</i> S	Schedule	• M1M	T)		10 🔳	
	11	Add lines 9 and	10					11	32551
	12	=	s: Enter the amount f			•			
		•	ts and nonresidents: It is and from the same same same same same same same sam			,	e tax from line 27 on Schedule M1NR)	12	32551
	а.	, 2.	,	b.		•	, ··		
	13	Tax on lump-sur	m distribution (encl	ose Sch	edule N	M1LS)		13 🔳	
_	14	Tax before credit	ts. Add lines 12 and	13				14	32551

2014 M1, page 2

15	Tax before credits.	Amount from line 14	15	32551
		oint return when both spouses have taxable ea		
		nt income (enclose Schedule M1MA)		
		, , , , , , , , , , , , , , , , , , , ,		
17	Other nonrefundable	e credits (enclose Schedule M1C)	17 🔳	
18	Total nonrefundable	credits. Add lines 16 and 17	18	
				32551
19		m line 15 (if result is zero or less, leave blank)	19	32331
20	•	und contribution (see instructions, page 15)	_	
	This will reduce you	r refund or increase amount owed	20 ■	
				32551
		)		32331
22		tax withheld. Complete and enclose Schedule M		7526
	Minnesota withholding	ng from W-2, 1099 and W-2G forms (do not send)	22	7536
			_	21000
23		d tax and extension payments made for 2014	23 ■	21800
24	Child and Depender	nt Care Credit (enclose Schedule		
	M1CD). Enter numb	per of qualifying persons here:	<b>24</b>	
25	Minnesota Working	Family Credit (enclose Schedule		
	M1WFC). Enter num	nber of qualifying children here:	<b>25</b>	
26	K-12 Education Cre	edit (enclose Schedule M1ED).		
	Enter number of qu	alifying children here:	<b>26</b>	
27	Reading Credit (end	close Schedule M1READ)		
	Enter number of qu	alifying children here:	<b>27 ■</b>	
	·	, ,		
28	Business and inves	tment credits (enclose Schedule M1B)	28 ■	
29	Total payments. Add	d lines 22 through 28	29	29336
30	<b>REFUND.</b> If line 29	is more than line 21, subtract line 21 from line	29	
	(see instructions). For	or direct deposit, complete line 31	30	
31	Direct deposit of yo	ur refund (you must use an account not associated	d with a foreign bank):	
	Checking	Savings		
32	AMOUNT YOU OW!	E. If line 21 is more than line 29, subtract		
OZ.		1 (see instructions)	32 ■	3215
22		m Schedule M15 (see instructions). Also subtractions		
33		ne 30 or add it to line 32 (enclose Schedule M1)		
IF V		TAX and want part of your refund credited to estimated tax, com		
			<u> </u>	
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 ■	
	7	, year many approar to year 2010 commutes tax		
		rrect and complete to the best of my knowledge and belie		D-+-
Your	signature	Date	Paid preparer's signature	Date
	-1	<del>-</del>	LORI HUME	
Spous	se's signature (if filing jointly)		Preparer's daytime phone	
		6123397151	9525483400	P01263847
Inc	lude a copy of your 2	2014 federal return and schedules.		
		ividual Income Tax	I authorize the Minnesota Department of	
·via	St. Paul, MN 5		Revenue to discuss this return with my	I do not want my paid preparer
To 4	ŕ	your refund, visit www.revenue.state.mn.us	·	to file my return electronically.
10 (	oncon on the status of	odi Torana, visit www.cvenue.state.iiii.us	paid preparer or the third-party designee	to me my return electronically.
	459002	1116	indicated on my federal return.	

459002 10-27-14

7536

### Schedule M1W, Minnesota Income Tax Withheld 2014

Sequence #2

Complete	this	schedule	tο	report	Minnesota	income	tax	withheld	Include	this	schedule	when	VOL	file v	/OLI	return
COMPLETE	เบเเง	Scriedule	w	ICDUIL	will li lesota		ıan	with in lold.	IIICIUUC	นเมอ	Scriedule	WILCII	y O U	1110	<i>y</i> Oui	i Ctui i i.

MARK B DAYTON \*\*\*\*\*\*\*

If you received a W-2, 1099, W-2G, Schedule KPI, KS or KF that shows Minnesota income tax was withheld, complete this schedule to determine line 22 of Form M1. List only the forms that report Minnesota income tax withheld. Round dollar amounts to the nearest whole dollar. You must include this schedule when you file your return. **DO NOT** send in your W-2, 1099 or W-2G forms; keep them with your tax records. All instructions are included on this schedule.

1 Minnesota wages and tax withheld from W-2s, other than from W-2G. If you have more than five W-2s, complete line 5 on page 2.

<b>A</b> If the W-2 is for:	<b>B - Box 13</b> If Retirement Plan	C - Box 15 Employer's 7-digit Minnesota	<b>D - Box 16</b> State wages, tips, etc.	E - Box 17 Minnesota tax withheld				
<ul><li>you, enter 1</li><li>spouse, enter 2</li></ul>	box is checked, mark an X below.	state tax ID number	(round to nearest whole dollar)	(round to nearest whole dollar)				
1	X	900001	115809	7536				

Subtotal for additional W-2s (notifiline 3 on page 2)	
<u>_</u>	7526
Total Minnesota tax withheld from all W-2 forms (add amounts in line 1, column E)	/536

- 2 Minnesota tax withheld from 1099 and W-2G forms. If you have more than four forms, complete line 6 on page 2.
  - A B C D

    If the 1099 or W-2G is for: Payer's 7-digit Minnesota state tax ID Income amount (see the table on you, enter 1 number (if unknown, contact the payer) page 2 for amounts to include) (round to nearest whole dollar)
  - spouse, enter 2

Include this schedule with your Form M1.
If required, include Schedules KPI, KS and/or KF.

459111 10-27-14

# Schedule KF, Beneficiary's Share of Minnesota Taxable Income 2014

Fiduciary: Complete and provide Schedule KF to each nonresident beneficiary with Minnesota source income and any Minnesota beneficiary who has adjustments to income.

	Tax year beginning0101_, 2014 and ending12312014	Amended KF: $\Box$
tion	Beneficiary's Social Security number  *******  Estate's or trust's federal  *******	ID number Minnesota tax ID number 9999999
Filing Information	Beneficiary's name MARK B DAYTON Estate's or trust's name BRUCE B DAYTON	JOBZ ID number (if any)
Filing I	Address of beneficiary 80 S. 8TH ST., 1800 IDS CENTER  Address of fiduciary PO BOX 64713	3, TRUST TAX SERVICES
	State ZIP code ST. PAUL  MINNEAPOLIS MN 55402-4523	State ZIP code MN 55164-0713
	Calculate lines 1-22 the same for all resident and nonresident beneficiaries. Calculate lines 23-29 for nonresident beneficiaries only. Round amounts to the nearest whole dollars	or.
	Additions to income	ar. Beneficiary: Include on:
	1 State and municipal bond interest from outside Minnesota	Line 3, Schedule M1M
	_	Line 7, Schedule M1M
	3 Expenses deducted that are attributable to income not taxed by Minnesota (other than interest or mutual fund dividends from U.S. bonds)	Line 9, Schedule M1M
	4 80 percent of the suspended loss from 2001 - 2005 or 2008 - 2013 that was generated by bonus depreciation	See inst for line 11, M1M
	5 80 percent of federal bonus depreciation addition 5	Line 5, Schedule M1M
	6 Fines, fees and penalties deducted federally as a trade or business expense 6	Line 10, Schedule M1M
S	·	
iarie	8 Net operating loss (NOL) carryover adjustment	Line 13, Schedule M1M
All Beneficiaries	9 Domestic production activities deduction	Line 8, Schedule M1M
₹	Subtractions from income	
	10 Interest on U.S. government bond obligations, minus any expenses deducted on the federal return that are attributable to this income 10	Line 16, Schedule M1M
	11 State income tax refund	Line 5, Form M1
	12 Federal bonus depreciation subtraction	Line 19, Schedule M1M
	Subtraction for prior addback of reacquisition of business indebtedness income included in federal taxable income	Line 34, Schedule M1M
	14 Subtraction for railroad maintenance expenses	Line 35, Schedule M1M
	15 Job Opportunity Building Zone (JOBZ) business and investment income exemptions	Line 30, Schedule M1M
	16 This line intentionally left blank	
	16b	
	17 Net operating loss (NOL) carryover adjustment	Line 33, Schedule M1M

(continued)

# 2014 KF, page 2

	Cre	dits (you must enclose this schedule with your Form M1 if claiming a cre	dit) I	nclude on:	
<u>es</u>	18	Any Minnesota income tax withholding credit received by the fiduciary	18		_ Line 7, Schedule M1W
ciar t.)	19	JOBZ jobs credit	19		_ Line 3, Form M1B
eneficia (cont.)	20	Credit for increasing research activities	20		_ Line 3, Form M1C
All Beneficiaries (cont.)	21	Greater Minnesota internship credit	21		Line 4, Form M1B
₹	22	Credit for historic structure rehabilitation (enclose certificate)	22		_ Line 2, Form M1B
		resident beneficiaries nesota portion of amounts from federal Schedule K-1 (1041)			Include on Schedule M1NR, column B on:
	23	Capital gain or loss on Minnesota real property	23		Line 4
	24	a Business income or loss a			
		<b>b</b> Income from Minnesota rents, royalties, partnerships, S corporations, estates and trusts <b>b</b>			
Only Daly		c Farm income or lossc			
iden ies (		Total (add lines 24a, 24b and 24c)	24		_ Line 6
Nonresident Beneficiaries Only	25	Interest and dividend income derived from a trade or business (S corporations and partnerships) that is assignable to Minnesota	25	<b>I</b>	Line 2
Be	26	Other income	26		Line 8
	27	Minnesota source gross income from this fiduciary	27		information only (see inst.)
	Con	nposite income tax for electing nonresident beneficiaries			
	28	Minnesota source distributive income from this fiduciary	28		information only
	29	Minnesota composite income tax paid by fiduciary.  If the beneficiary elected composite income tax, check this box	29		_ composite income tax

Fiduciary: Enclose this schedule and copies of all Schedules KF and federal Schedules K-1 with your Form M2. Beneficiary: See instructions. Include this schedule when you file your Form M1.

MN M1 STATE INCOME TAX OR SALES TAX	STATEMENT 2
DESCRIPTION	AMOUNT
1. TOTAL ITEMIZED DEDUCTIONS FROM FEDERAL SCHEDULE A, LINE 29 2. TABLE AMOUNT	29,724. 7,750.
3. SUBTRACT STEP 2 FROM STEP 1 4. STATE INCOME OR SALES TAX FROM FEDERAL SCHEDULE A, LINE 5	21,974. 31,641.
5. SMALLER OF STEP 3 OR STEP 4 TO FORM M1, PAGE 1, LINE 2	21,974.