

For the year Jan. 1-Dec. 31, 2013, or other tax year beginning

, 2013, ending

, 20

See separate instructions.

Your first name and initial

Last name

MARK B.

DAYTON

Your social security number

If a joint return, spouse's first name and initial

Last name

Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions.

80 S. 8TH ST., 1800 IDS CENTER

Apt. no.

Make sure the SSN(s) above and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below.

MINNEAPOLIS, MN 55402-4523

Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.

Foreign country name

Foreign province/state/county

Foreign postal code

You Spouse

Filing Status

1 [X] Single

2 [] Married filing jointly (even if only one had income)

3 [] Married filing separately. Enter spouse's SSN above and full name here.

4 [] Head of household (with qualifying person). If the qualifying person is a child but not your dependent, enter this child's name here.

5 [] Qualifying widow(er) with dependent child

Exemptions

6a [X] Yourself. If someone can claim you as a dependent, do not check box 6a

b [] Spouse

Boxes checked on 6a and 6b 1

c Dependents:

(1) First name

Last name

(2) Dependent's social security number

(3) Dependent's relationship to you

(4) If child under age 17 qualifying for child tax credit

No. of children on 6c who:

lived with you did not live with you due to divorce or separation (see instructions)

If more than four dependents, see instructions and check here

Dependents on 6c not entered above

Add numbers on lines above 1

d Total number of exemptions claimed

Income

7 Wages, salaries, tips, etc. Attach Form(s) W-2

7

116,092.

8a Taxable interest. Attach Schedule B if required

8a

42.

b Tax-exempt interest. Do not include on line 8a

8b

9a Ordinary dividends. Attach Schedule B if required

9a

73,062.

b Qualified dividends

9b

72,064.

10 Taxable refunds, credits, or offsets of state and local income taxes

10

0.

11 Alimony received

11

12 Business income or (loss). Attach Schedule C or C-EZ

12

13 Capital gain or (loss). Attach Schedule D if required. If not required, check here

13

163,405.

14 Other gains or (losses). Attach Form 4797

14

15a IRA distributions

15a

b Taxable amount

15b

16a Pensions and annuities

16a

b Taxable amount

16b

17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E

17

0.

18 Farm income or (loss). Attach Schedule F

18

19 Unemployment compensation

19

20a Social security benefits

20a

b Taxable amount

20b

21 Other income. List type and amount

21

22 Combine the amounts in the far right column for lines 7 through 21. This is your total income

22

352,601.

Adjusted Gross Income

23 Educator expenses

23

24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ

24

25 Health savings account deduction. Attach Form 8889

25

26 Moving expenses. Attach Form 3903

26

27 Deductible part of self-employment tax. Attach Schedule SE

27

28 Self-employed SEP, SIMPLE, and qualified plans

28

29 Self-employed health insurance deduction

29

30 Penalty on early withdrawal of savings

30

31a Alimony paid b Recipient's SSN

31a

32 IRA deduction

32

33 Student loan interest deduction

33

34 Tuition and fees. Attach Form 8917

34

35 Domestic production activities deduction. Attach Form 8903

35

36 Add lines 23 through 35

36

37 Subtract line 36 from line 22. This is your adjusted gross income

37

352,601.

Tax and Credits

38 Amount from line 37 (adjusted gross income) 38 352,601.

39a Check You were born before January 2, 1949, Blind. Total boxes checked 39a 1
 if: Spouse was born before January 2, 1949, Blind. checked 39b

b If your spouse itemizes on a separate return or you were a dual-status alien, check here 39b

40 Itemized deductions (from Schedule A) or your standard deduction (see left margin) 40 36,631.

41 Subtract line 40 from line 38 41 315,970.

42 Exemptions. If line 38 is \$150,000 or less, multiply \$3,900 by the number on line 6d. Otherwise, see inst. 42 624.

43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- 43 315,346.

44 Tax. Check if any from: a Form(s) 8814 b Form 4972 c 44 51,218.

45 Alternative minimum tax. Attach Form 6251 45 11,956.

46 Add lines 44 and 45 46 63,174.

47 Foreign tax credit. Attach Form 1116 if required 47

48 Credit for child and dependent care expenses. Attach Form 2441 48

49 Education credits from Form 8863, line 19 49

50 Retirement savings contributions credit. Attach Form 8880 50

51 Child tax credit. Attach Schedule 8812, if required 51

52 Residential energy credits. Attach Form 5695 52

53 Other credits from Form: a 3800 b 8801 c 53

54 Add lines 47 through 53. These are your total credits 54

55 Subtract line 54 from line 46. If line 54 is more than line 46, enter -0- 55 63,174.

Other Taxes

56 Self-employment tax. Attach Schedule SE 56

57 Unreported social security and Medicare tax from Form: a 4137, b 8919 57

58 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required 58

59a Household employment taxes from Schedule H 59a 8,474.

b First-time homebuyer credit repayment. Attach Form 5405 if required 59b

60 Taxes from: a Form 8959 b Form 8960 c Inst.; enter code(s) 60 4,360.

61 Add lines 55 through 60. This is your total tax 61 76,008.

Payments

62 Federal income tax withheld from Forms W-2 and 1099 62 24,091.

63 2013 estimated tax payments and amount applied from 2012 return 63 45,487.

64a Earned income credit (EIC) 64a

b Nontaxable combat pay election 64b

65 Additional child tax credit. Attach Schedule 8812 65

66 American opportunity credit from Form 8863, line 8 66

67 Reserved 67

68 Amount paid with request for extension to file 68

69 Excess social security and tier 1 RRTA tax withheld 69

70 Credit for federal tax on fuels. Attach Form 4136 70

71 Credits from Form: a 2439 b Reserved c 8885 d 71

72 Add lines 62, 63, 64a, and 65 through 71. These are your total payments 72 69,578.

Refund

73 If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid 73

74a Amount of line 73 you want refunded to you. If Form 8888 is attached, check here 74a

b Routing number Type: Checking Savings d Account number

75 Amount of line 73 you want applied to your 2014 estimated tax 75

Amount You Owe

76 Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions 76 6,430.

77 Estimated tax penalty (see instructions) 77

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete below. No

Designee's name **LESLIE KUEHN** Phone no. [redacted] Personal identification number (PIN) [redacted]

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature _____ Date _____ Your occupation _____ Daytime phone number _____

Spouse's signature, if a joint return, both must sign. _____ Date _____ Spouse's occupation _____ If the IRS sent you an Identity Protection PIN, enter it here _____

Preparer Use Only

Print/Type preparer's name _____ Preparer's signature **LORI HUME** Date **2-1-8-14** Check if self-employed PTIN _____

Firm's name **WIPFLI, LLP** Firm's EIN _____ Phone no. _____

Firm's address **7601 FRANCE AVENUE S. #400 MINNEAPOLIS, MN 55435**

SCHEDULE A
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)
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

2013
Attachment
Sequence No. 07

Your social security number

MARK B. DAYTON

Medical and Dental Expenses		Caution. Do not include expenses reimbursed or paid by others.			
1	Medical and dental expenses (see instructions)	1			
2	Enter amount from Form 1040, line 38	2			
3	Multiply line 2 by 10% (.10). But if either you or your spouse was born before January 2, 1949, 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 Paid		5 State and local (check only one box):			
a	<input checked="" type="checkbox"/> Income taxes, or	5	26,938.		
b	<input type="checkbox"/> General sales taxes	6			
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		26,938.	
Interest You Paid		10 Home mortgage interest and points reported to you on Form 1098		10	
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	11			
12	Points not reported to you on Form 1098. See instructions for special rules	12			
13	Mortgage insurance premiums (see instructions)	13			
14	Investment interest. Attach Form 4952 if required. (See instructions.)	14			
15	Add lines 10 through 14	15			
Gifts to Charity		16 Gifts by cash or check. If you made any gift of \$250 or more, see instructions		16	10,000.
17	Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	17			
18	Carryover from prior year	18			
19	Add lines 16 through 18	19		10,000.	
Casualty and Theft Losses		20 Casualty or theft loss(es). Attach Form 4684. (See instructions.)		20	
Job Expenses and Certain Miscellaneous Deductions		21 Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.)		21	
22	Tax preparation fees	22			
23	Other expenses - investment, safe deposit box, etc. List type and amount	23	INVESTMENT, TAX & ACCOUNT SERVICES 9,823.	9,823.	
24	Add lines 21 through 23	24		9,823.	
25	Enter amount from Form 1040, line 38	25	352,601.		
26	Multiply line 25 by 2% (.02)	26		7,052.	
27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	27		2,771.	
Other Miscellaneous Deductions		28 Other - from list in instructions. List type and amount		28	
29	Is Form 1040, line 38, over \$150,000? <input type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40. <input checked="" type="checkbox"/> Yes. Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.	29		36,631.	
Total Itemized Deductions		30 If you elect to itemize deductions even though they are less than your standard deduction, check here			

**SCHEDULE D
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

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

2013

Attachment
Sequence No. 12

Name(s) shown on return

MARK B. DAYTON

Your social security number

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

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) 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 Box A checked				
2	Totals for all transactions reported on Form(s) 8949 with Box B checked				
3	Totals for all transactions reported on Form(s) 8949 with Box C checked				
4	Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824				4
5	Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				5
6	Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions				6 ()
7	Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on page 2				7

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and 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 Box D checked				
9	Totals for all transactions reported on Form(s) 8949 with Box E checked				
10	Totals for all transactions reported on Form(s) 8949 with Box F checked				
11	Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824 SEE STATEMENT 2				11
12	Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				12 163,405.
13	Capital gain distributions				13
14	Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions				14 ()
15	Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then go to Part III on page 2				15 163,405.

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

Schedule D (Form 1040) 2013

Part III Summary

16 Combine lines 7 and 15 and enter the result	16	163,405.
<ul style="list-style-type: none"> • 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. • If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22. • If line 16 is zero, 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? <input checked="" type="checkbox"/> Yes. Go to line 18. <input type="checkbox"/> 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? <input checked="" type="checkbox"/> 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. <input type="checkbox"/> 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 smaller of: • The loss on line 16 or • (\$3,000), or if married filing separately, (\$1,500) }	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? <input type="checkbox"/> 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). <input type="checkbox"/> No. Complete the rest of Form 1040 or Form 1040NR.		

Name(s) shown on return. Do not enter name and social security number if shown on page 1.

Your social security number

MARK B. DAYTON

Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

Part III Income or Loss From Partnerships and S Corporations Note: If you report a loss from an at-risk activity for which any amount is not at risk, you must check column (e) on line 28 and attach Form 6198. See Instructions.

27 Are you reporting any loss not allowed in a prior year due to the at-risk, excess farm loss, or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? Yes No [X]

Table with 5 columns: (a) Name, (b) Enter P for partnership, S for S corporation, (c) Check if foreign partnership, (d) Employer identification number, (e) Check if any amount is not at risk. Rows A, B, C, D.

Table with 5 columns: (f) Passive loss allowed, (g) Passive income from Schedule K-1, (h) Nonpassive loss from Schedule K-1, (i) Section 179 expense deduction from Form 4562, (j) Nonpassive income from Schedule K-1. Includes Totals and summary lines 29a, 29b, 30, 31, 32.

Part III Income or Loss From Estates and Trusts

Table with 2 columns: (a) Name, (b) Employer identification number. Row A: BRUCE B DAYTON 2004 CRUT.

Table with 4 columns: (c) Passive deduction or loss allowed, (d) Passive income from Schedule K-1, (e) Deduction or loss from Schedule K-1, (f) Other income from Schedule K-1. Includes Totals and summary lines 34a, 34b, 35, 36, 37.

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder

Table with 5 columns: (a) Name, (b) Employer identification number, (c) Excess inclusion from Schedules Q, line 2c, (d) Taxable income (net loss) from Schedules Q, line 1b, (e) Income from Schedules Q, line 3b. Includes summary line 39.

Part V Summary

Table with 2 columns: Description, Amount. Rows 40-43: Net farm rental income or (loss), Total income or (loss), Reconciliation of farming and fishing income, Reconciliation for real estate professionals.

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.

Name(s) shown on Form 1040 or Form 1040NR: **MARK B. DAYTON**
 Your social security number: [REDACTED]

Part I Alternative Minimum Taxable Income

1	If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41, and go to line 2. Otherwise, enter the amount from Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.)	315,970.
2	Medical and dental. If you or your spouse was 65 or older, enter the smaller of Schedule A (Form 1040), line 4, or 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-	0.
3	Taxes from Schedule A (Form 1040), line 9	26,938.
4	Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet in the instructions for this line	
5	Miscellaneous deductions from Schedule A (Form 1040), line 27	2,771.
6	If Form 1040, line 38, is \$150,000 or less, enter -0-. Otherwise, see instructions	-3,078.
7	Tax refund from Form 1040, line 10 or line 21	
8	Investment interest expense (difference between regular tax and AMT)	
9	Depletion (difference between regular tax and AMT)	
10	Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	
11	Alternative tax net operating loss deduction	
12	Interest from specified private activity bonds exempt from the regular tax	
13	Qualified small business stock (7% of gain excluded under section 1202)	
14	Exercise of incentive stock options (excess of AMT income over regular tax income)	
15	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	
16	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	
17	Disposition of property (difference between AMT and regular tax gain or loss)	
18	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	
19	Passive activities (difference between AMT and regular tax income or loss)	
20	Loss limitations (difference between AMT and regular tax income or loss)	
21	Circulation costs (difference between regular tax and AMT)	
22	Long-term contracts (difference between AMT and regular tax income)	
23	Mining costs (difference between regular tax and AMT)	
24	Research and experimental costs (difference between regular tax and AMT)	
25	Income from certain installment sales before January 1, 1987	
26	Intangible drilling costs preference	
27	Other adjustments, including income-based related adjustments	
28	Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line 28 is more than \$238,550, see instructions.)	342,601.

Part II Alternative Minimum Tax (AMT)

29	Exemption. (If you were under age 24 at the end of 2013, see instructions.) IF your filing status is... AND line 28 is not over... THEN enter on line 29... Single or head of household \$115,400 \$51,900 Married filing jointly or qualifying widow(er) ... 153,900 80,800 Married filing separately 76,950 40,400 If line 28 is over the amount shown above for your filing status, see instructions.	0.
30	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	342,601.
31	• 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; or 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 60 here. • All others: If line 30 is \$179,500 or less (\$89,750 or less if married filing separately), multiply line 30 by 26% (.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,590 (\$1,795 if married filing separately) from the result.	63,174.
32	Alternative minimum tax foreign tax credit (see instructions)	
33	Tentative minimum tax. Subtract line 32 from line 31	63,174.
34	Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47). If you used Sch J to figure your tax, the amount from line 44 of Form 1040 must be refigured without using Sch J	51,218.
35	AMT. Subtract line 34 from line 33. If zero or less, enter -0-. Enter here and on Form 1040, line 45	11,956.

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.

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	342,601.
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 figured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	37	235,469.
38	Enter the amount from Schedule D (Form 1040), line 19 (as figured 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 smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as figured for the AMT, if necessary). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	39	235,469.
40	Enter the smaller of line 36 or line 39	40	235,469.
41	Subtract line 40 from line 36	41	107,132.
42	If line 41 is \$179,500 or less (\$89,750 or less if married filing separately), multiply line 41 by 26% (.26). Otherwise, multiply line 41 by 28% (.28) and subtract \$3,590 (\$1,795 if married filing separately) from the result	42	27,854.
43	Enter: <ul style="list-style-type: none"> • \$72,500 if married filing jointly or qualifying widow(er), • \$36,250 if single or married filing separately, or • \$48,600 if head of household. 	43	36,250.
44	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; but do not enter less than -0-	44	79,877.
45	Subtract line 44 from line 43. If zero or less, enter -0-	45	0.
46	Enter the smaller of line 36 or line 37	46	235,469.
47	Enter the smaller of line 45 or line 46. This amount is taxed at 0%	47	0.
48	Subtract line 47 from line 46	48	235,469.
49	Enter the amount from the Line 49 Worksheet in the instructions STMT 3	49	320,123.
50	Enter the smaller of line 48 or line 49	50	235,469.
51	Multiply line 50 by 15% (.15)	51	35,320.
52	Add lines 47 and 50 If lines 52 and 36 are the same, skip lines 53 through 57 and go to line 58. Otherwise, go to line 53.	52	235,469.
53	Subtract line 52 from line 46	53	0.
54	Multiply line 53 by 20% (.20) If line 38 is zero or blank, skip lines 55 through 57 and go to line 58. Otherwise, go to line 55.	54	
55	Add lines 41, 52, and 53	55	
56	Subtract line 55 from line 36	56	
57	Multiply line 56 by 25% (.25)	57	
58	Add lines 42, 51, 54, and 57	58	63,174.
59	If line 36 is \$179,500 or less (\$89,750 or less if married filing separately), multiply line 36 by 26% (.26). Otherwise, multiply line 36 by 28% (.28) and subtract \$3,590 (\$1,795 if married filing separately) from the result	59	92,338.
60	Enter the smaller of line 58 or line 59 here and on line 31. If you are filing Form 2555 or 2555-EZ, do not enter this amount on line 31. Instead, enter it on line 4 of the worksheet in the instructions for line 31	60	63,174.

**SCHEDULE H
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Household Employment Tax

(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/form1040.

OMB No. 1545-1971

2013

Attachment
Sequence No. 44

Name of employer

Social security number

MARK B. DAYTON

Employer identification number

Calendar year taxpayers having no household employees in 2013 do not have to complete this form for 2013.

A Did you pay any one household employee cash wages of \$1,800 or more in 2013? (If any household employee was your spouse, your child under age 21, your parent, or anyone under age 18, see the line A instructions before you answer this question.)

- Yes. Skip lines B and C and go to line 1.
 No. Go to line B.

B Did you withhold federal income tax during 2013 for any household employee?

- Yes. Skip line C and go to line 7.
 No. Go to line C.

C Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2012 or 2013 to all household employees? (Do not count cash wages paid in 2012 or 2013 to your spouse, your child under age 21, or your parent.)

- No. Stop. Do not file this schedule.
 Yes. Skip lines 1-9 and go to line 10.

Part I Social Security, Medicare, and Federal Income Taxes

1	Total cash wages subject to social security tax	1	34,972.	
2	Social security tax. Multiply line 1 by 12.4% (.124)	2		4,337.
3	Total cash wages subject to Medicare tax	3	34,972.	
4	Medicare tax. Multiply line 3 by 2.9% (.029)	4		1,014.
5	Total cash wages subject to Additional Medicare Tax withholding	5		
6	Additional Medicare Tax withholding. Multiply line 5 by 0.9% (.009)	6		
7	Federal income tax withheld, if any	7		3,081.
8	Total social security, Medicare, and federal income taxes. Add lines 2, 4, 6, and 7	8		8,432.

9 Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2012 or 2013 to all household employees? (Do not count cash wages paid in 2012 or 2013 to your spouse, your child under age 21, or your parent.)

- No. Stop. Include the amount from line 8 above on Form 1040, line 59a. If you are not required to file Form 1040, see the line 9 instructions.
 Yes. Go to line 10.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Schedule H (Form 1040) 2013

Part III Federal Unemployment (FUTA) Tax

	Yes	No
10 Did you pay unemployment contributions to only one state? (If you paid contributions to a credit reduction state, see instructions and check "No.")	X	
11 Did you pay all state unemployment contributions for 2013 by April 15, 2014? Fiscal year filers see instructions	X	
12 Were all wages that are taxable for FUTA tax also taxable for your state's unemployment tax?	X	

Next: If you checked the "Yes" box on all the lines above, complete Section A.
If you checked the "No" box on any of the lines above, skip Section A and complete Section B.

Section A

13 Name of the state where you paid unemployment contributions	MN	
14 Contributions paid to your state unemployment fund	14	188.
15 Total cash wages subject to FUTA tax	15	7,000.
16 FUTA tax. Multiply line 15 by .6% (.006). Enter the result here, skip Section B, and go to line 25	16	42.

Section B

17 Complete all columns below that apply (if you need more space, see instructions):

(a) Name of state	(b) Taxable wages (as defined in state act)	(c) State experience rate period		(d) State experience rate	(e) Multiply col. (b) by .054	(f) Multiply col. (b) by col. (d)	(g) Subtract col. (f) from col. (e). If zero or less, enter -0-	(h) Contributions paid to state unemployment fund
		From	To					

18 Totals	18	
19 Add columns (g) and (h) of line 18	19	
20 Total cash wages subject to FUTA tax (see the line 15 instructions)	20	
21 Multiply line 20 by 6.0% (.060)	21	
22 Multiply line 20 by 5.4% (.054)	22	
23 Enter the smaller of line 19 or line 22 (Employers in a credit reduction state must use the worksheet and check here)	23	<input type="checkbox"/>
24 FUTA tax. Subtract line 23 from line 21. Enter the result here and go to line 25	24	

Part III Total Household Employment Taxes

25 Enter the amount from line 8. If you checked the "Yes" box on line C of page 1, enter -0-	25	8,432.
26 Add line 16 (or line 24) and line 25	26	8,474.

27 Are you required to file Form 1040?
 Yes. Stop. Include the amount from line 26 above on Form 1040, line 59a. Do not complete Part IV below.
 No. You may have to complete Part IV. See instructions for details.

Part IV Address and Signature - Complete this part only if required. See the line 27 instructions.

Address (number and street) or P.O. box if mail is not delivered to street address _____ Apt., room, or suite no. _____
City, town or post office, state, and ZIP code _____

Under penalties of perjury, I declare that I have examined this schedule, including accompanying statements, and to the best of my knowledge and belief, it is true, correct, and complete. No part of any payment made to a state unemployment fund claimed as a credit was, or is to be, deducted from the payments to employees. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Employer's signature _____ Date _____

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name				Firm's EIN
	Firm's address				Phone no.

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

2013

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040 or Form 1041.

Attachment
Sequence No. 72

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

Name(s) shown on Form 1040 or Form 1041
MARK B. DAYTON

Your social security number or EIN

Part I Investment Income Section 6013(g) election (see instructions)
 Regulations section 1.1411-10(g) election (see instructions)

1	Taxable interest (Form 1040, line 8a; or Form 1041, line 1)		1	42.	
2	Ordinary dividends (Form 1040, line 9a; or Form 1041, line 2a)		2	73,062.	
3	Annuities from nonqualified plans (see instructions)		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 (see instructions)	4b			
c	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	163,405.		
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b			
c	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c			
d	Combine lines 5a through 5c		5d	163,405.	
6	Changes to investment income for certain CFCs and PFICs (see instructions)		6		
7	Other modifications to investment income (see instructions)	SEE STATEMENT 4		7	-110,804.
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7		8	125,705.	

Part II Investment Expenses Allocable to Investment Income and Modifications

9a	Investment interest expenses (see instructions)	9a		
b	State income tax (see instructions)	9b	8,208.	
c	Miscellaneous investment expenses (see instructions)	9c	2,771.	
d	Add lines 9a, 9b, and 9c		9d	10,979.
10	Additional modifications (see instructions)		10	
11	Total deductions and modifications. Add lines 9d and 10		11	10,979.

Part III Tax Computation

12	Net investment income. Subtract Part II, line 11 from Part I, line 8. Individuals complete lines 13-17. Estates and trusts complete lines 18a-21. If zero or less, enter -0-		12	114,726.
Individuals:				
13	Modified adjusted gross income (see instructions)	13	352,601.	
14	Threshold based on filing status (see instructions)	14	200,000.	
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	152,601.	
16	Enter the smaller of line 12 or line 15		16	114,726.
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (.038). Enter here and on Form 1040, line 60		17	4,360.
Estates and Trusts:				
18a	Net investment income (line 12 above)	18a		
b	Deductions for distributions of net investment income and deductions under section 642(c) (see instructions)	18b		
c	Undistributed net investment income. Subtract line 18b from 18a (see instructions)	18c		
19a	Adjusted gross income (see instructions)	19a		
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b		
c	Subtract line 19b from line 19a. If zero or less, enter -0-	19c		
20	Enter the smaller of line 18c or line 19c		20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (.038). Enter here and on Form 1041, Schedule G, line 4		21	

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

Form 8960 (2013)

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

2013

MINNESOTA

Name(s)
MARK B. DAYTON

Your social security number or EIN

Part 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)		1	42.
2	Ordinary dividends (Form 1040, line 9a; or Form 1041, line 2a)		2	73,062.
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		
c	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	163,405.	
b	Net gain or loss from disposition of property that is not subject to net investment income tax	5b		
c	Adjustment from disposition of partnership interest or S corporation stock	5c		
d	Combine lines 5a through 5c		5d	163,405.
6	Changes in investment income for certain CFCs and PFICs		6	
7	Other modifications to investment income		7	-110,804.
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7		8	125,705.

Part II State Income Tax Pro-ration

9	State total income	9	345,001.
10	State income tax deduction	10	22,527.
11	State income taxes attributable to investment income, line 8 divided by line 9 times line 10	11	8,208.

Form 8960 (2013)

MARK B. DAYTON

FORM 1040

QUALIFIED DIVIDENDS

STATEMENT 1

NAME OF PAYER	ORDINARY DIVIDENDS	QUALIFIED DIVIDENDS
FROM K-1 - BRUCE B DAYTON 2004 CRUT	73,062.	72,064.
TOTAL INCLUDED IN FORM 1040, LINE 9B		72,064.

SCHEDULE D

NET LONG-TERM GAIN OR LOSS FROM
PARTNERSHIPS, S CORPORATIONS, AND FIDUCIARIES

STATEMENT 2

DESCRIPTION OF ACTIVITY	GAIN OR LOSS	28% GAIN
BRUCE B DAYTON 2004 CRUT	163,405.	
TOTAL TO SCHEDULE D, PART II, LINE 12	163,405.	

1	ENTER:	
	\$400,000 IF SINGLE	
	\$225,000 IF MARRIED FILING SEPARATELY	
	\$450,000 IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER)	
	\$425,000 IF HEAD OF HOUSEHOLD	400,000.
2	ENTER THE AMOUNT FROM FORM 6251, LINE 45	0.
3	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 19 OF THE SCHEDULE D TAX WORKSHEET, WHICHEVER APPLIES (AS FIGURED FOR REGULAR TAX): IF YOU DID NOT COMPLETE EITHER WORKSHEET FOR THE REGULAR TAX, ENTER THE AMOUNT FROM FORM 1040, LINE 43; BUT DO NOT ENTER LESS THAN -0-. IF YOU DID NOT COMPLETE EITHER WORKSHEET FOR THE REGULAR TAX AND YOU ARE FILING FORM 2555 OR FORM 2555-EZ, ENTER THE AMOUNT FROM LINE 3 OF THE FOREIGN EARNED INCOME TAX WORKSHEET IN THE FORM 1040 INSTRUCTIONS (AS FIGURED FOR THE REGULAR TAX)	79,877.
4	ADD LINE 2 AND LINE 3	79,877.
5	SUBTRACT LINE 4 FROM LINE 1 AND ENTER THE RESULT HERE AND ON LINE 49, BUT DO NOT ENTER LESS THAN -0-	320,123.

BRUCE B DAYTON 2004 CRUT	-110,804.
AMOUNT TO FORM 8960, LINE 7	-110,804.

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

MARK B

DAYTON

CLIENT'S COPY

Place an X if a Foreign Address:

80 S. 8TH ST., 1800 IDS CENTER

MINNEAPOLIS

MN 55402

2013 Federal Filing Status (1) Single (2) Married filing joint (3) Married filing separate: Enter spouse's name and Social Security number here
 (place an X in one box); (4) Head of household (5) Qualifying widow(er)

State Elections Campaign Fund
 If you want \$5 to go to help candidates for state offices pay campaign expenses, you may each enter the code number for the party of your choice. This will not increase your tax or reduce your refund.

Political Party and Code Number:
 Republican11 Grassroots 14
 Democratic Farmer-Labor 12 Libertarian 16
 Independent13 General Campaign Fund 99

From Your Federal Return (for line references see instructions), enter the amount of:

A Wages, salaries, tips, etc.: 116092 B IRA, Pensions and annuities: C Unemployment: D Federal adjusted gross income: 352601

Do not send W-2s. Enclose Schedule M1TW to claim Minnesota withholding.

1	Federal taxable income (from line 43 of federal Form 1040, line 27 of Form 1040A or line 6 of Form 1040EZ)	1	315346
2	State income tax or sales tax addition. If you itemized deductions on federal Form 1040, complete the worksheet in the instructionsSTMT...1....	2	26938
3	Other additions to income, including disallowed standard deduction for married/widowed taxpayers, itemized deductions, personal exemptions, and non-Minnesota bond interest (see instructions; enclose Schedule M1M)	3	2717
4	Add lines 1 through 3 (if a negative number, place an X in the oval box)	4	345001
5	State income tax refund from line 10 of federal Form 1040	5	
6	Other subtractions, such as net interest or mutual fund dividends from U.S. bonds or K-12 education expenses (see instructions; enclose Schedule M1M)	6	
7	Total subtractions. Add lines 5 and 6	7	
8	Minnesota taxable income. Subtract line 7 from line 4. If zero or less, leave blank	8	345001
9	Tax from the table in the M1 instructions	9	29932
10	Alternative minimum tax (enclose Schedule M1MT)	10	
11	Add lines 9 and 10	11	29932
12	Full-year residents: Enter the amount from line 11 on line 12. Skip lines 12a and 12b. Part-year residents and nonresidents: From Schedule M1NR, enter the tax from line 27 on line 12, from line 23 on line 12a, and from line 24 on line 12b (enclose Schedule M1NR)	12	29932
a.			
b.			
13	Tax on lump-sum distribution (enclose Schedule M1LS)	13	
14	Tax before credits. Add lines 12 and 13	14	29932

15	Tax before credits. Amount from line 14	15	29932
16	Marriage credit for joint return when both spouses have taxable earned income or taxable retirement income (enclose Schedule M1MA)	16 <input checked="" type="checkbox"/>	
17	Credit for taxes paid to another state (enclose Schedule M1CR)	17 <input checked="" type="checkbox"/>	
18	Other nonrefundable credits (enclose Schedule M1C)	18 <input checked="" type="checkbox"/>	
19	Total nonrefundable credits. Add lines 16 through 18	19	
20	Subtract line 19 from line 15 (if result is zero or less, leave blank)	20	29932
21	Nongame Wildlife Fund contribution (see instructions, page 15) This will reduce your refund or increase amount owed	21 <input checked="" type="checkbox"/>	
22	Add lines 20 and 21	22	29932
23	Minnesota income tax withheld. Complete and enclose Schedule M1W to report Minnesota withholding from W-2, 1099 and W-2G forms (do not send)	23 <input checked="" type="checkbox"/>	7584
24	Minnesota estimated tax and extension (Form M13) payments made for 2013	24 <input checked="" type="checkbox"/>	17143
25	Child and Dependent Care Credit (enclose Schedule M1CD). Enter number of qualifying persons here:	25 <input checked="" type="checkbox"/>	
26	Minnesota Working Family Credit (enclose Schedule M1WFC). Enter number of qualifying children here:	26 <input checked="" type="checkbox"/>	
27	K-12 Education Credit (enclose Schedule M1ED). Enter number of qualifying children here:	27 <input checked="" type="checkbox"/>	
28	Business and investment credits (enclose Schedule M1B)	28 <input checked="" type="checkbox"/>	
29	Total payments. Add lines 23 through 28	29	24727
30	REFUND. If line 29 is more than line 22, subtract line 22 from line 29 (see instructions). For direct deposit, complete line 31	30 <input checked="" type="checkbox"/>	
31	Direct deposit of your refund (you must use an account not associated with a foreign bank):		
	Checking Savings		
32	AMOUNT YOU OWE. If line 22 is more than line 29, subtract line 29 from line 22 (see instructions) Make check out to Minnesota Revenue and send with Form M60	32 <input checked="" type="checkbox"/>	5221
33	Penalty amount from Schedule M15 (see instructions). Also subtract this amount from line 30 or add it to line 32 (enclose Schedule M15)	33 <input checked="" type="checkbox"/>	16
IF YOU PAY ESTIMATED TAX and want part of your refund credited to estimated tax, complete lines 34 and 35.			
34	Amount from line 30 you want sent to you	34 <input checked="" type="checkbox"/>	
35	Amount from line 30 you want applied to your 2014 estimated tax	35 <input checked="" type="checkbox"/>	

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

Paid preparer: You must sign below.

Your signature

Date

Paid preparer's signature

Date

Spouse's signature (if filing jointly)

Taxpayer's daytime phone

LORI HUME
Preparer's daytime phone

4-8-14

6123397151

Include a copy of your 2013 federal return and schedules.

Mail to: Minnesota Individual Income Tax
St. Paul, MN 55145-0010

To check on the status of your refund, visit www.revenue.state.mn.us

I authorize the Minnesota Department of
Revenue to discuss this return with my
paid preparer or the third-party designee
indicated on my federal return.

I do not want my paid
preparer to file my return
electronically.

2013 Schedule M1SA, Minnesota Itemized Deductions

Sequence #19

Your First Name and Initial
MARK B. DAYTON

Last Name

Social Security Number

Itemized Deductions

You must complete federal Schedule A before you can complete this schedule.

1	Medical and Dental expenses (from line 1 of your federal Schedule A)	1	
2	Minnesota Adjusted Gross Income (see instructions)	2	352601
3	Multiply line 2 by 10% (.10). If age 65 or older, multiply by 7.5% (.075)	3	26445
4	Subtract line 3 from line 1. If line 3 is more than line 1, enter 0	4	
5	Total Taxes (from line 9 of your federal Schedule A)	5	26938
6	Total Interest (see instructions)	6	
7	Mortgage insurance premiums (from line 13 of your federal Schedule A)	7	
8	Subtract line 7 from line 6	8	
9	Gifts by cash or check (determine from instructions)	9	10000
10	Gifts other than by cash or check (determine from instructions)	10	
11	Carryover from prior years	11	
12	Add lines 9 through 11	12	10000
13	Casualty or theft loss(es) (determine from the worksheet in instructions)	13	
14	Miscellaneous deductions (from line 24 of your federal Schedule A. Also include educator expenses you deducted on line 23 of Form 1040 or line 16 of Form 1040A)	14	9823
15	Minnesota Adjusted Gross Income (see instructions)	15	352601
16	Multiply line 15 by 2% (.02)	16	7052
17	Subtract line 16 from line 14. If line 16 is more than line 14, enter 0	17	2771
18	Enter the amount from line 28 of your federal Schedule A	18	
19	Add lines 4, 5, 8, 12, 13, 17 and 18	19	39709
20	Enter the amount from line 29 of your federal Schedule A	20	36631
21	If your Minnesota Adjusted Gross Income is LESS than or equal to \$178,150 (or \$89,075 if your filing status is married filing separately), subtract line 19 from line 20. Enter the result here, and, if positive, enter the amount on line 2 of Schedule M1M. If the result is negative enter as a positive number on line 37 of Schedule M1M. STOP HERE	21	
	If your Minnesota Adjusted Gross Income is MORE than \$178,150 (or \$89,075 if filing married separate), skip line 21 and continue to line 22.		
	SEE STATEMENT 2		
22	Enter your limited Minnesota Itemized Deductions (determine from the worksheet in instructions)	22	34538
23	Subtract line 22 from line 20, enter the amount here, and, if positive, enter the amount on line 2 of Schedule M1M. If the result is negative enter as a positive number on line 37 of Schedule M1M.	23	2093

2013 Schedule M1W, Minnesota Income Tax Withheld

Sequence #2

Complete this schedule to report Minnesota income tax withheld. Include this schedule when you file your return.

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 23 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.

A If the W-2 is for: • you, enter 1 • spouse, enter 2	B - Box 13 If Retirement Plan box is checked, mark an X below.	C - Box 15 Employer's 7-digit Minnesota state tax ID number	D - Box 16 State wages, tips, etc. <i>(round to nearest whole dollar)</i>	E - Box 17 Minnesota tax withheld <i>(round to nearest whole dollar)</i>
1	X	9000001	116092	7584

Subtotal for additional W-2s (from line 5 on page 2)

Total Minnesota tax withheld from all W-2 forms (add amounts in line 1, column E) 1 **7584**

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

A If the 1099 or W-2G is for: <input type="checkbox"/> you, enter 1 <input type="checkbox"/> spouse, enter 2	B Payer's 7-digit Minnesota state tax ID number (if unknown, contact the payer)	C Income amount (see the table on page 2 for amounts to include)	D Minnesota tax withheld <i>(round to nearest whole dollar)</i>
---	---	--	---

Subtotal for additional 1099 and W-2G forms (from line 6 on page 2)

Total Minnesota tax withheld from all 1099 and W-2G forms (add amounts in line 2, column D) 2 **7584**

3 Total Minnesota tax withheld by partnerships, S corporations and fiduciaries (from line 7 on page 2) 3 **7584**

4 Total. Add the Minnesota tax withheld on lines 1, 2 and 3. Enter the total here and on line 23 of Form M1 4 **7584**

You must include this schedule with your Form M1. If required, also include a copy of Schedules KPI, KS and/or KF.

2013 Schedule M1M, Income Additions and Subtractions

Sequence #3

Complete this schedule to determine line 3 and line 6 of Form M1.

MARK B

DAYTON

Additions to Income

- 1 If you took the standard deduction on your federal return, enter \$2,050 if married filing joint or qualifying widow(er), or \$1,025 if married filing separate. Otherwise, skip this line 1
- 2 Excess itemized deductions on your federal return (*enclose Schedule M1SA*) 2 2093
- 3 Phase out of personal exemption(s) for taxpayers with an adjusted gross income that exceeds the applicable threshold (*see instructions*) SEE STATEMENT 3 3 624
- 4 Interest from municipal bonds of another state or its governmental units included on line 8b of federal Form 1040 or 1040A 4
- 5 Federally tax-exempt dividends from mutual funds investing in bonds of another state or its governmental units included on line 8b of federal Form 1040 or 1040A 5
- 6 Federal bonus depreciation addition (*determine from worksheet in the instructions*) 6
- 7 Federal section 179 expensing addition (*determine from worksheet in the instructions*) 7
- 8 State income taxes passed through to you as a partner of a partnership, a shareholder of an S corporation or a beneficiary of a trust (*see instructions*) 8
- 9 Domestic production activities deduction (*from line 35 of federal Form 1040*) 9
- 10 Expenses deducted on your federal return attributable to income not taxed by Minnesota (*other than interest or mutual fund dividends from U.S. bonds*) 10
- 11 Fines, fees and penalties federally deducted as a trade or business expense (*see instructions*) 11
- 12 Suspended loss from 2001 through 2005 or 2008 through 2012 on your federal return that was generated by bonus depreciation (*determine from worksheet in the instructions*) 12
- 13 Capital gain portion of a lump-sum distribution (*from line 6 of federal Form 4972; enclose Form 4972*) 13
- 14 Net operating loss carryover adjustment (*see instructions*) 14
- 15 Additions from lines 15 or 19 of Schedule M1NC 15
- 16 Add lines 1 through 15. Enter the total here and on line 3 of Form M1 16 2717

Subtractions From Income

- 17 Net interest or mutual fund dividends from U.S. bonds (*see instructions*) 17
- 18 Education expenses you paid for your qualifying children in grades K-12 (*see instructions*)
Enter the name and grade of each child: 18
- 19 If you did not itemize deductions on your federal return and your charitable contributions were more than \$500, see instructions 19
- 20 Subtraction for federal bonus depreciation added back to Minnesota taxable income in 2008 through 2012 (*determine from worksheet in the instructions*) 20
- 21 Subtraction for federal section 179 expensing added back to Minnesota taxable income in 2008 through 2012 (*see instructions*) 21

MARK B

DAYTON

22	Subtraction for persons age 65 or older, or permanently and totally disabled (<i>enclose Schedule M1R</i>)	22	<input type="checkbox"/>
23	Benefits paid by the Railroad Retirement Board (<i>see Instructions</i>)	23	<input type="checkbox"/>
24	If you are a resident of a reciprocity state filing Form M1 only to receive a refund of all Minnesota tax withheld, enter the amount from line 1 of Form M1. If the amount is a negative number (less than zero), enter zero	24	<input type="checkbox"/>
	• Place an X in one box to indicate the reciprocity state of which you were a resident during 2013		
			Michigan:
			North Dakota:
25	American Indians: Total amount earned on an Indian reservation while living on the reservation, to the extent the income is federally taxable	25	<input type="checkbox"/>
26	Federal active duty military pay received for services performed while a Minnesota resident, to the extent the income is federally taxable. Do not include military pensions	26	<input type="checkbox"/>
27	If you are a member of the Minnesota National Guard or other reserve component in Minnesota, see instructions	27	<input type="checkbox"/>
28	If you are a resident of another state, enter your federal active service military pay, to the extent the income is federally taxable. Do not include military pensions	28	<input type="checkbox"/>
29	If you, your spouse (if filing a joint return) or your dependent donated all or part of a human organ, enter your unreimbursed expenses for travel and lodging and for any lost wages net of sick pay (<i>see Instructions</i>)	29	<input type="checkbox"/>
30	Income taxes paid to a subnational level of a foreign country other than Canada (<i>determine from worksheet in the instructions</i>)	30	<input type="checkbox"/>
31	Job Opportunity Building Zone (JOBZ) business and investment income exemptions (<i>enclose Schedule JOBZ</i>)	31	<input type="checkbox"/>
32	Portion of the gain from the sale of your farm property if you were insolvent at the time of the sale (<i>determine from worksheet in the instructions</i>)	32	<input type="checkbox"/>
33	Post service education awards received for service in an AmeriCorps National Service program	33	<input type="checkbox"/>
34	Net operating loss (NOL) carryover adjustment (<i>see Instructions</i>)	34	<input type="checkbox"/>
35	Subtraction for prior addback of reacquisition of business indebtedness income included in federal taxable income (<i>see Instructions</i>)	35	<input type="checkbox"/>
36	Subtraction for Railroad maintenance expenses not allowed as federal deductions	36	<input type="checkbox"/>
37	Subtraction for additional itemized deductions allowed by Minnesota (<i>enclose Schedule M1SA</i>)	37	<input type="checkbox"/>
38	Add lines 17 through 37. Enter the total here and on line 6 of Form M1	38	

You must include this schedule with your Form M1.

MINNESOTA • REVENUE

2013 Schedule M15, Underpayment of Estimated Income Tax

For Individuals (Form M1)

Sequence #13

Your first name and initial

Last name

Social Security number

MARK B. DAYTON

Required Annual Payment

Required Annual Payment

- 1 Minnesota income tax for 2013 (from line 20 of Form M1. See instructions if you were subject to the alternative minimum tax or the new 9.85% tax rate) 1 29,932.
 - 2 Minnesota withholding and credits for 2013 (add lines 23 and 25-28 of Form M1) 2 7,584.
 - 3 Subtract line 2 from line 1. If less than \$500, stop here; you do not owe an underpayment penalty 3 22,348.
 - 4 Multiply line 1 by 90% (.90). Farmers and commercial fishermen: Multiply line 1 by 66.7% (.667) 4 26,939.
 - 5 Minnesota Income tax for 2012 (from line 20 of Form M1). See instructions if your 2012 federal adjusted gross income was more than \$150,000 or if you did not file a 2012 return 5 27,489.
 - 6 Required annual payment. Amount from line 4 or line 5, whichever is less 6 26,939.
- If line 6 is less than or equal to line 2, stop here; you do not owe an underpayment penalty.
 • If line 6 is more than line 2, continue with line 7 or line 13, depending on which method you use.

Determine Penalty Using the Short Method

Optional Short Method (see instructions to determine which method to use)

- 7 Quarterly estimated tax payments you made for 2013 7 _____
- 8 Add line 2 and line 7 8 _____
- 9 Total underpayment for the year. Subtract line 8 from line 6 (if result is zero or less, stop here; you do not owe an underpayment penalty) 9 _____
- 10 Multiply line 9 by 2% (.02) 10 _____
- 11 • If the amount on line 9 will be paid on or after April 15, 2014, enter 0.
 • If the amount was paid before April 15, 2014, use the following computation and enter the result on line 11:
 amount on line 9 X number of days paid before 4/15/14 X .00008 11 _____
- 12 Penalty. Subtract line 11 from line 10. Enter result here and on line 33 of Form M1 12 _____

Determine Penalty Using the Regular Method

Regular Method

	A	B	C	D
	April 15, 2013	June 15, 2013	Sept. 15, 2013	Jan. 15, 2014
13 Enter 25% (.25) of line 6 in each column UNLESS you are a farmer, fisherman, used the annualized income worksheet on page 2 of this form or were subject to either the alternative minimum tax or the new 9.85% tax rate. See instructions if you do not enter 25% of line 6 13	<u>6,735.</u>	<u>6,735.</u>	<u>6,735.</u>	<u>6,734.</u>
14 Credits. See instructions 14	<u>8,939.</u>	<u>7,200.</u>	<u>7,161.</u>	<u>4,522.</u>
15 Overpayment. If line 14 is more than line 13, subtract line 13 from line 14. Enter the result here and add it to line 14 in the next column. Overpayments in any quarter following an underpayment must first be applied to making up previous underpayments 15	<u>2,204.</u>	<u>465.</u>	<u>426.</u>	
16 Underpayment. If line 14 is less than line 13, subtract line 14 from line 13. Enter the result here and go to line 17 below 16				<u>2,212.</u>
SEE ATTACHED WORKSHEET				
17 Enter the date of payment or April 15, 2014, whichever is earlier (see instructions) 17				
18 Number of days between the payment due date and the date on line 17 18				
19 Divide line 18 by 365. The result is a decimal 19				
20 Multiply line 19 by 3% (.03). Enter as a decimal 20				
21 Multiply line 20 by line 16 21				
22 Penalty. Add columns A-D on line 21. Enter result here and on line 33 of Form M1 22				<u>16.00</u>

You must include this schedule with your Form M1.

MARK B. DAYTON

MN M1

STATE INCOME TAX OR SALES TAX

STATEMENT 1

DESCRIPTION

AMOUNT

1. TOTAL ITEMIZED DEDUCTIONS FROM FEDERAL SCHEDULE A, LINE 29	36,631.
2. TABLE AMOUNT	7,600.
3. SUBTRACT STEP 2 FROM STEP 1	29,031.
4. STATE INCOME OR SALES TAX FROM FEDERAL SCHEDULE A, LINE 5	26,938.
5. SMALLER OF STEP 3 OR STEP 4 TO FORM M1, PAGE 1, LINE 2	26,938.

MN SCHEDULE M1SA	WORKSHEET FOR LINE 22	STATEMENT	2
1.	ENTER THE AMOUNT FROM LINE 19 OF SCHEDULE M1SA	39,709.	
2.	ENTER THE TOTAL OF THE AMOUNTS FROM SCHEDULE A LINE 14 (IF YOU PREPARED A RECOMPUTED FEDERAL FORM 4952, USE YOUR RECOMPUTED AMOUNT), SCHEDULE M1SA LINES 4, 13 AND ANY CASUALTY OR THEFT LOSS AND GAMBLING LOSSES INCLUDED ON LINE 18 OF SCHEDULE M1SA		
3.	IS STEP 2 LESS THAN STEP 1? NO. STOP HERE. YOUR DEDUCTIONS ARE NOT LIMITED. ENTER THE AMOUNT FROM LINE 19 ON LINE 22. X YES. SUBTRACT STEP 2 FROM STEP 1	39,709.	
4.	MULTIPLY STEP 3 BY 80% (.80)	31,767.	
5.	ENTER YOUR MINNESOTA ADJUSTED GROSS INCOME (DETERMINE FROM THE INSTRUCTIONS FOR LINE 2)	352,601.	
6.	ENTER: \$178,150 (\$89,075 IF MARRIED FILING SEPARATELY)	178,150.	
7.	IS STEP 6 LESS THAN STEP 5? NO. STOP HERE. YOUR DEDUCTIONS ARE NOT LIMITED. ENTER THE AMOUNT FROM LINE 19 ON LINE 22. X YES. SUBTRACT STEP 6 FROM STEP 5	174,451.	
8.	MULTIPLY STEP 7 BY 3% (.03)	5,234.	
9.	ENTER THE SMALLER OF STEP 4 OR STEP 8	5,234.	
10.	AMOUNT FROM FORM M1, LINE 2	26,938.	
11.	ADD STEP 9 AND STEP 10	32,172.	
12.	ENTER THE AMOUNT FROM STEP 1	39,709.	
13.	ENTER AMOUNT CORRESPONDING TO YOUR FILING STATUS: - SINGLE: \$6,100 - MARRIED FILING SEPARATELY: \$5,075 - HEAD OF HOUSEHOLD: \$8,950 - MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER): \$10,150	6,100.	
14.	ENTER NUMBER FROM BOX 39A ON FORM 1040 OR BOX 23A ON FORM 1040A (IF BLANK, ENTER 0)	1.	
15.	IF SINGLE OR HEAD OF HOUSEHOLD, MULTIPLY STEP 14 BY \$1,500 ALL OTHERS, MULTIPLY STEP 14 BY \$1,200	1,500.	
16.	ADD STEPS 13 AND 15	7,600.	
17.	SUBTRACT STEP 16 FROM STEP 12 (IF RESULT IS ZERO OR LESS, YOUR DEDUCTIONS ARE NOT LIMITED. ENTER THE AMOUNT FROM LINE 19 ON LINE 22)	32,109.	
18.	ENTER THE AMOUNT FROM SCHEDULE M1SA LINE 19	39,709.	
19.	COMPARE THE AMOUNTS ON STEP 11 AND STEP 17. - IF STEP 11 IS LESS THAN OR EQUAL TO STEP 17, SUBTRACT STEP 9 FROM STEP 18, ENTER THE RESULT HERE AND ON LINE 22 (IF MARRIED FILING SEPARATELY, SEE SCH M1SA INSTRUCTIONS); OR - IF STEP 11 IS MORE THAN STEP 17, SUBTRACT STEP 10 FROM STEP 17, THEN SUBTRACT THE RESULT FROM STEP 18. ENTER THE RESULT HERE AND ON SCHEDULE M1SA, LINE 22	34,538.	

MN SCHEDULE M1M	PHASEOUT OF EXEMPTIONS - LINE 3	STATEMENT	3
1.	MULTIPLY THE NUMBER IN BOX 6D OF FEDERAL FORM 1040 OR 1040A BY \$3900		3,900.
2.	ENTER YOUR MINNESOTA ADJUSTED GROSS INCOME (FROM LINE 37 OF FEDERAL FORM 1040. IF YOU WERE REQUIRED TO FILE SCH M1NC ENTER THE AMOUNT FROM SCH M1NC, LINE 16 OR 17)		352,601.
3.	ENTER THE AMOUNT PROVIDED FOR YOUR FILING STATUS: - SINGLE: \$178,150 - MFJ OR QUALIFYING WIDOW(ER): \$267,200 - MARRIED FILING SEPARATELY: \$133,600 - HEAD OF HOUSEHOLD: \$222,700		178,150.
4.	SUBTRACT STEP 3 FROM STEP 2		174,451.
	IS STEP 4 EQUAL TO OR LESS THAN \$122,500 (\$61,250 IF MFS)? X NO. ENTER AMOUNT FROM STEP 1 ON STEP 7 AND CONTINUE TO STEP 8 YES. CONTINUE WITH STEP 5. IF THE RESULT IS NEGATIVE, SKIP STEPS 5 THROUGH 9 AND ENTER \$0 ON STEP 10		
5.	DIVIDE STEP 4 BY \$2,500 (\$1,250 IF MFS). IF THE RESULT IS NOT A WHOLE NUMBER, INCREASE IT TO THE NEXT HIGHER WHOLE NUMBER (EXAMPLE: INCREASE 0.0004 TO 1)		
6.	MULTIPLY STEP 5 BY 2% (.02). ENTER AS A DECIMAL		
7.	MULTIPLY STEP 1 BY STEP 6		3,900.
8.	SUBTRACT STEP 7 FROM STEP 1		0.
9.	ENTER YOUR FEDERAL EXEMPTION AMOUNT (FROM LINE 42 OF FORM 1040 OR 26 OF FORM 1040A)		624.
10.	SUBTRACT STEP 8 FROM STEP 9. ENTER THE RESULT HERE AND ON LINE 3 OF SCHEDULE M1M		624.