Unrelated Business Income Tax (UBIT) Return 2014

For tax-exempt organizations, cooperatives, homeowners associations and political organizations with unrelated business income.

	Тах у	ear beginning $\frac{1/l}{l}$, 2014, and ending $\frac{12/l}{l}$	/31/2014 (required)		
Please Print or Type	Name	of Organization	FEIN	Minnesota Tax ID (required)	
	Mii	mesota Ground Water Association	41-1434403	3511766	
	Current	Address Check if New Address 79 126th St. N.	This Organization Files Federal F	1120-H 1120-POL	
	City	County State Zip Code	Exempt Under IRS Section (chec		
		nite Bear Lake MN 55110-5910	Enter your NAICS Codes (see ins		
	Check That A		541860	/ 453220	
			Was 100% of the business condu	cted in Minnesota for this tax year?	
	Are yo	u filing a combined income return? Yes No	Yes No (comple	te and attach Schedule M4NPA)	
				You must round amounts to nearest whole dollar.	
Determining Tax	1	Federal taxable income before net operating loss and specific deduc from federal Form 990-T, line 30; 1120-C, line 25a; 1120-H, line 17,	ition : or 1120-POL. line 17c)	1	
		Total subtractions from federal taxable income (from M4NPI, line 1)		^	
		Federal taxable income or (loss) after subtractions (see instructions)			
		rederal taxable income or (loss) after subtractions (see instructions) If you conducted business both within and outside Minnesota, comple			
		If 100% of your activities were conducted in Minnesota, do not comp	lete M4NPA. Enter line 3 on lir	ne 4.	
	4	Minnesota taxable net income or (loss) (from M4NPA, line 15, or if 1	00% of	4 💍	
II II		your activities were conducted in Minnesota, enter amount from line		T	
E		Minnesota net operating loss deduction (from NOL)			
Dete		Subtract line 5 from line 4 (if zero or less, enter zero)		•	
		Total deductions from taxable net income (from M4NPI, line 2)			
	8	Taxable income (subtract line 7 from line 6; if zero or less, enter zero	0)	8	
	9	Regular tax (multiply line 8 by 9.8% [0.098]; if zero or less, enter zer	ro)	9	
	10 Proxy tax (see instructions, pg. 3)				
	11	Tax before credits (add lines 9 and 10)		1	
	12	Total credits against tax (from M4NPI, line 3)		12	
		Minnesota tax liability (subtract line 12 from line 11; if zero or less,		~~	
ments		Minnesota Nongame Wildlife Fund donation (see instructions, pg. 3)			
уше		Add lines 13 and 14		^^	
1 Pa		Total refundable credits (from M4NPI, line 4)			
Credits and Pay		Amount credited from your 2013 Form M4NP, line 30			
edit	17	2014 estimated tax payments			
ž					
	19	2014 extension payment			
	20	Total refundable credits and payments (add lines 16, 17, 18 and 19			
en-	21	Subtract line 20 from line 15			
Tax, Donation, Pen-	22	Penalty (determine from worksheet in the instructions, pg. 4) $ \ldots $			
	23	Interest (determine from worksheet in the instructions, pg. 4)		23	
c, Do	24	Additional charge for underpayment of estimated tax (from M15NP,		24	
Tax	25	Tax, Nongame Wildlife Fund donation, penalty, interest and addition charge for underpayment of estimated tax (add lines 15, 22, 23 and 15).	nal nd 24)	25	
		ntinued on next page. 9995	.,		

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Unrelated Business Income Tax (UBIT) Return 2014 (continued)

	f Organization	FEIN	Minnesota Tax ID				
+	Tinnesota Ground Water Association	41-1434403	3511766				
i din	26 Amount from line 25 on the front of this form		\sim				
Amount Due or Overpaid	27 Amount from line 20 on the front of this form						
	28 AMOUNT DUE. If line 26 is more than or equal to line 27, subtract line 27 from 26						
	29 OVERPAYMENT. If line 27 is more than line 26, subtract line 26 from line 27						
	30 Amount of line 29 to be credited to your 2015 estimated tax 30						
	31 Refund (subtract line 30 from line 29)						
	To have your refund direct deposited, enter your banking information below.						
	Account type: Routing number Account type: Checking Savings	unt number (use an account not as	sociated with any foreign banks)				
	I declare that this return is correct and complete to the best of my knowledge and belief.						
Sign Here	Authorized Signature Paid Peparer's Signature Title Da Paid Peparer's Signature Da PTIN Da	Daytime Phone 1/22/2016 651276 5	I authorize the Minnesota Department of Revenue to discuss this tax return with the paid				
G	Email Address for Correspondence, if Desired This	s email address belongs to (check one): Employee Paid Preparents	preparer listed here.				

Attach a complete copy of your federal Form 990-T, 1120-C, 1120-H or 1120-POL and all supporting schedules.

Mail to: Minnesota Revenue, Mail Station 1257, St. Paul, MN 55146-1257