



2020 Schedule M1ED, K-12 Education Credit

You must have receipts as proof of your education expenses. Keep these receipts with your tax records.

FIRST NAME, IN YOUR LAST NAMEXXXXX 112233333 12
 Your First Name and Initial Last Name Social Security Number Total Number of Qualifying Children

(also enter in the box on line 3a of Schedule M1REF)

- 1 Federal adjusted gross income (from line 1 of Form M1; if a negative number, enter in parentheses) 1 99999999
 - 2 Social Security and Railroad Retirement Board benefits received and not included in line 1 2 99999999
 - 3 Deduction for payments made to an IRA, SEP, or SIMPLE plan (add lines 15 and 19 of federal Schedule 1) 3 99999999
 - 4 Total payments from programs including the Minnesota Family Investment Program (MFIP), Minnesota Supplemental Aid (MSA), Supplemental Security Income (SSI), General Assistance (GA), and Minnesota Housing Support (formerly GRH) . . 4 99999999
 - 5 Additional nontaxable income such as contributions to a 401(k) or deferred compensation plan, workers' compensation, and grants and scholarships (see instructions for more examples) 5 99999999
- List types and amounts: TOTAL AND TYPES XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
- 6 Household income. Add lines 1 through 5 (if zero or less, enter 0) 6 99999999

If you have one or two qualifying children and line 6 is \$37,500 or more, STOP HERE. You do not qualify.
 If you have more than two qualifying children, see instructions for line 6.

	Qualifying Child's Name	Child A			Child B			Child C		
		NAME1XXXXX	NAME2XXXXX	NAME3XXXXX	NAME1XXXXX	NAME2XXXXX	NAME3XXXXX	NAME1XXXXX	NAME2XXXXX	NAME3XXXXX
Qualifying Education Expenses —In columns A–C, list expenses paid in 2020 for each qualifying child separately. If you have expenses for more than three children, include a separate sheet that shows lines 7–12 for each additional child. See Form M1 instructions for a list of qualifying expenses.	Child's Social Security Number	123456789	123456789	123456789	123456789	123456789	123456789	123456789	123456789	123456789
	K-12 Grade for Which Expenses Incurred	12	12	12	12	12	12	12	12	12
	Date of Birth	11223333	11223333	11223333	11223333	11223333	11223333	11223333	11223333	11223333
	Type of School Attended (Public, Private, Home School)	SCHOOLTY	SCHOOLTY	SCHOOLTY	SCHOOLTY	SCHOOLTY	SCHOOLTY	SCHOOLTY	SCHOOLTY	SCHOOLTY
7 Fees for enrichment or academic classes taken outside the regular school day or school year. Do not include private school tuition 7		1234	1234	1234	1234	1234	1234	1234	1234	1234
Organization and type of class: LIST ORGANIZATION AND TY										
8 Fees for individual instruction by a qualified instructor taught outside the regular school day or year, such as tutoring or music lessons 8		1234	1234	1234	1234	1234	1234	1234	1234	1234
Name of instructor or organization and the type of class: NAME OF INSTRUCTOR OR ORGANIZATIONXXXXXX										
9 Purchases of required school materials (Attach itemized cash register receipts) . 9		1234	1234	1234	1234	1234	1234	1234	1234	1234
10 Purchases or rentals of musical instruments used during the regular school day. 10		1234	1234	1234	1234	1234	1234	1234	1234	1234
Type and cost of each:										
11 Transportation costs paid to others for the regular school day 11		1234	1234	1234	1234	1234	1234	1234	1234	1234
Transportation provider:										
12 Add lines 7 through 11 for each column 12		12345	12345	12345	12345	12345	12345	12345	12345	12345
13 Add line 12 for all columns 13								12345		
14 Personal computer hardware and educational software expenses, not to exceed \$200. (Do not include monthly service fees for internet access) 14								123		
15 Add line 13 and line 14 15								12345		
16 Multiply line 15 by 75% (.75) 16								12345		
17 If your household income on line 6 is \$33,500 or less, multiply the number of qualifying children in grades K–12 by \$1,000. If it is more than \$33,500, complete the Worksheet for Line 17 in the instructions 17								12345		
18 Amount from line 16 or line 17, whichever is less.								12345		
Full-year residents: Also enter this amount on line 3 of Schedule M1REF 18								12345		
19 Part-year residents and nonresidents: Multiply line 18 by line 30 of Schedule M1NR. Enter the result here and on line 3 of Schedule M1REF. However, if your Minnesota gross income is less than \$12,400, complete worksheet in instructions; enter result from step 5 of worksheet here: 12345678 and enter step 6 on line 19 . . . 19								12345		

Enter qualifying children on line 3a of Schedule M1REF. Include this schedule with your Form M1. Save your receipts.