60

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62

63

32 34 36 38 40 42 44 46 48 50



11

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82 84

123456789

2025 Schedule M1529, Education Savings Account

Contribution Credit or Subtraction

| Complete this form to claim either the credit or the subtraction. You cannot claim both. | | | | | | |
|--|-------|--|---------------------|---------------|-----|--|
| 12 | FTR | RST NAME, INITXXXXXXXXX YOUR LAST NAMEXXXXXXXXXX 99 | 9999999 | | П, | |
| 13 | | | ial Security Number | er | 11 | |
| 14 | 1 | Enter the financial institution, account number and the amount you contributed in 2025 to each quali | fied adjustion sa | wings account | П, | |
| 15 | | 1 Enter the financial institution, account number, and the amount you contributed in 2025 to each qualified education savings account (commonly known as a 529 savings plan). If you contributed to more than five accounts, include a separate sheet. | | | | |
| 16 | 1100) | informy known as a 323 savings planty. If you contributed to more than five accounts, include a separate | Sileet. | | П, | |
| 17 | | Financial Institution: FINANCIAL INSTIT Account Number: 123456789123456 | 78 Amount: | 123456789 | Π, | |
| 18 | | Thiancial histitution. | Amount. | | 1 | |
| 19 | | Financial Institution: FINANCIAL INSTIT Account Number: 123456789123456 | 78 Amount | 123456789 | П, | |
| 20 | | Account Number | Amount. | | | |
| 21 | | Financial Institution: FINANCIAL INSTIT Account Number: 123456789123456 | 78 Amount | 123456789 | | |
| 22 | | | | | | |
| 23 | | Financial Institution: FINANCIAL INSTIT Account Number: 123456789123456 | 78 Amount: | 123456789 | | |
| 24 | | | | | 7 | |
| 25 | | Financial Institution: FINANCIAL INSTIT Account Number: 123456789123456 | 78 Amount: | 123456789 | | |
| 26 | | | | | 2 | |
| 27 | | Total amount of contributions from separate sheet | (if any): | 123456789 | 2 | |
| 28 | | | | | 2 | |
| 29 | | Enter the total amount you contributed to all qualified education savings accounts | 1 ■ | 123456789 | 2 | |
| 30 | | | | | 1 | |
| 31 | 2 | Enter the total amounts withdrawn or distributed in 2025 from all accounts (see instructions) | 2 | 123456789 | 3 | |
| 32 | | | | | 3 | |
| 33 | 3 | Subtract line 2 from line 1. If the result is zero or less, STOP HERE; you do not qualify | 3 🔳 | 123456789 | 3 | |
| 34 | If yo | u are claiming the subtraction | | | 3 | |
| 35 | 4 | Enter the lesser of the amount on line 3 or \$1,500 | | | 3 | |
| 36 | | (\$3,000 if you are married and filing a joint return) here and on line 15 of Schedule M1M | 4 | 123456789 | 3 | |
| 37 | | If you claim the subtraction, you cannot claim the credit. | | | 3 | |
| 38 | 1 1 1 | u are claiming the credit | | | - 3 | |
| 39 | 5 | Enter the result from step 11 of the Worksheet for Line 5 here. | | | 3 | |
| 40 | | If you claim the credit, you cannot claim the subtraction. | | 100456700 | 4 | |
| 41 | | Full-Year Residents: Also enter this amount on line 7 of Schedule M1C | 5 | 123456789 | 4 | |
| 42 | 6 | Part-Year Residents: Multiply line 5 by line 30 of Schedule M1NR. Enter the result here | | 123456789 | 114 | |
| 43 | | and on line 7 of Schedule M1C | 6 | 123430709 | - 4 | |
| 44 | | plete lines 7-15 if a distribution from your account was not used to pay qualified expenses. | | 123456789 | 1 4 | |
| 45 | | Enter the amount of distributions from your accounts that were not used for qualified expenses | 7 | 120400703 | + | |
| 46 | 8 | Multiply the total amount of Education Savings Account Credits | | 123456789 | 11 | |
| 48 | +++ | claimed in prior years on Schedule M1C by 2 | 8 | TE0100100 | # | |
| 49 | 9 | | 9 | 123456789 | | |
| 50 | 9 | Enter the total amount of contributions made to your qualified accounts in all taxable years | 9 | 123130703 | | |
| 51 | 10 | Divide line 8 by line 9 (carry to five decimal places). If line 8 is more than line 9, enter 1 | 10 | 123.56789 | # | |
| 52 | | Street and Signature Signature decimal process, in time of a more trial line Signature in the signature of t | | | | |
| 53 | 11 | Enter the total amount of subtractions claimed in prior years on Schedule M1M | 11 | 123456789 | | |
| 54 | | Zinci dia tata di induit di Sabitationi dia induit pi di years di Salicadie ivi Ilvi | | | 1 | |
| 55 | 12 | Divide line 11 by line 9 (carry to five decimal places). If line 11 is more than line 9, enter 1 | 12 | 123.56789 | | |
| 56 | | | | | | |
| 57 | 13 | Multiply line 10 by 50% (.50), then multiply the result by line 7. Round amount to the nearest whole do | ollar. 13 | 123456789 | | |
| 58 | | | | | | |
| 59 | 14 | Multiply line 12 by 10% (.10), then multiply the result by line 7. Round amount to the nearest whole do | ollar. 14 | 123456789 | | |
| | | | | | | |

9995

12 14 16 18 20 22 24 26 28 30 32 34 36 38 40 42 44 46 48 50 52 54 56 58 60 62 64 66 68 70 72 74 76

15 Add lines 13 and 14. Enter here and include on line 14 of Form M1. Check the box for Schedule M1529