



2024 Schedule M1M, Income Additions and Subtractions

Complete this schedule to determine line 2 and line 7 of Form M1.

our Fir	st Name and Initial	Your Last Name	Your Social Security Number
Add	ditions to Income		
		bonds of another state or its governmental units	
		deral Form 1040	1 ■
2		idends from mutual funds investing in bonds of another state	
		s included on line 2a of federal Form 1040	2 =
3		our federal return attributable to income not taxed	
		n interest or mutual fund dividends from U.S. bonds)	3 ■
	by willinesoca (other than	Timerest of mutaurjana arriaenas from e.s. bonas,	5 =
4	Capital gain portion of a	lump-sum distribution (from line 6 of federal Form 4972; enclose Form 497	72) 4
5	Addition from line 7 of So	chedule M1HOME (enclose Schedule M1HOME)	5 ■
6	Distributions from highe	r education savings accounts used for K-12 tuition (see instructions)	6 ■
			_
7	This line intentionally lef	t blank	7 ■
•	This line is the continue line is fall	A blood.	. =
8	This line intentionally let	t blank	8 ■
0	Addition from line 22 of	Schedule M1NC	0 =
9	Addition from line 25 of	scriedule MINC	9 -
10	Add lines 1 through 9 Fr	nter the total here and on line 2 of Form M1	10
-0	Add mies I tinodgii 5. Ei	the total here and on line 2 of form M1	
Sub	tractions from Inco	ome	
11	If you are not filing Scheo	dule M1SA, and your charitable contributions	
		ee instructions	11 🔳
	,		
12	Social Security benefit su	ubtraction (determine from worksheet in instructions)	12
13		paid for your qualifying children in grades K–12 (see instructions)	
	• •	de of each child on the line below	13
	ziitei tiie iiaiile aiia giaa		= -
14	Net interest or mutual fu	und dividends from U.S. bonds (see instructions)	14
		,	
15	Subtraction for contribut	tions to a qualified education savings plan (enclose Schedule M1529)	15 🔳
16	Subtraction for persons a	age 65 or older, or permanently and totally disabled (enclose Schedule M1F	R) 16 ■
17		rd benefits (see instructions)	
18	If you are a resident of M	lichigan or North Dakota filing Form M1 only to receive a refund of all Mini	nesota
		mount from line 1 of Form M1. If the amount is zero or less, enter 0	
	Place an X in one box	to indicate the reciprocity state	
		esident during 2024 Michigan Nor	th Dakota
19		on income for American Indians (see instructions)	
		ary pay received for services performed while a Minnesota	
-		ne income is federally taxable. If you received a military pension, see line 25	5 20
	and the second of	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
21	Minnesota National Gua	ard members and reservists: See instructions	21 ■

2024 M1M, page 2



22	Residents of another state: Enter your federal active duty military pay, to the extent the income is federally taxable. If you received a military pension, see line 25	22 ■	I
23	Organ donor subtraction (see instructions)	23 ■	
24	Volunteer mileage reimbursement subtraction	24 ■	l
25	Subtraction for military pensions or other military retirement pay (see instructions)	25	I
26 27	Post-service education awards received for service in an AmeriCorps National Service program Subtraction for interest earned from a designated first-time homebuyer savings account	26 ■	I
21	(enclose Schedule M1HOME)	27	l
28	Subtraction for discharge of indebtedness of educational loans (see instructions)	28 ■	I
29	Qualified public pension subtraction (enclose Schedule M1QPEN)	29 ■	l
30	Subtraction for damages received under sexual harassment or abuse claims (see instructions)	30 ■	I
31	Subtraction for long-term service and support workforce incentive grants (see instructions)	31 ■	I
32	Subtraction for Nursing Facility Workforce Incentive Grants (see instructions)	32 ■	I
33	Subtraction for one-time refund for tax year 2021 reported on 2024 Form 1099-MISC	33 ■	I
	Subtraction from line 23 of Schedule M1NC (Enter as a positive number)		
35	Add lines 11 through 34. Enter the total here and on line 7 of Form M1	35	

You must include this schedule with your Form M1.