Schedule M1M, Income Additions and Subtractions 2016

Sequence #3

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

	Your First Name and Initial	Last Name	Your Social Security Num	ber				
	ditions to Income							
1	Itemized deduction limitation for taxpayers with an adjusted gross income which							
2	exceeds \$184,850 (\$92,425 if married filing separate)							
2	that exceeds the applicable threshold (see instructions)							
3	Interest from municipal bonds of another state or its governmental units							
	included on line 8b of federal Form 1040 or 1040A							
4		al funds investing in bonds of another state						
	or its governmental units included on line	8b of federal Form 1040 or 1040A	4					
			_					
5	Federal bonus depreciation addition (dete	rmine from worksheet in the instructions)	5 ■					
_	Endouble attended to the second of addition (d	tota militar for more at about the test of all the)					
7	 Federal section 179 expensing addition (determine from worksheet in the instructions) State income taxes passed through to you as a partner of a partnership. 							
•	•	neficiary of a trust (see instructions)	7					
	a shareholder of all 6 corporation, of a be	menerally of a trast (see metractions)						
8	Domestic production activities deduction	from line 35 of federal Form 1040)	8 ■					
9	Expenses deducted on your federal return							
	by Minnesota (other than interest or mutu	al fund dividends from U.S. bonds)	9					
10	Fines, fees and penalties federally deduct	ed as a trade or business expense	_					
11	•	or 2008 through 2015 on your federal return						
		rermine from worksheet in the instructions)	11 ■					
12		ution e Form 4972)	40					
	(Irom line o or rederal Form 4972, enclose	; roiiii 4912)	12					
13	Net operating loss carryover adjustment (s	see instructions)	13					
14	This line intentionally left blank		14 ■					
15	Add lines 1 through 14. Enter the total her	re and on line 3 of Form M1	15					
Sul	otractions From Income							
		n U.S. bonds (see instructions)	16					
17		lifying children in grades K–12 (see instructi	_					
	Enter the name and grade of each child:		17					
18	If you did not itemize deductions on your for		10					
10		nstructions	18					
19		orksheet in the instructions)	19					
20	Subtraction for federal section 179 expens	•	19					
-0		e instructions)	20 ▮					
21	Subtraction for persons age 65 or older, o							
	•	(IR)	21 ■					
			_					
22	Benefits paid by the Railroad Retirement I	Board (see instructions)	22					
				Į.				

	Your First Name and Initial Last Name		Your Social Security Number		
23	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 less than zero, enter zero				
	Place an X in one box to indicate the reciprocity state of which you were a resident during 2016	Michigan:			
24	American Indians: Total amount earned on an Indian reservation while	North Dakota:			
25	living on the reservation, to the extent the income is federally taxable	24			
	resident, to the extent the income is federally taxable. Do not include military pension. See line 30 if you received a military pension or other military retirement pay				
26	If you are a member of the Minnesota National Guard or other reserve component in Minnesota, see instructions	26			
27	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	See line 30 if you received a military pension or other military retirement pay	27			
29	and lodging and for any lost wages net of sick pay (see <i>instructions</i>)				
30	(determine from worksheet in the instructions)	29			
31	under Title 10 (see instructions)	30	•		
32	at the time of the sale (determine from worksheet in the instructions)	31			
	AmeriCorps National Service program	32			
33 34	Net operating loss (NOL) carryover adjustment (see instructions)	33			
	included in federal taxable income (see instructions)	34	•		
35	Subtraction for railroad maintenance expenses	35			
36	If you filed federal Schedule A and your limited itemized deductions are less than you standard deduction, see instructions				
37	This line intentionally left blank	37	1		
38	This line intentionally left blank	38			
39	This line intentionally left blank	39			
40	Add lines 16 through 39. Enter the total here and on line 6 of Form M1	40			