## Schedule M

Department of Revenue

## **Additions to and Subtractions from Income**

2019

File with Wisconsin Form 1NPR

Name Social security number

## Part I - Additions to Income

1	Other income (see instructions). List type and amount	1	.00
2	Farmland preservation credit	2	.00
3	Enterprise zone jobs credit	3	.00
<u>4</u>	Development zones credit	4	.00
5	Capital investment credit	5	.00
6	Manufacturing investment credit	6	.00
7	Economic development tax credit	7	.00
8	Jobs tax credit	8	.00
9	Community rehabilitation program credit	9	.00
<u>10</u>	Research expense credit	10	.00
<u>11</u>	Manufacturing/Agriculture credit	11	.00
12	Business development credit	12	.00
<u>13</u>	Electronics and information technology manufacturing zone credit	13	.00
14	Employee college savings account contribution credit	14	.00
<u>15</u>	Federal net operating loss deduction (only if included in line 1 above)	15	.00
<u>16</u>	Passive foreign investment company	16	.00
<u>17</u>	Addition for certain expenses paid to related entities	17	.00
<u>18</u>	Distributions from Edvest and Tomorrow's Scholar accounts	18	.00
<u>19</u>	Addition for difference in federal and Wisconsin basis of assets	19	.00
20	Distributions from ABLE accounts	20	.00
<u>21</u>	Business moving expenses (see instructions)	21	.00
22	Add lines 1 through 21. Enter this amount on Form 1NPR, line 15, column B	22	00

Now go to page 2  $\rightarrow$ 



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Name Social security number

## Part II - Subtractions from Income 23 Other adjustments (see instructions). List type and amount 23 .00 .00 25 Recoveries of federal itemized deductions (only if included on line 1 of this .00 .00 .00 .00 .00 30 Amounts not taxable by Wisconsin (only if included in column B of Form 1NPR or line 1 of this schedule) List type and amount 30 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 41 Interest, rental payments, intangible expenses, and management fees, reported .00 42 Sales of certain insurance policies (only if included in column B of Form 1NPR or .00 43 Combat zone related death .......43 .00 44 Private school tuition ......44 .00 45 Physician or psychiatrist grant (only if included in column B of Form 1NPR or .00 46 Distributions from Wisconsin state-sponsored college tuition programs . . . . . . . . . . . . . 46 .00



**48** Add lines 23 through 47. Enter this amount on Form 1NPR, line 29, column B . . . . . **48** 

.00

.00