



Complete form using **BLACK INK**

**Note**

**DO NOT STAPLE**

Your legal last name		Legal first name		M.I.	Your social security number
If a joint return, spouse's legal last name		Spouse's legal first name		M.I.	Spouse's social security number
Home address (number and street). If you have a PO Box, see page 6.				Apt. No.	<b>Tax district</b> Check below then fill in either the name of city, village, or town and the county in which you lived at the end of 2013. <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town City, village, or town <input type="checkbox"/> _____ <b>County of</b> <input type="checkbox"/> _____ <b>School district number</b> (see page 23) _____ <b>Special conditions</b> <input type="checkbox"/> _____
City or post office		State	Zip code		

**Filing status**

Single

Married filing joint return (even if only one had income)

Head of household Fill in qualifying person's name ▼

Also, check here if married.  \_\_\_\_\_

**ENCLOSE withholding statements**

**PAPER CLIP payment here**

Print numbers like this →	0 1 2 3 4 5 6 7 8 9	Not like this →	Ø 1 4 7	NO COMMAS; NO CENTS
1	Wages, salaries, tips, etc. (see page 7)	1	_____	.00
2	Interest (see page 7)	2	_____	.00
3	Ordinary dividends (from line 9a of federal Form 1040A or 1040)	3	_____	.00
4	Capital gain distributions (see page 8)	4	_____	.00
5	Unemployment compensation (from worksheet, page 8)	5	_____	.00
6	Taxable IRA distributions, pensions, and annuities (see page 8)	6	_____	.00
7	Add lines 1 through 6	7	_____	.00
8	IRA deduction (see page 10)	8	_____	.00
9	Student loan interest deduction (see page 10)	9	_____	.00
10	Medical care insurance deduction (see page 10)	10	_____	.00
11	Add lines 8 through 10	11	_____	.00
12	Subtract line 11 from line 7. This is your Wisconsin income	12	_____	.00
13	If your parent (or someone else) can claim you (or your spouse) as a dependent, check here	13	<input type="checkbox"/>	
14	Fill in the <b>standard deduction</b> for your filing status from table, page 31. <b>But if</b> you checked line 13, fill in amount from worksheet, page 11	14	_____	.00
15	Subtract line 14 from line 12. If line 14 is larger than line 12, fill in 0	15	_____	.00
16	<b>Exemptions</b> (Caution: see page 11)			
a	Fill in exemptions from your federal return . . . . <input type="checkbox"/> x \$700	16a	_____	.00
b	Check if 65 or older <input type="checkbox"/> You + <input type="checkbox"/> Spouse = <input type="checkbox"/> x \$250	16b	_____	.00
c	Add lines 16a and 16b	16c	_____	.00
17	Subtract line 16c from line 15. If line 16c is larger than line 15, fill in 0. This is your taxable income	17	_____	.00
18	Tax. Use amount on line 17 to find your tax using table, page 24	18	_____	.00
19	Armed forces member credit (must be stationed outside U.S., see page 11)	19	_____	.00
20	School property tax credit			
a	Rent paid in 2013—heat included _____ .00	} Find credit from table page 12 ..	20a	_____ .00
	Rent paid in 2013—heat not included _____ .00			
b	Property taxes paid on home in 2013 _____ .00	} Find credit from table page 13 ..	20b	_____ .00
21	Working families tax credit, see page 14	21	_____	.00
22	Married couple credit. Complete schedule on reverse side	22	_____	.00
23	Add lines 19 through 22. This is the total of your credits	23	_____	.00
24	Subtract line 23 from line 18. If line 23 is larger than line 18, fill in 0. This is your net tax	24	_____	.00

NO COMMAS; NO CENTS

**25** Fill in net tax from line 24 ..... **25** \_\_\_\_\_ .00

**26** Sales and use tax due on Internet, mail order, or other out-of-state purchases (see page 15) **26** \_\_\_\_\_ .00  
If you certify that no sales or use tax is due, check here

**27** Donations (decreases refund or increases amount owed)

<b>a</b> Endangered resources _____ .00	<b>f</b> Firefighters memorial ..... _____ .00
<b>b</b> Packers football stadium _____ .00	<b>g</b> Military family relief ..... _____ .00
<b>c</b> Cancer research ..... _____ .00	<b>h</b> Second Harvest/Feeding Amer. _____ .00
<b>d</b> Veterans trust fund ..... _____ .00	<b>i</b> Red Cross WI Disaster Relief _____ .00
<b>e</b> Multiple sclerosis ..... _____ .00	<b>j</b> Special Olympics ..... _____ .00

Total (add lines a through j) .. **27k** \_\_\_\_\_ .00

**28** Add lines 25, 26, and 27k ..... **28** \_\_\_\_\_ .00

**29** Wisconsin income tax withheld. Enclose withholding statements ..... **29** \_\_\_\_\_ .00

**30** 2013 estimated tax payments and amount applied from 2012 return ... **30** \_\_\_\_\_ .00

**31** Earned income credit (see page 16)  
Qualifying Federal  
children  credit ... \_\_\_\_\_ .00 x \_\_\_\_\_ % = ... **31** \_\_\_\_\_ .00

**32** Homestead credit. Attach Schedule H or H-EZ ..... **32** \_\_\_\_\_ .00

**33** Eligible veterans and surviving spouses property tax credit (see page 17) **33** \_\_\_\_\_ .00

**34** Add lines 29 through 33 ..... **34** \_\_\_\_\_ .00

**35** If line 34 is more than line 28, subtract line 28 from line 34. This is the **AMOUNT YOU OVERPAID** **35** \_\_\_\_\_ .00

**36** Amount of line 35 you want **REFUNDED TO YOU** ..... **36** \_\_\_\_\_ .00

**37** Amount of line 35 you want **applied to your 2014 estimated tax** ..... **37** \_\_\_\_\_ .00

**38** If line 34 is less than line 28, subtract line 34 from line 28. This is the **AMOUNT YOU OWE** .. **38** \_\_\_\_\_ .00

**39** Underpayment interest. Fill in exception code – See Sch. U → \_\_\_\_\_ **39** \_\_\_\_\_ .00  
(See page 19)

**Third Party Designee** Do you want to allow another person to discuss this return with the department (see page 19)?  **Yes** Complete the following.  **No**

Designee's name ▶ \_\_\_\_\_ Phone no. ▶ ( ) \_\_\_\_\_ Personal identification number (PIN) ▶

**Sign below** Under penalties of law, I declare that this return and all attachments are true, correct, and complete to the best of my knowledge and belief.

Your signature \_\_\_\_\_ Spouse's signature (if filing jointly, BOTH must sign) \_\_\_\_\_ Date \_\_\_\_\_ Daytime phone ( ) \_\_\_\_\_

**Mail your return to:** Wisconsin Department of Revenue  
 If tax due ..... PO Box 268, Madison WI 53790-0001  
 If homestead credit claimed ..... PO Box 34, Madison WI 53786-0001  
 If refund or no tax due..... PO Box 59, Madison WI 53785-0001

**Married Couple Credit When Both Spouses Are Employed**

	(A) YOURSELF	(B) YOUR SPOUSE
<b>1</b> Wages, salaries, tips, and other employee compensation from line 1 of Form 1A. Do not include deferred compensation or scholarships and fellowships that are not reported on a W-2 .... <b>1</b>	.00	.00
<b>2</b> IRA deduction, if any, from line 8 of Form 1A. .... <b>2</b>	.00	.00
<b>3</b> Subtract line 2 from line 1 ..... <b>3</b>	.00	.00
<b>4</b> Compare amounts in columns (A) and (B) of line 3. Fill in the smaller amount here. If more than \$16,000, fill in \$16,000 ..... <b>4</b>		.00
<b>5</b> Rate of credit is .03 (3%) ..... <b>5</b>		X <b>.03</b>
<b>6</b> Multiply line 4 by line 5. Round the result and fill in here and on line 22 of Form 1A. .... <b>Do NOT fill in more than \$480</b> <b>6</b>		.00



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