

Check here if an amended return ▶ _

2022

Claimant's social security number		Spouse's social security number					Check below then fill in either the name of the city, village, or town, and the county in which you lived			
Claimant's legal last name		Claimant's legal first name				M.I.	at the end c			-
									V	/illage Town
S	pouse's legal last name	Spouse's lega	al first name			M.I.	City, village, or town			
С	urrent home address (number and street)	I			Apt. no		County of			
С	ity or post office		State	Zip code			Special conditions			age 10 of the ule H instructions.)
1 a	What was your age as of Decembe	r 31, 2022	?? (If you	ı were un	der 18	, you c	do not qualif	y for		
	homestead credit for 2022.)		, -			-		-	1a	Fill in age ▶
<u>k</u>	<u>b</u> What was your spouse's age as of December 31, 2022?									Fill in age ▶
9	If you and your spouse were under								4.	V N-
,	disabled? (See instructions)									
_	(see Schedule H instructions) in 20								1d	Yes No
<u>2</u>	Were you a legal resident of Wisco	nsin from	1-1-22 t	through 1	2-31-2	2? (If	"No," you do	o not qual	ify.) 2	Yes No
<u>3</u>	Were you claimed or will you be clatax return? (If "Yes" and you were									Yes No
<u></u>	usehold Income Print numbers I	iko this 🗅	012	2 U S Z -	7 9 0	No	t lika thia 🔿	X147	NO C	OMMAS; NO CENTS
	Wisconsin income from line 7 of Fo									
<u>4</u> 5	If not filing a 2022 Wisconsin retur									.00
	<u>a</u> Wages00 + Inte							.00 =	5a	.00
	Other taxable income (list type and a									.00
	Medical and long-term care insurar		ction. Er							
6	Nontaxable income not included									
3	unemployment compensation								6a	.00
k	<u>o</u> Social security, federal and state S	SI, SSI-E,	SSD, a	nd CTS p	aymer	nts <i>(se</i>	e instruction	ns)	6b	.00
9	Railroad retirement benefits								6c	.00
	d Pensions, annuities, and other retir									
9	Contributions to deferred compens	ation plan	s (see bo	ox 12 of w	age sta	atemer	nts)		6e	.00
f	Contributions to IRA and SIMPLE p	lans							6f	.00
ç	g Interest on United States bonds an	d notes ar	nd state	and muni	icipal b	onds			6g	.00
	n Child support, maintenance payme									
į	Wisconsin Works (W2) payments, o	county reli	ef, kinsh	nip care, a	and oth	ner cas	sh public ass	sistance .	6i	.00
<u>7 a</u>	Add lines 4 through 6i (if less than	the total o	f lines 8	, 9a, and	9c, se	e instr	uctions)		7a	.00
k	Fill in number of qualifying depende	ents (do n	ot count	yourself	or you	r spou	se) 🕨	x \$500	0 = 7b	.00
(Household income. Subtract line 7b	from line 7a	a (if \$24.6	880 or mor	e, no c	redit is	allowed)		7с	.00



ATTACH rent certificate or property tax bill

2022 Schedule H-EZ Name SSN Page 2 of 2

Tax	es and/or Rent	Before completing th	is section, see instr	uctions for taxes	and/or rent (STEP 4).	<u>NO</u> CC	MMAS; <u>NO</u> CENTS
<u>8</u>	Homeowners –	Net 2022 property taxe	es on your homeste	ad. Attach your	2022 tax bill .		. 8 _	.00
9	Renters- Rent f Schedule.	rom line 8a of your rer	nt certificate(s) or lir	ne 7 of your Sha	red Living Ex	penses		
	Heat included (8b of rent certificate is	"Yes")	9a 🕨	.00 x .:	20 (20%) =	9b _	.00
	Heat not include	ed (8b of rent certificat	e is "No")	9c 🕨	.00 x .:	25 (25%) =	9d _	.00
<u>10</u>	Add lines 8, 9b,	, and 9d (or enter amo	unt from line 6 of Ta	axes/Rent Reduc	tion Schedule	e)	10 _	.00
Cre	dit Computation						NO CC	MMAS; <u>NO</u> CENTS
11	Fill in the small	er of the amount on lir	ne 10 or \$1,460				11	.00
12		ınt on line 7c, fill in the						.00
13		? from line 11 (if line 12						
<u>14</u>	Homestead cre	dit – Using the amount	on line 13, fill in the	e credit from Tak	ole B (page 2	26)	14 _	.00
	If filing a Wiscon or line 63 of For	nsin income tax return rm 1NPR.	, fill in your homeste	ead credit (line 1	4) on line 32	of Form 1		
^{Unde} Sigi here	Claimant's sign	declare this homestead cre nature	edit claim and all attacl Date	hments are true, co Daytime phon				knowledge and belief. ction PIN (7 characters)
Sig:		iture	Date	Daytime phon	e number W	/isconsin Ident	ity Prote	ction PIN (7 characters)
Cauti	ion: Only enter a V	Visconsin Identity Protecti	on PIN if you received	one from the depa	artment (see pa	ge 21).		
Mail	to:				_	partment Use	Only	
PO E	onsin Departmer Box 34 son WL 53786-0				С			

