

1 Wisconsin income tax

For the year Jan. 1 - Dec. 31, 1995, or other tax year beginning _____, 1995 ending _____, 19__

1995

Place label here or print

Your last name	First name and middle initial	Social security number	QUICK REFUND Do you qualify (see page 3)? If so, fill in the amount from line 30 less any amount on line 32, affix your label, and mail your return to: Quick Refund, P.O. Box 38, Madison, WI 53787-0001. <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> Check proper box and fill in name of city, village, or town, and the county in which you lived at the end of 1995. <input type="checkbox"/> City of _____ <input type="checkbox"/> Village of _____ <input type="checkbox"/> Town of _____ County of _____
If a joint return, spouse's last name	First name and middle initial	Social security number	
Home address (number and street)			
City or post office		State Zip code	
If you want \$1 to go to the State Election Campaign Fund, check box(es). <input type="checkbox"/> You <input type="checkbox"/> Your spouse Checking the box(es) will not change your tax or refund.			
Filing status (check only one box) <input type="checkbox"/> Single <input type="checkbox"/> Married filing joint return (even if only one had income) <input type="checkbox"/> Married filing separate return. Fill in spouse's full name and social security number <input type="checkbox"/> <input type="checkbox"/> Head of household (with qualifying person). Fill in qualifying person's name <input type="checkbox"/>		School district number (see page 26) _____	

STAPLE withholding statements to back (at top) of form

PAPER CLIP check or money order here

		You	Spouse
Income earned in Minnesota. Was any of your income from personal or professional services performed in Minnesota while a Wisconsin resident? (See page 4)	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, fill in the amount of Minnesota income: \$ _____	\$ _____
1 Federal adjusted gross income (from line 31 of federal Form 1040 or line 16 of Form 1040A)	1	_____	_____
2 Additions. Complete Schedule 1 on reverse side	2	_____	_____
3 Add lines 1 and 2	3	_____	_____
4 Subtractions (state income tax refunds, etc.). Complete Schedule 2 on reverse side	4	_____	_____
5 Subtract line 4 from line 3. This is your Wisconsin income	5	_____	_____
6 Tax (Caution: Please read page 9 of instructions.) Check if from <input type="checkbox"/> Tax Table or <input type="checkbox"/> Special Tax Worksheet ...	6	_____	_____
7 Dependent credit. Fill in number of dependents (do not count yourself or spouse) ... x \$50 =	7	_____	_____
8 Senior citizen credit (see page 10)	8	_____	_____
9 Wisconsin itemized deduction credit. Complete Schedule 3 on reverse side	9	_____	_____
10 School property tax credit			
a. Rent paid in 1995-heat included Find credits from table, page 11	10a	_____	_____
b. Property taxes paid on home in 1995 Find credit from table, page 11	10b	_____	_____
11 Add lines 7 through 10b	11	_____	_____
12 Subtract line 11 from line 6. If line 11 is larger than line 6, fill in -0-	12	_____	_____
13 Alternative minimum tax. Attach Schedule MT	13	_____	_____
14 Add lines 12 and 13	14	_____	_____
15 Married couple credit. Complete Schedule 4 on reverse side	15	_____	_____
16 Subtract line 15 from line 14. If line 15 is larger than line 14, fill in -0-. This is your net tax	16	_____	_____
17 Temporary recycling surcharge (see page 13). <input type="checkbox"/> Check if surcharge computed on worksheet			
If worksheet not used, fill in nonfarm net business income x .004345 =	17	_____	_____
18 Sales and use tax due on out-of-state purchases (see page 14)	18	_____	_____
19 Endangered Resources Donation (decreases refund or increases amount owed)	19	_____	_____
20 Penalties on retirement plans (see page 15) x .33 =	20	_____	_____
21 Add lines 16 through 20	21	_____	_____
22 Wisconsin income tax withheld. Attach readable withholding statements	22	_____	_____
23 1995 estimated tax payments and amount applied from 1994 return	23	_____	_____
24 Earned income credit. Qualifying children _____ Federal credit _____ x _____% =	24	_____	_____
25 Farmland preservation credit. Attach Schedule FC	25	_____	_____
26 Net income tax paid to other states (see page 16)	26	_____	_____
27 Homestead credit. Attach Schedule H	27	_____	_____
28 Farmland tax relief credit Property taxes on farmland _____ x .10 =	28	_____	_____
29 Add lines 22 through 28	29	_____	_____
30 If line 29 is larger than line 21, subtract line 21 from line 29. This is the AMOUNT OF YOUR REFUND	30	_____	_____
31 If line 29 is smaller than line 21, subtract line 29 from line 21. This is the AMOUNT YOU OWE	31	_____	_____
32 Amount of line 30 to be applied to your 1996 estimated tax	32	_____	_____

Sign here 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 _____ Date _____

Spouse's signature (if filing jointly, BOTH must sign) _____

Attach a copy of your federal income tax return and schedules to this return

For Department Use Only

R	M	Y	T	MAN	D	A	P	C
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Mail return to address shown on back

