



Complete form using BLACK INK

IE	С	Complete form using BLACK INK									
Щ.		our legal last name	Legal first name M.				M.I.	Your social security number			
STAPI F	lf	a joint return, spouse's legal last name	Spouse's legal first name				M.I.	Spouse's social security number			
	н	ome address (number and street). If you have a PO	Box, see page 6	e 6. Apt. No.				Tax district Check below then fill in eithe name of city, village, or town and the cour			
		ity or post office	Sta	State Zip code				which you lived at the end of 2012. City Village T City, village,			
	Fi	ling status									
	L	Single									
	L	Married filing joint return (even if only	one had incor			School district number (see page 23)					
	L	Head of household F Also, check here if married. ►		ying person's name 🔻				Special conditions			
	P	rint numbers like this \rightarrow 0 2345	NO COMMAS; NO CENTS								
	1	Wages, salaries, tips, etc. (see page	.00								
s		Interest (see page 7)									
ENCLOSE withholding statements		Ordinary dividends (from your federal I									
aten		Capital gain distributions (see page									
g st		Unemployment compensation (from									
ldin	6	Taxable IRA distributions, pensions,	.00								
ohd	7	Add lines 1 through 6							.00		
witi	8	IRA deduction (see page 10)									
SE	9	Student loan interest deduction (see									
CLC	10	Medical care insurance deduction (s									
ĒN	11	Add lines 8 through 10	.00								
		Subtract line 11 from line 7. This is									
	13	If your parent (or someone else) can o									
	14	Fill in the standard deduction for y you checked line 13, fill in amount fi		.00							
	15	Subtract line 14 from line 12. If line			0						
		Exemptions (Caution: see page 11)									
~		a Fill in exemptions from your feder	al return)	×x	\$700	16a	.00	-		
Ń		b Check if 65 or older You +							-		
۵ ۵		c Add lines 16a and 16b							.00		
her	17	Subtract line 16c from line 15. If line 1	6c is larger th	nan lin	ie 15, fill ir	n 0. This is	your ta	exable income 17	.00		
nent	18	Tax. Use amount on line 17 to find	your tax usi	ng ta	ble, page	e 24			.00		
PAPER CLIP payment here		Armed forces member credit (must b School property tax credit a Rent paid in 2012–heat included	-								
		Pont paid in 2012, heat not included		.0	0 J table	credit from page 12 credit from	. 20a	.00	-		
		b Property taxes paid on home in 2012 _		.0	U ► table	page 13	20b	.00	-		
		Working families tax credit, see pag							-		
		Married couple credit. Complete sch							-		
I-080i		Add lines 19 through 22. This is the									
<u>0</u>	24	Subtract line 23 from line 18. If line	23 is larger	than	line 18, t	fill in 0. Th	nis is y	our net tax 24	.00		

2012	2 Form 1A	Name					S	SN			Page	2 of 2
										<u>O</u> COMMAS		NTS
25	Fill in net	tax from	line 24						25			.00
26	Sales and	d use tax	due on Internet	t, mail order	, or other ou	ut-of-state	purchases ((see page 1	5) 26			.00
27	If you certify that no sales or use tax is due, check here											
			sources		,		orial		.00			
			stadium		-		ief					
			h			-	eeding Amer.					
			und				saster Relief	-				
			is				8					
	e manipi	5 5010100		.00	J Opeoidi		dd lines a thr					.00
0	Add lines	25.20						•••				.00
			and 27k e tax withheld. Ei									.00
			x payments and							_		
30 31			edit (see page 1			Uniteluit	1 30		.0	5		
	Qualifying	n	Federal credit		00	0/	- 24		.0	0		
32			. Attach Schedul									
			and surviving spo							_		
			ıgh 33									.00
35			•									.00
										.00		
			you want REFU									.00
			an line 28, subtr							_		.00
			erest. Fill in exce							_		
55	(See page	19)			- 000 001.							
Thi	ird Do you	want to a	llow another person	to discuss thi	s return with t	he departme	ent (see page 1			lete the followir	ıg. 👝	No
Pa		Designee'				Phone	`	iden	ification			
	signee					no. ▶ ()	num	ber (PIN)			
	in below	Under	penalties of law, I de					and complete		of my knowledg	ge and be	lief.
Tour	Your signature Spouse's signature					e (if filing jointly, BOTH must sign)			()		
Mail	your returi	n to:	Wisconsin Departm	ent of Revenu	e <i>lf ta</i>	 x due		PO Box	268, Madis		0001	
	-						edit claimed ax due					
			lowing Co.						-			
		N	larried Cou	ipie Cre		п вош	-			(B) YOUR	SBOILS	-
1			ps, and other en				(A)	TOURSEL			3F003	<u> </u>
			Do not include d ellowships that a				1		.00			.00
2			ny, from line 8 of						.00			.00
			n line 1						.00			.00
	Compare	amounts	in columns (A)	and (B) of li	ne 3. Fill in t	the			I -	.00		
5			re. If more than 3 (3%)									
			ne 5. Round the					•				
								6		.00		

