



Check here if an amended return

**DO NOT STAPLE**

<b>Your legal last name</b>	<b>Legal first name</b>	<b>M.I.</b>	<b>Your social security number</b>
<b>If a joint return, spouse's legal last name</b>	<b>Spouse's legal first name</b>	<b>M.I.</b>	<b>Spouse's social security number</b>
<b>Home address (number and street). If you have a PO Box, see page 11.</b>		<b>Apt. No.</b>	<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 2017.  <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 31) _____ <b>Special conditions</b> <input type="checkbox"/> _____
<b>City or post office</b>	<b>State</b>	<b>Zip code</b>	
<b>Filing status</b>			
<input type="checkbox"/> Single			
<input type="checkbox"/> Married filing joint return (even if only one had income)			
<input type="checkbox"/> Head of household      Fill in qualifying person's name <input type="checkbox"/> _____			
Also, check here if married. <input type="checkbox"/> _____			

**Use BLACK Ink** ● **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**

**ENCLOSE withholding statements**

<b>1</b>	Wages, salaries, tips, etc. (see page 12) . . . . .	<b>1</b>	.00
<b>2</b>	Interest (see page 12) . . . . .	<b>2</b>	.00
<b>3</b>	Ordinary dividends (from line 9a of federal Form 1040A or 1040) . . . . .	<b>3</b>	.00
<b>4</b>	Capital gain distributions (see page 14) . . . . .	<b>4</b>	.00
<b>5</b>	Unemployment compensation (from worksheet, page 14) . . . . .	<b>5</b>	.00
<b>6</b>	Taxable IRA distributions, pensions, and annuities (see page 15) . . . . .	<b>6</b>	.00
<b>7</b>	Add lines 1 through 6 . . . . .	<b>7</b>	.00
<b>8</b>	IRA deduction (see page 16) . . . . .	<b>8</b>	.00
<b>9</b>	Student loan interest deduction (see page 16) . . . . .	<b>9</b>	.00
<b>10</b>	Medical care insurance deduction (see page 17) . . . . .	<b>10</b>	.00
<b>11</b>	Add lines 8 through 10 . . . . .	<b>11</b>	.00
<b>12</b>	Subtract line 11 from line 7. This is your Wisconsin income . . . . .	<b>12</b>	.00
<b>13</b>	If your parent (or someone else) can claim you (or your spouse) as a dependent, check here <input type="checkbox"/>	<b>13</b>	<input type="checkbox"/>
<b>14</b>	Fill in the <b>standard deduction</b> for your filing status from table, page 39. <b>But if</b> you checked line 13, fill in amount from worksheet, page 18 . . . . .	<b>14</b>	.00
<b>15</b>	Subtract line 14 from line 12. If line 14 is larger than line 12, fill in 0 . . . . .	<b>15</b>	.00
<b>16 Exemptions</b>	(Caution: see page 18)		
<b>a</b>	Fill in exemptions from your federal return . . . . . <input type="checkbox"/> x \$700 . .	<b>16a</b>	.00
<b>b</b>	Check if 65 or older <input type="checkbox"/> You + <input type="checkbox"/> Spouse = <input type="checkbox"/> x \$250 . .	<b>16b</b>	.00
<b>c</b>	Add lines 16a and 16b . . . . .	<b>16c</b>	.00
<b>17</b>	Subtract line 16c from line 15. If line 16c is larger than line 15, fill in 0. This is your taxable income	<b>17</b>	.00
<b>18</b>	Tax. Use amount on line 17 to find your tax using table, page 32 . . . . .	<b>18</b>	.00
<b>19</b>	Armed forces member credit (must be stationed outside U.S., see page 19)	<b>19</b>	.00
<b>20</b>	School property tax credit		
<b>a</b>	Rent paid in 2017—heat included . . . . . <input type="checkbox"/> .00 } Find credit from table page 20 . .	<b>20a</b>	.00
	Rent paid in 2017—heat not included . . . . . <input type="checkbox"/> .00 }		
<b>b</b>	Property taxes paid on home in 2017 . . . . . <input type="checkbox"/> .00 } Find credit from table page 21 . .	<b>20b</b>	.00
<b>21</b>	Married couple credit. Complete schedule on reverse side . . . . .	<b>21</b>	.00
<b>22</b>	Add lines 19 through 21. This is the total of your credits . . . . .	<b>22</b>	.00
<b>23</b>	Subtract line 22 from line 18. If line 22 is larger than line 18, fill in 0. This is your net tax . .	<b>23</b>	.00

**PAPER CLIP payment here**

<b>24</b> Fill in net tax from line 23 .....	<b>24</b>	_____	.00
<b>25</b> Sales and use tax due on Internet, mail order, or other out-of-state purchases (see page 22) .....	<b>25</b>	_____	.00
If you certify that no sales or use tax is due, check here <input type="checkbox"/>			
<b>26</b> Donations (decreases refund or increases amount owed)			
<b>a</b> Endangered resources .....	_____	.00	
<b>b</b> Cancer research .....	_____	.00	
<b>c</b> Veterans trust fund .....	_____	.00	
<b>d</b> Multiple sclerosis .....	_____	.00	
<b>e</b> Military family relief .....	_____	.00	
<b>f</b> Second Harvest/Feeding Amer. ....	_____	.00	
<b>g</b> Red Cross WI Disaster Relief .....	_____	.00	
<b>h</b> Special Olympics Wisconsin .....	_____	.00	
Total (add lines a through h) ...			<b>26i</b> _____ .00
<b>27</b> Add lines 24, 25, and 26i .....	<b>27</b>	_____	.00
<b>28</b> Wisconsin income tax withheld. Enclose withholding statements .....	<b>28</b>	_____	.00
<b>29</b> 2017 estimated tax payments and amount applied from 2016 return .....	<b>29</b>	_____	.00
<b>30</b> Earned income credit (see page 24)			
Qualifying children <input type="checkbox"/> .....	Federal credit ..	.00 x _____ % = ..	<b>30</b> _____ .00
<b>31</b> Homestead credit. Attach Schedule H or H-EZ .....	<b>31</b>	_____	.00
<b>32</b> Eligible veterans and surviving spouses property tax credit (see page 25) .....	<b>32</b>	_____	.00
<b>33</b> <b>AMENDED RETURN ONLY</b> – amount previously paid (see page 27) .....	<b>33</b>	_____	.00
<b>34</b> Add lines 28 through 33 .....	<b>34</b>	_____	.00
<b>35</b> <b>AMENDED RETURN ONLY</b> – amount previously refunded (see page 27) .....	<b>35</b>	_____	.00
<b>36</b> Subtract line 35 from line 34 .....	<b>36</b>	_____	.00
<b>37</b> If line 36 is more than line 27, subtract line 27 from line 36. This is the <b>AMOUNT YOU OVERPAID</b> ..	<b>37</b>	_____	.00
<b>38</b> Amount of line 37 you want <b>REFUNDED TO YOU</b> .....	<b>38</b>	_____	.00
<b>39</b> Amount of line 37 you want <b>applied to your 2018 estimated tax</b> .....	<b>39</b>	_____	.00
<b>40</b> If line 36 is less than line 27, subtract line 36 from line 27. This is the <b>AMOUNT YOU OWE</b> ..	<b>40</b>	_____	.00
<b>41</b> Underpayment interest. Fill in exception code – See Sch. U → _____	<b>41</b>	_____	.00

**Third Party Designee** Do you want to allow another person to discuss this return with the department (see page 30)?  **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:** If tax due..... PO Box 268, Madison WI 53790-0001 If refund or no tax due.... PO Box 59  
 Wisconsin Department of Revenue If homestead credit claimed... PO Box 34, Madison WI 53786-0001 Madison WI 53785-0001

<b>Married Couple Credit When Both Spouses Are Employed</b>		(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	_____ .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 21 of Form 1A .....	<b>6</b>	_____ <b>Do NOT fill in more than \$480</b>	_____ .00

