

# Nonresident Military Spouse Withholding Exemption

## Part I - Information About the Employee

Legal last name	Legal first name	M.I.	Social Security Number
Address (number and street)			
City or Post Office		State	Zip code

## Part II - Employee's Certification: Wages are Exempt from Wisconsin's Income Tax and Withholding

☐ I certify that:

- My spouse is a member of the armed forces and is present in Wisconsin in compliance with military orders,
- I am present in Wisconsin solely to be with my spouse, and
- My wages are exempt from Wisconsin income tax and withholding because I qualify and choose to make an election under [50 U.S.C. 4001\(a\)\(3\)](#) to be a resident of \_\_\_\_\_.

## Part III – Employee No Longer Qualifies for Exemption from Wisconsin's Income Tax and Withholding

☐ I no longer qualify for the exemption under Part II as of \_\_\_\_\_.  
Date (mm/dd/yyyy)

## Part IV – Employee's Signature

*Under penalties of perjury, I declare that the above information is true, correct, and complete to the best of my knowledge and belief.*

**SIGN  
HERE →**

Name	Date
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## Part V – Information About the Employer

Legal name	Employer Federal ID Number	
Address (number and street)		
City or Post Office	State	Zip code