Due Date Update

The due dates for filing and making payments for certain 2020 income tax returns have changed. The due dates on this form may not reflect the new due dates. For information on the new filing and payment due dates, see the article 2020 Wisconsin Tax Return Due Dates and Payments.

Update as a Result of 2021 Wisconsin Act 1

On February 18, 2021, Governor Tony Evers signed <u>2021 Wisconsin Act 1</u>. The law provides the following changes to the 2020 tax year:

Earned Income Tax Credit

Wisconsin adopted section 211 of Division EE of <u>Public Law 116-260</u>, allowing taxpayers to elect to use their 2019 earned income to compute their 2020 federal and Wisconsin earned income tax credits.

.00

.00

.00

1	Wisconsin L
	income tax

Income tax	F	or the yea	ar Jan. 1	-De	c. 31, 2020, or other tax year	
Check here if an amended return	b be	eginning			, 2020 ending	, 20
Your legal last name	Legal first name		ľ	M.I.	Your social security number	
If a joint return, spouse's legal last name	Spouse's legal first na	ame	ı	M.I.	Spouse's social security number	
Home address (number and street). If you have	a PO Box, see page 11	1. Zip code	Apt. no.		Tax district Check below then fill in either the city, village, or town and the count lived at the end of 2020.	
Filing status Check ✓ below Single Married filing joint return Married filing separate return. Fill in spouse's SSN above and full name here Head of household, NOT married (see page 12). Head of household, married (see page 12).	ed If married, fill in spouse's SSN above and full name here		M.I.	City, village, or town County of		
Federal adjusted gross income (s Form W-2 wages included in lir	ee page 12)				1	_
2 Total additions to income from Sc	hedule AD, line 33	ß (see pag	je 13)		2	ا۔
3 Add lines 1 and 2					3	ا.
4 Total subtractions from income from	om Schedule SB, li	ine 47. En	nter as a p	posit	ive number 4	
5 Subtract line 4 from line 3. This is	your Wisconsin in	come			5	
6 Standard deduction. See table of If someone else can claim you (or y	n page 34, OR vour spouse) as a de	ependent,	see page	 e 14 a	6	
7 Subtract line 6 from line 5. If line 6						.(





b Check if 65 or older ____ You **+** ___ Spouse **=** ____ x \$250 ... **8b** _____

9 Subtract line 8c from line 7. If line 8c is larger than line 7, fill in 0. This is taxable income **9**

8 Exemptions (Caution: See page 14)

2020 Form 1 Name SSN Page **2 of 4**

		NO COMMAS; NO CENTS
11	Itemized deduction credit. Enclose Schedule 1, page 4	.00
12	Armed forces member credit (must be stationed outside U.S. See page 16)	.00
13	School property tax credit	
	Rent paid in 2020 – heat included Rent paid in 2020 – heat not included .00 Find credit from table page 18 . 13a	
	b Property taxes paid on home in 202000 Find credit from table page 19 . 13b 00	
14	Working families tax credit (see page 19)	
15	Married couple credit. Enclose Schedule 2, page 4	
16	Nonrefundable credits from line 34 of Schedule CR	
17	Net income tax paid to another state. Enclose Schedule OS 1700	
18	Add lines 11 through 17	.00
19	Subtract line 18 from line 10. If line 18 is larger than line 10, fill in 0. This is your net tax 19	.00
20	Sales and use tax due on internet, mail order, or other out-of-state purchases (see page 22) 20 If you certify that no sales or use tax is due, check here	.00
21	Donations (decreases refund or increases amount owed)	
	a Endangered resources e Military family relief	
	b Cancer research	
	c Veterans trust fund	
	d Multiple sclerosis	
	Total (add lines a through h) > 21i	.00
22	Penalties on IRAs, retirement plans, MSAs, etc. (see page 24) 00 x .33 = 22	.00
23	Other penalties (see page 24)	.00
24	Add lines 19, 20, 21i, 22 and 23	.00
25	Wisconsin tax withheld. Enclose withholding statements	
26	2020 estimated tax payments and amount applied from 2019 return 2600	
27	Earned income credit. Number of qualifying children >	
	credit	
28	Farmland preservation credit. a Schedule FC, line 17	
	b Schedule FC-A, line 13	
29	Renayment credit (see page 26) 29 00	



2020) Form 1						Pac	ge 3 of 4
	ne(s) shown on Form 1				Your socia	al security n		,
					NC	COMMA	S; <u>NO</u>	CENTS
30	Homestead credit. Enclose Schedule H or H-EZ	30		.0	<u>)</u>			
31	Eligible veterans and surviving spouses property tax credit	31		.0	<u>)</u>			
32	Refundable credits from Schedule CR, line 40. Enclose Schedule CR	₹ 32		.0	<u>)</u>			
33	AMENDED RETURN ONLY-Amounts previously paid (see page 29)	33		.0	<u>)</u>			
34	Add lines 25 through 33	34		.0	<u> </u>			
35	AMENDED RETURN ONLY—Amounts previously refunded (see page 30	35		.0	<u>)</u>			
36	Subtract line 35 from line 34				36			.00
37	If line 36 is larger than line 24, subtract line 24 from line 36. This is the AMOUNT YOU OVERPAID				37			.00
38	Amount of line 37 you want REFUNDED TO YOU				38			.00
39	Amount of line 37 you want APPLIED TO YOUR 2021 ESTIMATED TAX	39		.0	<u> </u>			
40	If line 36 is smaller than line 24, subtract line 36 from line 24. This is the AMOUNT YOU OWE . Paper clip payment to front of	of retu	urn		40			.00
41	Underpayment interest. Fill in exception code-See Sch. UAlso include on line 40 (see page 31)	_, 41		.0	<u> </u>			
Thi		artmer	nt (see page 32)?			ete the follow	ving.	No
Par Des	Designee's Pho)	Person identific number	ation			
<u></u>	Paper clip copies of your federal income tax r Assemble your return (pages 1-4) and withholds gn here Under penalties of law, I declare that this return and all attachments are signature Spouse's signature (if filing jointly, Bo	ing s	statements	in the or	der lis	ted on	lge and	
	Species a signature (in mining jointry), or		9,		()		
-010a	 ai		<u> </u>					

Do Not Submit Photocopies



2020 Form 1 Name SSN Page **4 of 4**

NO COMMAS; NO CENTS

Schedule 1	1 – Itemized	Deduction	Credit	(see nage	15)
Schedule	ı – nennzeu	Deduction	Credit	isee paue	101

1	Medical and dental expenses from federal Schedule A (Form 1040 or 1040-SR). See instructions for exceptions	1	.00
2	Interest paid from federal Schedule A (Form 1040 or 1040-SR). Do not include interest paid to purchase a second home located outside Wisconsin or a residence which is a boat. Also, do not include interest paid to purchase or hold U.S. government securities and interest from a tax-option (S) corporation if claimed as a subtraction	2	.00
3	Gifts to charity from federal Schedule A (Form 1040 or 1040-SR). See instructions for exceptions	3	.00
<u>4</u>	Casualty losses from federal Schedule A (Form 1040 or 1040-SR)	4	.00.
<u>5</u>	Add lines 1 through 4	5	.00
6	Fill in your standard deduction from line 6 on page 1 of Form 1	6	.00
7	Subtract line 6 from line 5. If line 6 is more than line 5, fill in 0	7	.00
8	Rate of credit is .05 (5%)	8	x .05
9	Multiply line 7 by line 8. Fill in here and on line 11 on page 2 of Form 1	9	.00

You must submit this page with Form 1 if you claim either of these credits

4

Schedule 2 - Married Couple Credit When Both Spouses Are Employed (see page 20)

When completing this schedule, be sure to fill in your income in column (A) and your spouse's income in column (B)

		(A) YOURSELF	(B) SPOUSE
1	Taxable wages, salaries, tips, and other employee compensation. Do NOT include deferred compensation, interest, dividends, pensions, unemployment compensation, or other unearned income 1	.00	.00
2	Net profit or (loss) from self-employment from federal Schedules C, C-EZ, and F (Form 1040 or 1040-SR), Schedule K-1 (Form 1065), and any other taxable self-employment or earned income 2	.00	.00
3	Combine lines 1 and 2. This is earned income	.00	.00
4	Add the amounts from federal Form 1040 or 1040-SR, Schedule 1 , lines 11, 15, and 19, plus repayment of supplemental unemployment benefits, and contributions to secs. 403(b) and 501(c)(18)(D) pension plans, included in line 22, and any Wisconsin disability income exclusion. Fill in the total of these adjustments that apply to you or your spouse's income	.00	.00.
5	Subtract line 4 from line 3. This is qualified earned income. If less than zero, fill in 0	.00	.00
6	Compare the amounts in columns (A) and (B) of line 5. Fill in the smaller amount here. If more than \$16,000, fill in \$16,000	6	.00
7	Rate of credit is .03 (3%)	7	x .03
8	Multiply line 6 by line 7. Fill in here and on line 15 on page 2 of Form 1	8	Do not fill in

