

Check here if an amended return ▶ \_

2025

Claimant's social security number		Spouse's social security number					Check below then fill in either the name of the city, village, or town, and the county in which you lived			
Claimant's legal last name		Claimant's legal first name				M.I.	at the end o			-
									\	/illage Town
S	pouse's legal last name	Spouse's lega	al first name			M.I.	City, village, or town			
С	urrent home address (number and street)	l			Apt. no		County of			
С	ity or post office		State	Zip code			Special conditions			age 10 of the ule H instructions.)
1 a	What was your age as of Decembe	r 31, 2025	5? (If you	ı were un	der 18	, you c	lo not qualify	/ for		
	homestead credit for 2025.)								1a	Fill in age ▶
ļ	<u>b</u> What was your spouse's age as of December 31, 2025?									Fill in age ▶
9	If you and your spouse were under								4-	Vaa Na
	disabled? (See instructions) disabled? (See instructions) disabled?								1C	Yes No
_	(see Schedule H instructions) in 20								1d	Yes No
<u>2</u>	Were you a legal resident of Wisco	nsin from	1-1-25 t	through 1	2-31-2	5? (If	"No," you do	not quali	ify.) <b>2</b>	Yes No
<u>3</u>	Were you claimed or will you be clatax return? (If "Yes" and you were									Yes No
Hoi	usehold Income Print numbers I	ika this -	012	3456	7 2 9	No	t lika this →	α147	NO C	COMMAS; NO CENTS
	Wisconsin income from line 7 of Fo						-			
<u>4</u> 5	If <b>not filing</b> a 2025 Wisconsin retur								<del></del>	.00
	<u>a</u> Wages							.00 =	5a	.00
	Other taxable income (list type and a									.00.
	Medical and long-term care insurar									
6	Nontaxable income not included					vo man				
	unemployment compensation								6a	.00
	<b>2</b> Social security, federal <b>and</b> state S									.00.
	Railroad retirement benefits									
	d Pensions, annuities, and other retir									
	Contributions to deferred compens									
	Contributions to IRA and SIMPLE p									
	g Interest on United States bonds an									
	<u>n</u> Child support, maintenance payme									
i										
-	Add lines 4 through 6i (if less than									
	<b>p</b> Fill in number of qualifying dependent									
	Household income. Subtract line 7b									



ATTACH rent certificate or property tax bill

2025 Schedule H-EZ Name SSN Page **2 of 2** 

		_						
Tax	es and/or Rent	Before comple	ting this section, see ins	tructions for taxes	s and/or rent	(STEP 4).	NO CO	MMAS; <u>NO</u> CENTS
<u>8</u>	Homeowners –	Net <b>2025</b> proper	ty taxes on your homest	tead. Attach your	2025 tax bill		. 8	.00
<u>9</u>	Renters- <b>Rent</b> Schedule.	from line 8a of yo	our rent certificate(s) or I	line 7 of your Sha	ared Living E	Expenses		
	Heat included (	(8b of rent certific	cate is "Yes")	. 9a 🕨	.00 x	.20 (20%) =	9b	.00
	Heat not includ	led (8b of rent ce	rtificate is "No")	9c 🕨	.00 x	.25 (25%) =	9d	.00
<u>10</u>	Add lines 8, 9b	, and 9d (or ente	r amount from line 6 of <sup>-</sup>	Taxes/Rent Redu	ction Schedu	ıle)	10	.00
		_						
Cred	dit Computation	1					NO CO	MMAS; <u>NO</u> CENTS
11	Fill in the <b>smal</b>	<b>ler</b> of the amoun	t on line 10 or \$1,460				11	.00
12	Using the amou	unt on line 7c, fill	in the appropriate amou	unt from <b>Table A</b>	(page 25) .		12	.00
13	Subtract line 12	2 from line 11 ( <b>if</b>	line 12 is more than lin	ne 11, fill in 0; no	credit is allo	wable)	13	.00
<u>14</u>	Homestead cre	edit – Using the a	mount on line 13, fill in tl	he credit from <b>Tal</b>	<b>ble B</b> (page	26)	14	.00
	If filing a Wisco or line 63 of Fo	3 of Form 1						
<sup>Under</sup> Sigr	Claimant's sign		tead credit claim and all atta Date	chments are true, co Daytime phor ( )				nowledge and belief. ion PIN (7 characters)
Sigr	Spouse's signa	ature	Date	Daytime phor	ne number	Wisconsin Ident	ity Protect	tion PIN (7 characters)
here				( )				
Cauti	on: Only enter a \	Wisconsin Identity I	Protection PIN if you receive	ed one from the dep	artment <i>(see p</i>	page 21).		
РО В	to: onsin Departme lox 34				For L C	Department Use	Only	

