

# 1X AMENDED return

## Wisconsin income tax



For the year January 1 – December 31, 2012, or other tax year beginning \_\_\_\_\_, 2012 ending \_\_\_\_\_, 20 \_\_\_\_\_

# 2012

### Complete form using BLACK INK

DO NOT STAPLE

|   |                           |          |   |
|---|---------------------------|----------|---|
| Your legal last name  | Legal first name          | M.I.     | Your social security number                 |
| If a joint return, spouse's legal last name   | Spouse's legal first name | M.I.     | Spouse's social security number             |
| Current home address (number and street)  |                           | Apt. No. |   |
| City or post office   | State                     | Zip code |   |
| <div style="border: 1px solid black; padding: 5px; background-color: #e0f0ff;"> <ul style="list-style-type: none"> <li>USE THIS FORM TO AMEND 2012 ONLY. (See instructions)</li> <li>PART-YEAR RESIDENTS OR NONRESIDENTS MAY NOT USE THIS FORM.</li> </ul> </div> |                           |          |   |
| If married filing separate, fill in spouse's social security number above and full name here<br>Legal last name                      Legal first name                      M.I.   |                           |          | Special conditions <input type="checkbox"/> |

#### Filing status (Note You cannot change from joint to separate returns after the due date.)

On original return ▶  Single     Married filing joint     Married filing separate     Head of household

On this return ▶  Single     Married filing joint     Married filing separate     Head of household ▶ Also, check here if married

See page 5 before assembling return

|   | 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                 |
|---|---|-------------------------|-------------------------------------|
| 1 Wisconsin income (see instructions) . . . . .   | 1   |                         | .00                                 |
| Form W-2 wages included in line 1 . . . . .   |   |                         | .00                                 |
| 2 Standard deduction. See table on page 8, OR ▼ . . . . .   | 2   |                         | .00                                 |
| If someone else can claim you (or your spouse) as a dependent, see page 2 and check here . . ▶ <input type="checkbox"/> |   |                         |                                     |
| 3 Subtract line 2 from line 1. If line 2 is larger than line 1, fill in 0 . . . . .                                     | 3   |                         | .00                                 |
| 4 Exemptions (Caution: see instructions, page 2)  |   |                         |                                     |
| a Fill in exemptions from your federal return _____ x \$700 . . 4a  |   |                         | .00                                 |
| b Check if 65 or older <input type="checkbox"/> You + <input type="checkbox"/> Spouse = _____ x \$250 . . 4b            |   |                         | .00                                 |
| c Add lines 4a and 4b . . . . .   | 4c  |                         | .00                                 |
| 5 Subtract line 4c from line 3. If line 4c is larger than line 3, fill in 0 . . . . .                                   | 5   |                         | .00                                 |
| 6 Tax (see table on page 10) . . . . .  | 6   |                         | .00                                 |
| 7 Itemized deduction credit (see instructions) . . . . .  | 7   |                         | .00                                 |
| 8 Armed forces member credit . . . . .  | 8   |                         | .00                                 |
| 9 School property tax credit  |   |                         |                                     |
| a Rent paid in 2012–heat included _____ .00   |   | }                       | Find credit from table page 6 .. 9a |
| Rent paid in 2012–heat not included _____ .00   |   |                         |                                     |
| b Property taxes paid on home in 2012 _____ .00   |   | }                       | Find credit from table page 7 .. 9b |
|   |   |                         |                                     |
| 10 Historic rehabilitation credits . . . . .  | 10  |                         | .00                                 |
| 11 Working families tax credit . . . . .  | 11  |                         | .00                                 |
| 12 Certain nonrefundable credits from Schedule CR, line 8 . . . . .   | 12  |                         | .00                                 |
| 13 Add credits on lines 7 through 12 . . . . .  | 13  |                         | .00                                 |
| 14 Subtract line 13 from line 6. If line 13 is more than line 6, fill in 0 . . . . .                                    | 14  |                         | .00                                 |
| 15 Alternative minimum tax . . . . .  | 15  |                         | .00                                 |
| 16 Add lines 14 and 15 . . . . .  | 16  |                         | .00                                 |

PAPER CLIP payment here

|           |  |                                      |   |
|-----------|--|--------------------------------------|---|
| <b>17</b> | Amount from line 16  | <b>17</b>                            | <u>.00</u>  |
| <b>18</b> | Married couple credit (see instructions)   | <b>18</b>                            | <u>.00</u>  |
| <b>19</b> | Other credits from Schedule CR, line 21  | <b>19</b>                            | <u>.00</u>  |
| <b>20</b> | Net income tax paid to another state   | <b>20</b>                            | <u>.00</u>  |
| <b>21</b> | Add lines 18 through 20  | <b>21</b>                            | <u>.00</u>  |
| <b>22</b> | Subtract line 21 from line 17. If line 21 is more than line 17, fill in 0                    | <b>22</b>                            | <u>.00</u>  |
| <b>23</b> | Economic development surcharge   | <b>23</b>                            | <u>.00</u>  |
| <b>24</b> | Sales and use tax on Internet, mail order, or other out-of-state purchases                   | <b>24</b>                            | <u>.00</u>  |
|           | If you certify that no sales or use tax is due, check here                                   |                                      | <input type="checkbox"/>                          |
| <b>25</b> | Donations (decreases refund or increases amount owed)  |                                      |   |
| <b>a</b>  | Endangered resources   | <b>f</b>                             | Firefighters memorial                             |
| <b>b</b>  | Packers football stadium   | <b>g</b>                             | Military family relief                            |
| <b>c</b>  | Cancer research  | <b>h</b>                             | Second Harvest/Feeding Amer.                      |
| <b>d</b>  | Veterans trust fund  | <b>i</b>                             | Red Cross WI Disaster Relief                      |
| <b>e</b>  | Multiple sclerosis   | <b>j</b>                             | Special Olympics                                  |
|           |  | <b>Total (add lines a through j)</b> | <b>25k</b> <u>.00</u>                             |
| <b>26</b> | Penalties on IRAs, other retirement plans, MSAs, etc.  | <b>26</b>                            | <u>.00</u> x .33 = <u>.00</u>                     |
| <b>27</b> | Credit repayments and other penalties  | <b>27</b>                            | <u>.00</u>  |
| <b>28</b> | Add lines 22 through 24 and 25k through 27   | <b>28</b>                            | <u>.00</u>  |
| <b>29</b> | Wisconsin income tax withheld  | <b>29</b>                            | <u>.00</u>  |
| <b>30</b> | Wisconsin estimated tax payments for 2012  | <b>30</b>                            | <u>.00</u>  |
| <b>31</b> | Earned income credit. Number of qualifying children  |                                      | <input type="checkbox"/>                          |
|           | Federal credit   |                                      | <u>.00</u> x <u>    </u> % = <b>31</b> <u>.00</u> |
| <b>32</b> | Farmland preservation credit.  | <b>a</b>                             | Schedule FC, line 18 <b>32a</b> <u>.00</u>        |
|           |  | <b>b</b>                             | Schedule FC-A, line 13 <b>32b</b> <u>.00</u>      |
| <b>33</b> | Repayment credit   | <b>33</b>                            | <u>.00</u>  |
| <b>34</b> | Homestead credit (Enclose Schedule H or H-EZ)  | <b>34</b>                            | <u>.00</u>  |
| <b>35</b> | Eligible veterans and surviving spouses property tax credit                                  | <b>35</b>                            | <u>.00</u>  |
| <b>36</b> | Other credits from Schedule CR, line 32  | <b>36</b>                            | <u>.00</u>  |
| <b>37</b> | Amount paid with 2012 return, plus additional payments after it was filed (see instructions) | <b>37</b>                            | <u>.00</u>  |
| <b>38</b> | Add lines 29 through 37 and fill in total  | <b>38</b>                            | <u>.00</u>  |
| <b>39</b> | Refund from 2012 return (see instructions)   | <b>39</b>                            | <u>.00</u>  |
| <b>40</b> | Subtract line 39 from line 38 and fill in result   | <b>40</b>                            | <u>.00</u>  |



|                          |                             |
|--------------------------|-----------------------------|
| Name(s) shown on Form 1X | Your social security number |
|--------------------------|-----------------------------|

|  |           |     |
|--|-----------|-----|
| <b>41</b> Fill in amount from line 28 .....  | <b>41</b> | .00 |
| <b>42</b> Fill in amount from line 40 .....  | <b>42</b> | .00 |
| <b>43</b> If line 41 is less than line 42, subtract line 41 from line 42 ..... This is the AMOUNT OVERPAID                                       | <b>43</b> | .00 |
| <b>44</b> Amount of line 43 you want REFUNDED TO YOU .....   | <b>44</b> | .00 |
| <b>45</b> Amount to be applied to your 2013 estimated tax (see instructions) ...   | <b>45</b> | .00 |
| <b>46</b> If line 41 plus line 45 is more than line 42, subtract line 42 from the sum of lines 41 and 45 (see instructions) ..... ADDITIONAL TAX | <b>46</b> | .00 |
| <b>47</b> Interest charge (see instructions) .....   | <b>47</b> | .00 |
| <b>48</b> TOTAL AMOUNT DUE – Pay in full with this return .....  | <b>48</b> | .00 |
| <b>49</b> Underpayment interest (see instructions) Exception Code → ..   | <b>49</b> | .00 |

**Explanation of Changes to Income, Payments, and Credits**

|   |   |   |   |   |
|---|---|---|---|---|
| <input style="width:40px; height:20px;" type="text"/> | Explanation<br>Codes (see instructions) |
|---|---|---|---|---|

Indicate the line reference(s) from pages 1 and 2 for which you are reporting a change and explain in detail the reason for the change.

Fill in the name used on your 2012 return  
(if same as name filled in on page 1, write "Same") \_\_\_\_\_

**Sign here**

▼ Under penalties of law, I declare that this amended 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 Form 1X  
(and make check payable) to:

Wisconsin Department of Revenue  
PO Box 8991  
Madison WI 53708-8991



For Department Use Only

|   |  |  |  |
|---|--|--|--|
|   |  |  |  |
| C |  |  |  |

**Schedule 1 – Itemized Deduction Credit**

*(Fill in completely if any item is changed. If this credit was not claimed on your original return, enclose federal Schedule A.)*

|   |  |   |              |
|---|--|---|--------------|
| 1 | Medical and dental expenses from line 4 of federal Schedule A  | 1 | .00          |
| 2 | Interest paid from line 15 of federal Schedule A. 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 | 2 | .00          |
| 3 | Gifts to charity from line 19 of federal Schedule A  | 3 | .00          |
| 4 | Casualty losses from line 20 of federal Schedule A, <u>only</u> if the loss is directly related to a federally-declared disaster   | 4 | .00          |
| 5 | Add lines 1 through 4  | 5 | .00          |
| 6 | Wisconsin standard deduction from line 2 of Form 1X  | 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 | <b>X</b> .05 |
| 9 | Multiply line 7 by line 8. Fill in here and on line 7 of Form 1X   | 9 | .00          |

**Schedule 2 – Married Couple Credit When Both Spouses Are Employed**

*(Fill in if changed.)*

|   | (A) Yourself  | (B) Your spouse |          |     |
|---|---|-----------------|----------|-----|
| 1 | Wages, salaries, tips, and other employee compensation. Do NOT enter unearned income  | 1               | .00      | .00 |
| 2 | Net profit or (loss) from self-employment from federal Schedules C, C-EZ, and F (Form 1040), 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  | 3               | .00      | .00 |
| 4 | Add the amounts from federal Form 1040, lines 24, 28 and 32, plus repayment of supplemental unemployment benefits, and contributions to secs. 403(b) and 501(c)(18) pension plans included in line 36, and any Wisconsin disability income exclusion. Fill in the total of these adjustments that apply to your or your spouse's income | 4               | .00      | .00 |
| 5 | Subtract line 4 from line 3. This is qualified earned income. If less than zero, fill in 0  | 5               | .00      | .00 |
| 6 | Fill in the smaller of column (A) or (B) of line 5. If more than \$16,000, fill in \$16,000   | 6               |          | .00 |
| 7 | Rate of credit is .03 (3.0%)  | 7               | <b>X</b> | .03 |
| 8 | Multiply line 6 by line 7. Fill in here and on line 18 of Form 1X. Do not fill in more than \$480   | 8               |          | .00 |

