

1A Wisconsin income tax

Complete form using BLUE or BLACK INK



1999

Place label here or print

Your last name	First name and middle initial	You must fill in your social security number
If a joint return, spouse's last name	First name and middle initial	You must fill in spouse's social security number
Home address (number and street)		Quick Refund Do you qualify? (see page 4)
City or post office	State Zip code	


Filing status (check only one box) <input type="checkbox"/> Single <input type="checkbox"/> Married filing joint return (even if only one had income) <input type="checkbox"/> Head of household (with qualifying person). Fill in qualifying person's name.	Tax district Check proper box and fill in name of city, village, or town, and the county in which you lived at the end of 1999. <input type="checkbox"/> City } <input type="checkbox"/> Village } <input type="checkbox"/> Town } County of _____ School district Fill in your school district number (see page 13) _____	Election fund If you want \$1 to go to the State Election Campaign Fund, check box(es). <input type="checkbox"/> You <input type="checkbox"/> Your spouse Checking the box(es) will not change your tax or refund.
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1 Wages, salaries, tips, etc. (see page 4)	1	_____	.	
2 Interest (see page 5)	2	_____	.	
3 Dividends (from line 9 of federal Form 1040A or 1040)	3	_____	.	
4 Taxable unemployment compensation. Complete worksheet on page 5	4	_____	.	
5 Taxable IRA distributions, pensions and annuities, and social security benefits (see page 6) .	5	_____	.	
6 Add lines 1 through 5	6	_____	.	
7 IRA deduction (from line 15 of federal Form 1040A or line 23 of Form 1040) 7		_____	.	
8 Student loan interest deduction	8	_____	.	
9 Add lines 7 and 8	9	_____	.	
10 Subtract line 9 from line 6. This is your Wisconsin income	10	_____	.	
11 If your parent (or someone else) can claim you as a dependent, check here	11	<input type="checkbox"/>		
12 Tax (Find the tax for amount on line 10 using tax table, page 15. If you checked box 11, see page 14)	12	_____	.	
13 Dependent credit. First names of dependents _____ Fill in number of dependents (do not count yourself or your spouse, see page 7)		_____ x \$50 =	13	_____
14 Senior citizen credit (Caution: see page 7)	14	_____	.	
15 Working families tax credit – if line 10 is less than \$10,000 (\$19,000 if married filing joint), see page 8	15	_____	.	
16 Married couple credit. Complete schedule on reverse side	16	_____	.	
17 Add lines 13 through 16. This is the total of your credits	17	_____	.	
18 Subtract line 17 from line 12. If line 17 is larger than line 12, fill in -0-. This is your net tax	18	_____	.	

PAPER CLIP check or money order here

19 Fill in net tax from line 18 19 _____ .

20 Sales and use tax due on out-of-state purchases (see page 9) 20 _____ .

21 Endangered Resources Donation (decreases refund or increases amount owed)  21 _____ .

22 Add lines 19, 20, and 21 22 _____ .

23 Wisconsin income tax withheld. Attach withholding statements below .. 23 _____ .

24 1999 estimated tax payments and amount applied from 1998 return ... 24 _____ .

25 Earned income credit (see page 10).
 Qualifying Federal
 children .. ____ credit .. _____ x _____ % = .. 25 _____ .

26 Homestead credit. Attach Schedule H 26 _____ .

27 Add lines 23 through 26 27 _____ .

28 If line 27 is larger than line 22, subtract line 22 from line 27. This is the **AMOUNT**
YOU OVERPAID 28 _____ .

29 Amount of line 28 you want **REFUNDED TO YOU** 29 _____ .

30 Amount of line 28 you want **applied to your 2000 estimated tax** 30 _____ .

31 If line 27 is smaller than line 22, subtract line 27 from line 22. This is the **AMOUNT**
YOU OWE 31 _____ .

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 _____

Mail your return to: Wisconsin Department of Revenue
 If tax due P.O. Box 268, Madison, WI 53790-0001
 If homestead credit claimed ... P.O. Box 34, Madison, WI 53786-0001
 If refund or no tax due P.O. Box 59, Madison, WI 53785-0001
 If quick refund claimed P.O. Box 38, Madison, WI 53787-0001

For Department Use Only

R	M	Y	T	MAN	D	A	P	C			

Married Couple Credit When Both Spouses Are Employed

(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) YOUR SPOUSE
1 Wages, salaries, tips, and other employe compensation from line 1 of Form 1A. Do not include interest, dividends, scholarships and fellowships (unless reported on a W-2), pensions, or unemployment compensation 1	_____ .	_____ .
2 IRA deduction, if any, from line 7 of Form 1A 2	_____ .	_____ .
3 Subtract line 2 from line 1 3	_____ .	_____ .
4 Compare amounts in columns (A) and (B) of line 3. Fill in the smaller amount here. If more than \$14,000, fill in \$14,000 ... 4		_____ .
5 Rate of credit is .025 (2.5%) 5		_____ x .025
6 Multiply line 4 by line 5. Fill in here and on line 16 on reverse side 6		_____ .

Do not fill in more than \$350

← **STAPLE WITHHOLDING STATEMENTS HERE**

