À	Yo	our social security number	Spouse's social	security number							
	Yo	l I our legal last name	Le	gal first name	M.I.		State election campaign fund				
		•					If you want \$1 to go to the State Election Campaigr		mpaign		
STAPLE	lf :	a joint return, spouse's legal last name	Sp	Spouse's legal first name		M.I.	Fund, check here	e. You	Your spo	ouse	
NOTS		ome address (number and street). If you have a PO Box, see page 6.					Designating an amount will not change your tax or refund.  Tax district Check below then fill in either the name				
DO N	П	ome address (number and street). If yo		ien fill in either the the county in whi							
Δ		ty or post office		lived at the end			_				
			City, village,	_ City	_ Village	Town					
		ling status					or town				
		_ Single	County of •								
	_	_ Married filing joint return (e	School district number (see page 23)								
	_	Head of household Also, check here if married	Special								
١	D		e this → 0 / 23 4 5 6 7 8 9 Not like this				conditions	NO (	COMMAS; <u>No</u> CE	ENTC	
								<u>NO</u> (	COMMAS; <u>NO</u> CE	ENIS	
		Wages, salaries, tips, etc					-				
ts		Interest (see page 7)									
neu		Ordinary dividends (from I									
ate		Capital gain distributions									
g st		Unemployment compens	•								
ldin		Taxable IRA distributions, Add lines 1 through 6	7		.00						
hho		IRA deduction (see page									
wit		Student loan interest ded					0.0				
SE		Medical care insurance d									
ENCLOSE withholding statements		Add lines 8 through 10.		11		.00					
E		Subtract line 11 from line					.00				
		3 If your parent (or someone else) can claim you (or your spouse) as a dependent, check here ▶13									
	14	Fill in the standard dedu									
		you checked line 13, fill i	n amount froi	m worksheet,			.14		.00		
	15	Subtract line 14 from line	e 12. If line 1	)		.15		.00			
	16	Exemptions (Caution: s		164		.00					
		a Fill in exemptions from						.00			
1		<ul><li>b Check if 65 or older _</li><li>c Add lines 16a and 16b</li></ul>								.00	
	47							.00			
ere		Subtract line 16c from line								.00	
nt h		Tax. Use amount on line	-					.00			
/me		Armed forces member cr School property tax cred			.00						
pa		a Rent paid in 2008-heat in	ncluded		$\frac{00}{1}$ Find credit fr	om					
CLIP payment here		Rent paid in 2008-heat n	ot included	.0	table page 1	2 <b>20</b>	a	.00			
ER C		<b>b</b> Property taxes paid on ho	ome in 2008	.0	3 <b>20</b> k	o	.00				
PAPER	21	Working families tax cred						.00			
σ.		Married couple credit. Co						.00			
_	23	Add lines 19 through 22.	This is the to	tal of your cre	edits			. 23		.00	
1-08C	24	Subtract line 23 from line	e 18. If line 23	is larger than	n line 18, fill in 0	. This is	your net tax .	. 24		.00	

			NO COMMAS;	NO CENTS
25	Fill in net tax from line 24	25		.00
26	Sales and use tax due on out-of-state purchases (see page 15)	26		.00
27	Donations (decreases refund or increases amount owed)			
	a Endangered resources e Multiple sclerosis	.00		
	<b>b</b> Packers football stadium <b>6 f</b> Firefighters memorial <b>3</b>	.00		
	c Breast cancer research g Prostate cancer research g	.00		
	d Veterans trust fund veterans trust fund Total (add lines a through g)	> 27h		.00
28	Add lines 25, 26, and 27h	28		.00
29	Wisconsin income tax withheld. Enclose withholding statements 29		.00	
30	2008 estimated tax payments and amount applied from 2007 return <b>30</b>		.00	
31	Earned income credit (see page 16)  Qualifying Federal  children  credit		.00	
32	Homestead credit. Attach Schedule H or H-EZ 32		.00	
33	Eligible veterans and surviving spouses property tax credit33	ı	.00	
34	Add lines 29 through 33	34		.00
35	If line 34 is more than line 28, subtract line 28 from line 34. This is the <b>AMOUNT YOU</b>	OVERPAID 35		.00
36	Amount of line 35 you want <b>REFUNDED TO YOU</b>			.00
37			.00	
	If line 34 is less than line 28, subtract line 34 from line 28. This is the <b>AMOUNT YO</b>			.00
			.00	
	rty Designee's Phone no. ▶ ( )	Personal identification number (PIN		No No
	In below Under penalties of law, I declare that this return and all attachments are true, correct, and signature Spouse's signature (if filing jointly, BOTH must sign)	ate Day	est of my knowledge time phone	e and belief.
Mail	your return to: Wisconsin Department of Revenue If tax due	.PO Box 34, Mad	ison WI 53786-000	01
	Married Couple Credit When Both Spouses	Are Empl	oyed	
	(A) YO	URSELF	(B) YOUR S	POUSE
1	Wages, salaries, tips, and other employee compensation from line 1 of Form 1A. Do not include deferred compensation or scholarships and fellowships that are not reported on a W-2 1	.00		.00
2	IRA deduction, if any, from line 8 of Form 1A 2	.00		.00
3	Subtract line 2 from line 1	.00		.00
	Compare amounts in columns (A) and (B) of line 3. Fill in the smaller amount here. If more than \$16,000, fill in \$16,000	·	.00	
5	Rate of credit is .03 (3%)	5	x .03	
6	Multiply line 4 by line 5. Round the result and fill in here and on line 22 of Form 1A	<b>3</b>	.00	
	Г	R T MA	N C	



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