

Name(s) shown on Form 1 JENNIFER SMITH		Your social security number 022 00 3333
NO COMMAS; NO CENTS		
37 Farmland preservation credit. a Schedule FC, line 17 37a	_____	.00
b Schedule FC-A, line 13 37b	_____	.00
38 Repayment credit (see page 44) 38	_____	.00
39 Homestead credit. Enclose Schedule H or H-EZ. 39	_____	668.00
40 Eligible veterans and surviving spouses property tax credit . . . 40	_____	.00
41 Refundable credits from Schedule CR, line 40. Enclose Schedule CR 41	_____	.00
42 AMENDED RETURN ONLY—Amounts previously paid (see page 47) 42	_____	.00
43 Add lines 34 through 42 43	_____	668.00
44 AMENDED RETURN ONLY—Amounts previously refunded (see page 47) 44	_____	.00
45 Subtract line 44 from line 43 45	_____	668.00
46 If line 45 is larger than line 33, subtract line 33 from line 45. This is the AMOUNT YOU OVERPAID 46	_____	668.00
47 Amount of line 46 you want REFUNDED TO YOU 47	_____	668.00
48 Amount of line 46 you want APPLIED TO YOUR 2020 ESTIMATED TAX 48	_____	.00
49 If line 45 is smaller than line 33, subtract line 45 from line 33. This is the AMOUNT YOU OWE . Paper clip payment to front of return 49	_____	.00
50 Underpayment interest. Fill in exception code—See Sch. U _____ 50	_____	.00
Also include on line 49 (see page 49)		

Third Party Designee Do you want to allow another person to discuss this return with the department (see page 50)? **Yes** Complete the following. **No**

Designee's name ▶	Phone no. ▶	Personal identification number (PIN) ▶						
		<table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> </tr> </table>						

Paper clip copies of your federal income tax return and schedules to this return. Assemble your return (pages 1-4) and withholding statements in the order listed on page 5.

Sign here

▼ *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	Daytime phone
		01 19 20	(920) 555-5555

I-010ai

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

Do Not Submit Photocopies



Schedule 1 – Itemized Deduction Credit (see page 33)

1	Medical and dental expenses from federal Schedule A (Form 1040 or 1040-SR). See instructions for exceptions.	1	<u>.00</u>
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	<u>.00</u>
3	Gifts to charity from federal Schedule A (Form 1040 or 1040-SR). See instructions for exceptions	3	<u>.00</u>
4	Casualty losses from federal Schedule A (Form 1040 or 1040-SR).	4	<u>.00</u>
5	Add lines 1 through 4	5	<u>.00</u>
6	Fill in your standard deduction from line 15 on page 2 of Form 1	6	<u>.00</u>
7	Subtract line 6 from line 5. If line 6 is more than line 5, fill in 0.	7	<u>.00</u>
8	Rate of credit is .05 (5%)	8	<u>x .05</u>
9	Multiply line 7 by line 8. Fill in here and on line 20 on page 2 of Form 1	9	<u>.00</u>

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

Schedule 2 – Married Couple Credit When Both Spouses Are Employed (see page 38)

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	<u>.00</u>
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	<u>.00</u>
3	Combine lines 1 and 2. This is earned income. 3	<u>.00</u>
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. 4	<u>.00</u>
5	Subtract line 4 from line 3. This is qualified earned income. If less than zero, fill in 0 5	<u>.00</u>
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	<u>.00</u>
7	Rate of credit is .03 (3%). 7	<u>x .03</u>
8	Multiply line 6 by line 7. Fill in here and on line 24 on page 2 of Form 1. 8	<u>.00</u>

Do not fill in more than \$480.



11 a	Enter amount from line 10 here	11a	<u>7585</u>	<u>.00</u>
b	Workers' compensation, income continuation, and loss of time insurance (e.g., sick pay)	11b		<u>.00</u>
c	Gain from sale of home excluded for federal tax purposes (see page 14)	11c		<u>.00</u>
d	Other capital gains not taxable (see page 14)	11d		<u>.00</u>
e	Net operating loss carryforward or carryback and capital loss carryforward (see page 14)	11e		<u>.00</u>
f	Income of nonresident spouse or part-year resident spouse; nontaxable income from sources outside Wisconsin; resident manager's rent reduction; clergy housing allowance; and nontaxable Native American income	11f		<u>.00</u>
g	Partner's, LLC member's, and tax-option (S) corporation shareholder's distributive share of depreciation, Section 179 expense, depletion, amortization, and intangible drilling costs. If none was claimed, write "None" on federal Schedule E, Part II, near the entity's name	11g		<u>.00</u>
h	Car or truck depreciation (standard mileage rate) (see page 15)	11h		<u>.00</u>
i	Other depreciation, Section 179 expense, depletion, amortization, and intangible drilling costs	11i		<u>.00</u>
j	Disqualified losses (see Schedule 4, page 4)	11j		<u>.00</u>
12 a	Subtotal. Add lines 11a through 11j (if less than the total of lines 13, 14a, and 14c, see page 16)	12a	<u>7585</u>	<u>.00</u>
b	Number of qualifying dependents. Do not count yourself or your spouse (see page 16) <u>1</u> x \$500 =	12b	<u>500</u>	<u>.00</u>
c	Household income. Subtract line 12b from line 12a (if \$24,680 or more, no credit is allowed)	12c	<u>7085</u>	<u>.00</u>

Taxes and/or Rent See pages 17 to 19.

A	Check here if your home was located on more than one acre of land and was not part of a farm; see Schedule 1, page 3	A	<input type="checkbox"/>
B	Check here if your home was located on more than one acre of land and was part of a farm	B	<input type="checkbox"/>
C	Check here if your home was used for other than personal or farm purposes while you lived there in 2019; see Schedule 2, page 3	C	<input type="checkbox"/>
D	Check here if you received Wisconsin Works (W2) payments or county relief during 2019; see Schedule 3, page 3	D	<input checked="" type="checkbox"/>
13	Homeowners – Net 2019 property taxes on your homestead, whether paid or not	13	<u>.00</u>
14	Renters—Rent from your rent certificate(s), line 8a (or Shared Living Expenses Schedule). See pages 17 to 19.		
	Heat included (8b of rent certificate is "Yes")	14a	<u>.00</u> x .20 (20%) = 14b <u>.00</u>
	Heat not included (8b of rent certificate is "No")	14c	<u>.00</u> x .25 (25%) = 14d <u>.00</u>
15	Total of lines 13, 14b, and 14d (or amount from line 6 of Schedule 3)	15	<u>830</u> <u>.00</u>

Don't delay your refund. Attach all necessary documents. See page 20.

Credit Computation

16	Fill in the smaller of (a) amount on line 15 or (b) \$1,460	16	<u>830</u>	<u>.00</u>
17	Using the amount on line 12c, fill in the appropriate amount from Table A (page 24)	17		<u>.00</u>
18	Subtract line 17 from line 16 (if line 17 is more than line 16, fill in 0 ; no credit is allowable)	18	<u>830</u>	<u>.00</u>
19	Homestead credit – Using the amount on line 18, fill in the credit from Table B (page 25)	19	<u>668</u>	<u>.00</u>

If filing a Wisconsin income tax return, fill in your homestead credit (line 19) on line 39 of Form 1 or line 64 of Form 1NPR.

Under penalties of law, I declare this homestead credit claim and all attachments are true, correct, and complete to the best of my knowledge and belief.

Sign Here	Claimant's signature	Spouse's signature	Date	Daytime phone number
				(920) 555-5555

Mail to:
 Wisconsin Department of Revenue
 PO Box 34
 Madison WI 53786-0001



DON'T file this claim **UNLESS** a rent certificate or property tax bill (or closing statement) is included.

For Department Use Only

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Schedule 1 Allowable Taxes – Home on More Than One Acre of Land

- **Homeowners:** Complete this schedule if your home was on more than one acre of land and was not part of a farm (as defined on page 7 of the instructions). Claim only the property taxes on one acre of land and the buildings on it.
- **Renters:** If your home was on more than one acre of land and was not part of a farm, do not complete Schedule 1, but see exception 4 under “Exceptions: Homeowners and/or Renters” (page 19) for instructions.
- Do **not** complete this schedule if your home was part of a farm. You may claim the property taxes on up to 120 acres of land adjoining your home and all improvements on those 120 acres.
- If you wish to use a different method to prorate your property taxes, attach to Schedule H your computation of allowable property taxes.

<u>1</u>	Assessed value of land (from tax bill) . . .	1	_____	.00
<u>2</u>	Number of acres of land	2	_____	_____
<u>3</u>	Divide line 1 by line 2	3	_____	.00
<u>4</u>	Assessed value of improvements (from tax bill)	4	_____	.00
<u>5</u>	Add line 3 and line 4	5	_____	.00
<u>6</u>	Add line 1 and line 4 (total assessed value)	6	_____	.00
<u>7</u>	Divide line 5 by line 6 (carry the decimal to four places)	7	_____	_____
<u>8</u>	Net 2019 property taxes (see instructions for line 13 of Schedule H, on page 17)	8	_____	.00
<u>9</u>	Multiply line 8 by line 7. Fill in here and on line 13 of Schedule H or line 1 of Schedule 2 or 3 below	9	_____	.00

Schedule 2 Allowable Taxes/Rent – Home Used Partly for Purposes Other Than Farm or Personal Use

- Complete this schedule if your homestead (as defined on page 7 of the instructions) was not part of a farm but was used partly for purposes other than personal use while you lived there in 2019. Only the personal portion of your property taxes/rent may be claimed.
- “Other uses” include part business or rental use where a deduction is allowed or allowable for tax purposes, and a separate unit occupied by others rent free. See paragraph 3 under “Exceptions: Homeowners and/or Renters” (page 19) for examples and additional information.

<u>1</u>	Net 2019 property taxes/rent or amount from line 9 of Schedule 1 (see pages 17 to 19)	1	_____	.00
<u>2</u>	Percentage of homestead used solely for personal purposes	2	_____	%
<u>3</u>	Multiply line 1 by line 2. Fill in here and on line 13, 14a, or 14c of Schedule H, or on line 1 or 2 of Schedule 3 below	3	_____	.00

Schedule 3 Taxes/Rent Reduction – Wisconsin Works (W2) or County Relief Recipients

Complete this schedule if, for any month of 2019, you received a) Wisconsin Works (W2) payments of any amount, or b) county relief payments of \$400 or more. If you received these payments for all 12 months of 2019, do not complete Schedule H; you do not qualify for homestead credit.

Example: You received Wisconsin Works payments for 4 months in 2019. Rent paid for 2019 was \$4,500, and heat was included.

Line

<u>2</u>	20% of rent paid (\$4,500 x .20)	\$900
<u>4</u>	Monthly rent (\$900 ÷ 12)	\$ 75
<u>5</u>	Number of months no Wisconsin Works received	8
<u>6</u>	Reduced rent (\$75 x 8 months)	\$600

In this example, “600” would be filled in on line 15 of Schedule H.

<u>1</u>	Homeowners – fill in the net 2019 property taxes on your homestead or the amount from line 3 of Schedule 2	1	_____	.00
<u>2</u>	Renters – if heat was included, fill in 20% (.20), or if heat was not included, fill in 25% (.25), of rent from line 8a of the rent certificate(s) or line 3 of Schedule 2	2	_____	1 000.00
<u>3</u>	Add line 1 and line 2; fill in the smaller of a) the total of lines 1 and 2, or b) \$1,460	3	_____	1 000.00
<u>4</u>	Divide line 3 by 12.	4	_____	83.00
<u>5</u>	Number of months in 2019 for which you did not receive a) any Wisconsin Works (W2) payments, or b) county relief payments of \$400 or more	5	_____	10
<u>6</u>	Multiply line 4 by line 5. Fill in here and on line 15 of Schedule H. Do not fill in line 13 or 14	6	_____	830.00



Rent Certificate

2019

Wisconsin Department of Revenue

NOTE:

- Attach to Schedule H or H-EZ
- Alterations (whiteouts, erasures, etc.) or errors **void** this rent certificate.
- Only attach rent certificate if filing a homestead credit claim



■ Renter (Claimant) – Enter Social Security Number AFTER your landlord fills in section below and signs.

Legal last name SMITH	Legal first name JENNIFER	M.I.	Social security number 022 00 3333	
Address of rental property (property must be in Wisconsin) 100 ANY STREET		City MENASHA	State WI	Zip 54952

Time you actually lived at this address in 2019 **From** 0 3 0 1 2019 **To** 1 2 3 1 2019
M M D D M M D D

Do NOT sign your rent certificate.

If your landlord won't sign, complete fields above and below and lines 1 to 8, attach rent verification (see instructions), and check here.

■ Landlord or Authorized Representative

Name of property owner TODD JONES		Telephone number (960) 688-7113	
Address PO BOX 2000	City APPLETON	State WI	Zip 54912

- 1 Is the rental property a long-term care facility, CBRF, or nursing home? 1 Yes No
- 2a Is the above rental property subject to property taxes? 2a Yes No
- b If 2a is "No" and you are a sec. 66.1201 municipal housing authority that makes payments in lieu of taxes, check here 2b
- 3 Is this certificate for rent of a mobile/manufactured: a Home? 3a Yes No
 b Home site/Lot? 3b Yes No
- c Mobile or manufactured home taxes or municipal permit fees you collected from this renter for 2019 3c _____ .00
- 4a Total rent collected for this rental unit for 2019 – do NOT include amounts received directly from a governmental agency, security deposits, or late fees 4a 4000.00
- b If monthly rent paid didn't change during 2019, enter monthly rent paid 4b 400.00
- c If monthly rent changed during 2019, enter rent paid for each month below. Do not include security deposits or late fees.
- | | | | |
|------------------|-----------------|-----------------|-----------------|
| Jan. <u>.00</u> | Feb. <u>.00</u> | Mar. <u>.00</u> | Apr. <u>.00</u> |
| May <u>.00</u> | June <u>.00</u> | July <u>.00</u> | Aug. <u>.00</u> |
| Sept. <u>.00</u> | Oct. <u>.00</u> | Nov. <u>.00</u> | Dec. <u>.00</u> |
- 5 Number of occupants in this rental unit – do NOT count spouse or children under 18 5 1
- 6 This renter's share of total 2019 rent 6 4000.00
- 7 Value of food and services provided by landlord (this renter's share) 7 .00
- 8a Rent paid for occupancy only – Subtract line 7 from line 6 8a 4000.00
- b Was heat included in the rent? 8b Yes No

■ I certify that the information shown on this rent certificate is true, correct, and complete to the best of my knowledge.

Signature (by hand) of landlord or authorized representative	Date 01/04/2020	Print name (must match signature)
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Homestead Credit Notes and Attachments Checklist

1. Check all boxes that apply.
2. Fill in appropriate spaces.
3. Enter required notes and explanations in #31 data field.
4. When copies of documents are required, attach them to the Form W-RA, Required Attachments for Electronic Filing, that must be submitted.

The Schedule H instruction booklet page number for the description is indicated in the page column.

	Description	Page
<input type="checkbox"/>	1 Former spouse must pay a tax liability owed to the Department of Revenue per attached divorce judgement	6
<input type="checkbox"/>	2 Sources of income reported on Line 8b of Schedule H note is attached	11
<input type="checkbox"/>	3 The distributive share of partnership, limited liability company (LLC), and tax-option (S) corporation depreciation, Section 179 expense, depletion, amortization, and intangible drilling costs is "None"	15
<input type="checkbox"/>	4 Car or truck expenses claimed using the standard mileage rate. Fill in the number of miles _____	15
<input type="checkbox"/>	5 Adjusted basis of car or truck reached zero using standard mileage rate	15
<input type="checkbox"/>	6 Car or truck expenses claimed using the actual expense method	15
<input type="checkbox"/>	7 The computation of gain from the sale or exchange of a principal residence excluded from taxable income under Section 121 of the Internal Revenue Code note is attached.	14
<input type="checkbox"/>	8 Claimant or spouse are age 65 or over and received no social security, SSI, or railroad retirement benefits	13
<input type="checkbox"/>	9 All or part of a pension or annuity distribution includes a rollover or a tax-free exchange	13
<input type="checkbox"/>	10 Nontaxable repaid amounts note is attached	12
<input checked="" type="checkbox"/>	11 Very little or no household income note is attached	16
<input type="checkbox"/>	12 Ownership of property document is attached	17
<input type="checkbox"/>	13 Partial ownership interest was inherited with terms of the will requiring payment of all the property taxes. Copy of will is attached.	17
<input type="checkbox"/>	14 Personal property tax bill is for a mobile or manufactured home	17
<input type="checkbox"/>	15 Two or more property tax bills. Drawing showing description, size, and location of each parcel is attached	17
<input type="checkbox"/>	16 No lottery and gaming credit on property tax bill. Fill in the amount claimed \$ _____	17
<input type="checkbox"/>	17 No lottery and gaming credit on property tax bill. Lottery and gaming credit not claimed by homeowner.	18
<input type="checkbox"/>	18 Landlord will not sign rent certificate. Rent verification is attached	18
<input checked="" type="checkbox"/>	19 Claimant moved during the year. Note of the address of each dwelling and the dates lived there is attached	18
<input checked="" type="checkbox"/>	20 Less than 12 month's property taxes and/or rent are claimed. Note of where claimant lived for the balance of the year is attached	18
<input type="checkbox"/>	21 When more than one acre of land is rented, note from landlord indicating the amount of rent for home and one acre of land is attached	19
<input type="checkbox"/>	22 Moved to tax-exempt housing. Claiming property taxes for up to 12 months after the move note is attached.	19
<input type="checkbox"/>	23 Married but separated all year: Claimant and spouse did not reside together at all during the year and neither the claimant or claimant's spouse notified each other of marital property income	21
<input type="checkbox"/>	24 Married but separated all year: Claimant and spouse did not reside together at all during the year and one or both spouses notified the other spouse of marital property income. Required information is attached	21
<input type="checkbox"/>	25 Married but separated part of year: Required information is attached.	21
<input type="checkbox"/>	26 Marriage took place during year: Required information is attached.	22
<input type="checkbox"/>	27 Divorce took place during year: Claimant and spouse did not reside together at all during the year and neither the claimant or claimant's spouse notified each other of marital property income	23
<input type="checkbox"/>	28 Divorce took place during year: Claimant and spouse did reside together for part of the year and/or one or both spouses notified the other spouse of marital property income. Required information is attached.	23
<input type="checkbox"/>	29 Spouse died during year: Date of death - ____ / ____ / 2019	23
<input type="checkbox"/>	30 Claimant resided in property address shown on tax bill but used a different mailing address on tax return.	-
<input type="checkbox"/>	31 Required notes and explanations in following data fields	-

TAXPAYER USED SAVINGS TO SUPPLEMENT INCOME ALSO RECEIVED FOOD STAMPS

TAXPAYER LIVED WITH PARENTS JAN AND FEB AT 105 ANY STREET MENASHA WI

MOVED TO 100 ANY STREET MENASHA WI ON MAR 1 2019