

22222		Void <input type="checkbox"/>		a Employee's social security number		For Official Use Only ▶ OMB No. 1545-0008					
b Employer identification number (EIN)				1 Wages, tips, other compensation		2 Federal income tax withheld					
c Employer's name, address, and ZIP code				3 Social security wages		4 Social security tax withheld					
				5 Medicare wages and tips		6 Medicare tax withheld					
				7 Social security tips		8 Allocated tips					
d Control number				9 Advance EIC payment		10 Dependent care benefits					
e Employee's first name and initial		Last name		Suff.		11 Nonqualified plans		12a See instructions for box 12			
f Employee's address and ZIP code				13 Statutory employee <input type="checkbox"/>		Retirement plan <input type="checkbox"/>		Third-party sick pay <input type="checkbox"/>		12b	
				14 Other						12c	
										12d	
15 State		Employer's state ID number		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax	20 Locality name

Form **W-2** Wage and Tax Statement

2009

Department of the Treasury—Internal Revenue Service

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Complete form using **BLACK INK**

Note










DO NOT STAPLE

Your social security number		Spouse's social security number			
Your legal last name		Legal first name		M.I.	
If a joint return, spouse's legal last name		Spouse's legal first name		M.I.	
Home address (number and street). If you have a PO Box, see page 6.				Apt. No.	
City or post office		State	Zip code		
Filing status (check below) <input type="checkbox"/> Single <input type="checkbox"/> Married filing joint return (even if only one had income)					
State election campaign fund If you want \$1 to go to the State Election Campaign Fund, check here. <input type="checkbox"/> You <input type="checkbox"/> Your spouse Designating an amount will not change your tax or refund.				Tax district Check below then fill in either the name of city, village, or town and the county in which you lived at the end of 2009. <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town City, village, or town ▶ _____ County of ▶ _____ School district number (see page 23) _____ Special conditions <input type="checkbox"/> _____	

Print numbers like this → 0 1 2 3 4 5 6 7 8 9 Not like this → 0147 **NO COMMAS; NO CENTS**

ENCLOSE withholding statements

PAPER CLIP check or money order here

1 Income from line 4 of federal Form 1040EZ	1		.00
2 If your parent (or someone else) can claim you (or your spouse) as a dependent, check here	2	<input type="checkbox"/>	
3 Fill in the standard deduction for your filing status from table, page 31. But if you checked line 2, fill in the amount from worksheet on back	3		.00
4 Subtract line 3 from line 1. If line 3 is larger than line 1, fill in 0	4		.00
5 Deduction for exemptions. Fill in \$700 (\$1,400 if married, or 0 if you checked line 2 – see instructions on back)	5		.00
6 Subtract line 5 from line 4. If line 5 is larger than line 4, fill in 0. This is your taxable income	6		.00
7 Tax. Use amount on line 6 to find your tax using table, page 24	7		.00
8 School property tax credit			
8a Rent paid in 2009 – heat included	.00	}	Find credit from table page 13
Rent paid in 2009 – heat not included	.00		
8b Property taxes paid on home in 2009	.00	▶	Find credit from table page 14
9 Working families tax credit – if line 1 is less than \$10,000 (\$19,000 if married filing joint), see page 14	9		.00
10 Married couple credit. Wages	.00		
(see instructions on reverse side)			
10a Yourself	.00		
10b Spouse	.00		
10c Fill in smaller of 10a or 10b but no more than \$16,000	.00	x .03 =	10c .00
11 Add credits on lines 8a, 8b, 9, and 10c	11		.00
12 Subtract line 11 from line 7. If line 11 is larger than line 7, fill in 0. This is your net tax	12		.00
13 Sales and use tax due on out-of-state purchases (see page 15)	13		.00
14 Donations (decreases refund or increases amount owed)			
a Endangered resources 	.00	f Firefighters memorial 	.00
b Packers football stadium 	.00	g Prostate cancer research 	.00
c Breast cancer research 	.00	h Military family relief 	.00
d Veterans trust fund 	.00	i Second Harvest 	.00
e Multiple sclerosis 	.00	Total (add lines a through i)	14j .00
15 Add lines 12, 13, and 14j	15		.00

16	Amount from line 15	16	_____	.00
17	Wisconsin income tax withheld. Enclose readable withholding statements	17	_____	.00
18	If line 17 is larger than line 16, subtract line 16 from line 17 This is YOUR REFUND	18	_____	.00
19	If line 16 is larger than line 17, subtract line 17 from line 16 This is the AMOUNT YOU OWE	19	_____	.00

Third Party Designee Do you want to allow another person to discuss this return with the department (see page 20)? **Yes** Complete the following. **No**

Designee's name ▶ _____ Phone no. ▶ (_____)

Personal identification number (PIN) ▶

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Sign below Under penalties of law, I declare that this return is 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 return to: Wisconsin Department of Revenue
 If refund or no tax due PO Box 59, Madison WI 53785-0001
 If tax due PO Box 268, Madison WI 53790-0001

For Department Use Only

R	T	MAN	C			

INSTRUCTIONS



Read "Which Form to File for 2009" on page 3 of the Form 1A instructions to see which form is right for you.

Filling in Your Return Use black ink to complete the copy of the form that you file with the department. Round off cents to the nearest dollar. Drop amounts under 50¢ and increase amounts from 50¢ through 99¢ to the next dollar. If completing the form by hand, **do not use commas** when filling in amounts.

Name and Address Print your legal name and address. If you filed a joint return for 2008 and are filing a joint return for 2009 with the same spouse, enter your names and social security numbers in the same order as on your 2008 return.

Line 2 Dependents Check line 2 if your parent (or someone else) can claim you (or your spouse) as a dependent on his or her return. Check line 2 even if that person chose not to claim you.

Line 3 If you checked line 2, use this worksheet to figure the amount to fill in on line 3.

A. Wages, salaries, and tips included in line 1 of Form WI-Z. (Do not include interest income or taxable scholarships or fellowships not reported on a W-2.) . . . A. _____
B. Addition amount B. <u>300.00</u>
C. Add lines A and B. If total is less than \$950, fill in \$950 C. _____
D. Fill in the standard deduction for your filing status using table, page 31 D. _____
E. Fill in the SMALLER of line C or D here and on line 3 of Form WI-Z. E. _____

Line 5 A personal exemption is not allowed for a person who can be claimed as a dependent on someone else's return. If you are single and can be claimed as a dependent, fill in 0 on line 5. If you are married and both spouses can be claimed as a dependent, fill in 0 on line 5. If you are married and only one of you can be claimed as a dependent, fill in \$700 on line 5.

Lines 8a and 8b School Property Tax Credit You may claim a credit if, during 2009, you paid rent for living quarters used as your primary residence OR you paid property taxes on your home. See the instructions for lines 20a and 20b of Form 1A. The total credits on lines 8a and 8b cannot exceed \$300.

Line 9 Working Families Tax Credit You may claim a credit if line 1 of Form WI-Z is less than \$10,000 (\$19,000 if married filing a joint return). But, you cannot claim a credit if you can be claimed as a dependent on another person's return. See the instructions for line 21 of Form 1A.

Line 10 Married Couple Credit If you are married and you and your spouse were both employed in 2009, you may claim the married couple credit. Complete the following steps:

- (1) Fill in your 2009 wages on line 10a. Fill in your spouse's wages on line 10b.
- (2) Fill in the smaller of line 10a or 10b (but not more than \$16,000) in the space provided on line 10c.
- (3) Multiply the amount determined in Step 2 by .03 (3%).
- (4) Fill in the result (but not more than \$480) on line 10c.

Line 13 Sales and Use Tax Due on Out-of-State Purchases If you made purchases from out-of-state firms during 2009 and did not pay a sales and use tax, you may owe Wisconsin sales and use tax. See the instructions for line 26 of Form 1A.

Line 14 Donations You may designate amounts as a donation to one or more of the programs listed on lines 14a through 14i. Your donation will either reduce your refund or be added to tax due. Add the amounts on lines 14a through 14i and fill in the total on line 14j. See the instructions for line 28 of Form 1A for further information on how your donation will be used.

Line 17 Wisconsin Income Tax Withheld Fill in the total amount of Wisconsin income tax withheld as shown on your withholding statements (W-2s). **Do not include income tax withheld for any state other than Wisconsin.** Enclose your withholding statements.

Line 18 or 19 Fill in line 18 or 19 to determine your refund or amount you owe. If you owe an amount, paper clip your check or money order to Form WI-Z. See page 19 of the Form 1A instructions for information on paying by credit card.

Third Party Designee See page 20 of the Form 1A instructions.

Sign and Date Your Return Form WI-Z is not a valid return unless you sign it. If married, your spouse must also sign.

Enclosures See Form 1A instructions (page 20) for enclosures that may be required. Do not enclose a copy of your federal return.