

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		10 Dependent care benefits		
e Employee's first name and initial		Last name		Suff.	11 Nonqualified plans		
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"/>		12a See instructions for box 12		
			14 Other		12b		
					12c		
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

2011

Department of the Treasury—Internal Revenue Service
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.

Copy A For Social Security Administration — Send this entire page with Form W-3 to the Social Security Administration; photocopies are not acceptable.

Cat. No. 10134D

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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		
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			7 Social security tips		8 Allocated tips		
d Control number			9		10 Dependent care benefits		
e Employee's first name and initial		Last name		Suff.	11 Nonqualified plans		
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"/>		12a See instructions for box 12		
			14 Other		12b		
					12c		
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

2011

Department of the Treasury—Internal Revenue Service
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.

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1A Wisconsin income tax



2011

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
---------------------	-------	----------

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 2011.

City, village, or town City Village Town

County of

School district number (see page 23)

Filing status

Single

Married filing joint return (even if only one had income)

Head of household Fill in qualifying person's name

Also, check here if married.

Special conditions

Complete form using **BLACK INK**

Print numbers like this → 0 1 2 3 4 5 6 7 8 9

NO COMMAS; NO CENTS

ENCLOSE

Wisconsin residents working in Minnesota: Was any of your income from personal or professional services performed in Minnesota while a Wisconsin resident? (See instructions, page 7)

Yes No If Yes, enter Minnesota income **.00**

ENCLOSE withholding statements

1	Wages, salaries, tips, etc. (see page 7)	1	.00
2	Interest (see page 7)	2	.00
3	Ordinary dividends (from line 9a of federal Form 1040A or 1040)	3	.00
4	Capital gain distributions (see page 8)	4	.00
5	Unemployment compensation (from worksheet, page 8)	5	.00
6	Taxable IRA distributions, pensions, and annuities (see page 9)	6	.00
7	Add lines 1 through 6	7	.00
8	IRA deduction (see page 10)	8	.00
9	Student loan interest deduction (see page 10)	9	.00
10	Medical care insurance deduction (see page 10)	10	.00
11	Add lines 8 through 10	11	.00
12	Subtract line 11 from line 7. This is your Wisconsin income	12	.00
13	If your parent (or someone else) can claim you (or your spouse) as a dependent, check here	13	<input type="checkbox"/>
14	Fill in the standard deduction for your filing status from table, page 31. But if you checked line 13, fill in amount from worksheet, page 11	14	.00
15	Subtract line 14 from line 12. If line 14 is larger than line 12, fill in 0	15	.00
16	Exemptions (Caution: see page 11)		
	a Fill in exemptions from your federal return _____ x \$700 .. 16a		.00
	b Check if 65 or older <input type="checkbox"/> You + <input type="checkbox"/> Spouse = _____ x \$250 .. 16b		.00
	c Add lines 16a and 16b	16c	.00
17	Subtract line 16c from line 15. If line 16c is larger than line 15, fill in 0. This is your taxable income	17	.00
18	Tax. Use amount on line 17 to find your tax using table, page 24	18	.00
19	Armed forces member credit (must be stationed outside U.S., see page 12)	19	.00
20	School property tax credit		
	a Rent paid in 2011—heat included <input type="text"/> .00	} Find credit from table page 13 .. 20a	.00
	Rent paid in 2011—heat not included <input type="text"/> .00		
	b Property taxes paid on home in 2011 <input type="text"/> .00	} Find credit from table page 14 .. 20b	.00
21	Working families tax credit, see page 14	21	.00
22	Married couple credit. Complete schedule on reverse side	22	.00
23	Add lines 19 through 22. This is the total of your credits	23	.00
24	Subtract line 23 from line 18. If line 23 is larger than line 18, fill in 0. This is your net tax	24	.00

PAPER CLIP payment here

NO COMMAS; NO CENTS

25 Fill in net tax from line 24 **25**00

26 Sales and use tax due on Internet, mail order, or other out-of-state purchases (see page 15) **26**00
 If you certify that no sales or use tax is due, check here X

27 Donations (decreases refund or increases amount owed)

a Endangered resources  <u>.00</u>	f Firefighters memorial  <u>.00</u>
b Packers football stadium  <u>.00</u>	g Prostate cancer research  <u>.00</u>
c Breast cancer research  <u>.00</u>	h Military family relief  <u>.00</u>
d Veterans trust fund  <u>.00</u>	i Feeding America  <u>.00</u>
e Multiple sclerosis  <u>.00</u>	j Red Cross WI Disaster Relief  <u>.00</u>

Total (add lines a through j) .. **27k**00

28 Add lines 25, 26, and 27k **28**00

29 Wisconsin income tax withheld. Enclose withholding statements **29**00

30 2011 estimated tax payments and amount applied from 2010 return **30**00

31 Earned income credit (see page 17)
 Qualifying Federal
 children ▶ _____ credit00 x _____ % = ... **31**00

32 Homestead credit. Attach Schedule H or H-EZ **32**00

33 Eligible veterans and surviving spouses property tax credit (see page 17) **33**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 **AMOUNT YOU OVERPAID** **35**00

36 Amount of line 35 you want **REFUNDED TO YOU** **36**00

37 Amount of line 35 you want **applied to your 2012 estimated tax** **37**00

38 If line 34 is less than line 28, subtract line 34 from line 28. This is the **AMOUNT YOU OWE** . . **38**00

39 Underpayment interest. Fill in exception code – See Sch. U → _____ **39**00
 (See page 19)

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) ▶

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 _____ Daytime phone () _____

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

Married Couple Credit When Both Spouses Are Employed

	(A) YOURSELF	(B) YOUR SPOUSE
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	<u>.00</u>	<u>.00</u>
2 IRA deduction, if any, from line 8 of Form 1A. 2	<u>.00</u>	<u>.00</u>
3 Subtract line 2 from line 1 3	<u>.00</u>	<u>.00</u>
4 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 4	<u>.00</u>	<u>.00</u>
5 Rate of credit is .03 (3%) 5	<u>.03</u>	<u>X .03</u>
6 Multiply line 4 by line 5. Round the result and fill in here and on line 22 of Form 1A. Do NOT fill in more than \$480 6	<u>.00</u>	<u>.00</u>



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Claimant's social security number		Spouse's social security number		Check below then fill in either the name of city, village, or town, and the county in which you lived at the end of 2011. <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town City, village, or town <input type="checkbox"/> County of <input type="checkbox"/> Special conditions <input type="checkbox"/> (See page 7.)
Claimant's legal last name	Legal first name	M.I.		
Spouse's legal last name	Spouse's legal first name	M.I.		
Current home address (number and street)			Apt. no.	
City or post office	State	Zip code		

- 1a** What was your age as of December 31, 2011? (If you were under 18, you do not qualify for homestead credit for 2011.) **1a** Fill in age
- b** If your spouse was age 65 or over as of December 31, 2011, check where indicated. **1b** Check here
- 2** Were you a legal resident of Wisconsin from 1-1-11 through 12-31-11? (If "No," you do not qualify.) **2** Yes No
- 3** Were you claimed or will you be claimed as a dependent on someone else's 2011 federal income tax return? (If "Yes" and you were under age 62 on December 31, 2011, you do not qualify.) **3** Yes No
- 4a** Are you now living in a nursing home? (If "Yes," indicate the date you entered _____ and the nursing home name and address _____) **4a** Yes No
- b** If "Yes," are you receiving medical assistance under Title XIX? (If both 4a and 4b are "Yes," you do not qualify.) **4b** Yes No
- 5** Did you become married or divorced in 2011? (If "Yes," fill in date _____; see page 16.) **5** Yes No
- 6a** If married for any part of 2011, did you and your spouse maintain separate homes during any part of the year? (If "Yes," see page 15.) **6a** Yes No
- b** If you and your spouse maintained separate homes while married during 2011, did either spouse notify the other of their marital property income? (See page 15.) **6b** Yes No

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

Household Income Include all 2011 income as listed below. If married, include the incomes of both spouses. See pages 7 to 11.

- 7** Wisconsin income from your 2011 income tax return. If you **already filed** your tax return, **attach a copy marked "Duplicate."** (See page 5, Part C.1, paragraph 3.) **7** _____ .00
- 8** If you or you and your spouse **are not filing** a 2011 Wisconsin return, fill in Wisconsin **taxable** income on lines 8a and 8b.
- a** Wages _____ .00 + Interest _____ .00 + Dividends _____ .00 = **8a** _____ .00
- b** Other taxable income. Attach a schedule listing each income item **8b** _____ .00
- 9 Nontaxable household income. Do not include amounts filled in on line 7, 8a, or 8b.**
- a** Unemployment compensation **9a** _____ .00
- b** Social security, federal and state SSI, SSI-E, SSD, and caretaker supplement payments. Include Medicare premium deductions **9b** _____ .00
- c** Railroad retirement benefits. Include Medicare premium deductions **9c** _____ .00
- d** Pensions and annuities, including IRA, SEP, SIMPLE, and qualified plan distributions (see page 8) **9d** _____ .00
- e** Contributions to deferred compensation plans (see box 12 of wage statements, and page 8) **9e** _____ .00
- f** Contributions to IRA, self-employed SEP, SIMPLE, and qualified plans **9f** _____ .00
- g** Interest on United States securities (e.g., U.S. Savings Bonds) and state and municipal bonds **9g** _____ .00
- h** Scholarships, fellowships, grants (see page 9), and military compensation or cash benefits **9h** _____ .00
- i** Child support, maintenance payments, and other support money (court ordered) **9i** _____ .00
- j** Wisconsin Works (W2), county relief, kinship care, and other cash public assistance (see page 9) **9j** _____ .00
- 10** Add lines 7 through 9j. Enter here and on line 11a, at the top of page 2 **10** _____ .00





11 a Enter amount from line 10 here	11a _____	.00
b Workers' compensation, income continuation, and loss of time insurance (e.g., sick pay)	11b _____	.00
c Gain from sale of home excluded for federal tax purposes (see instructions)	11c _____	.00
d Other capital gains not taxable	11d _____	.00
e Net operating loss carryforward and capital loss carryforward	11e _____	.00
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 _____	.00
g Partner's, LLC member's, and 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 _____	.00
h Car or truck depreciation (standard mileage rate)	11h _____	.00
i Other depreciation, Section 179 expense, depletion, amortization, and intangible drilling costs ...	11i _____	.00
12 a Subtotal. Add lines 11a through 11i	12a _____	.00
b Number of qualifying dependents. Do not count yourself or your spouse (see page 11) _____ x \$500 =	12b _____	.00
c Household income. Subtract line 12b from line 12a (if \$24,680 or more, no credit is allowed)	12c _____	.00

Taxes and/or Rent See pages 11 to 14.

- 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.**
- Check here if your home was located on more than one acre of land and **was** part of a farm.
- Check here if your home was used for purposes other than personal or farm use while you lived there in 2011; **see Schedule 2, page 3.**
- Check here if you received Wisconsin Works (W2) payments or county relief during 2011; **see Schedule 3, page 3.**

13 Homeowners – Net 2011 property taxes on your homestead, whether paid or not	13 _____	.00
14 Renters— Rent from your rent certificate(s), line 13a (or Shared Living Expenses Schedule). See pages 12 to 14.		
Heat included (13b of rent certificate is "Yes")	14a _____ .00 x .20 (20%) =	14b _____ .00
Heat not included (13b of rent certificate is "No")	14c _____ .00 x .25 (25%) =	14d _____ .00
15 Total of lines 13, 14b, and 14d (or amount from line 6 of Schedule 3)	15 _____	.00

Don't delay your refund: ATTACH 2011 tax bill(s) (or closing statement) and/or original rent certificate(s). ATTACH ownership document (if the tax bill lists names other than yours). See page 12.

Credit Computation

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

If you file a Wisconsin income tax return, attach this claim behind Form 1, 1A, or 1NPR. Fill in your homestead credit (line 19) on line ___ of Form 1A; line ___ of Form 1; or line ___ of Form 1NPR. (If filing Form 1 or Form 1NPR, **ATTACH** a complete copy of your **federal** income tax return and schedules.) You cannot file Form WI-Z with a homestead credit claim.

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.

Claimant's signature _____ Spouse's signature _____ Date _____ Daytime phone number _____

Sign Here ▶

()

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

C					
---	--	--	--	--	--

Name(s) shown on Schedule H

Your social security number

Note: Include this page as part of Schedule H **only** if Schedule 1, 2, and/or 3 is completed.

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 6 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 14) 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.
- 1 Assessed value of land (from tax bill)
 - 2 Number of acres of land
 - 3 Divide line 1 by line 2
 - 4 Assessed value of improvements (from tax bill)
 - 5 Add line 3 and line 4
 - 6 Add line 1 and line 4 (total assessed value)
 - 7 Divide line 5 by line 6
 - 8 Net 2011 property taxes (see instructions for line 13 of Schedule H, on pages 11 to 14)
 - 9 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

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 5 of the instructions) was not part of a farm but was used partly for purposes other than personal use while you lived there in 2011. 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 13) for examples and additional information.
- 1 Net 2011 property taxes/rent or amount from line 9 of Schedule 1 (see pages 11 to 14)
 - 2 Percentage of homestead used solely for personal purposes
 - 3 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

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

Complete this schedule if, for any month of 2011, 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 2011, do not complete Schedule H; you do not qualify for homestead credit.

Example: You received Wisconsin Works payments for 4 months in 2011. Rent paid for 2011 was \$4,500, and heat was included.

Line

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

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

- 1 Homeowners – fill in the net 2011 property taxes on your homestead or the amount from line 3 of Schedule 2
- 2 Renters – if heat **was** included, fill in 20% (.20), or if heat **was not** included, fill in 25% (.25), of rent from line 13a of the rent certificate(s) or line 3 of Schedule 2
- 3 Add line 1 and line 2; fill in the **smaller** of a) the total of lines 1 and 2, or b) \$1,460
- 4 Divide line 3 by 12.
- 5 Number of months in 2011 for which you did **not** receive a) any Wisconsin Works (W2) payments, or b) county relief payments of \$400 or more
- 6 Multiply line 4 by line 5. Fill in here and on line 15 of Schedule H. Do not fill in line 13 or 14

Note Homeowners Age 65 or Older – The **Property Tax Deferral Loan Program** provides loans to help individuals age 65 or older pay their property taxes. Qualified applicants may participate even if they receive homestead credit. For more information, contact the Wisconsin Housing and Economic Development Authority at (608) 266-7884 (Madison) or (414) 227-4039 (Milwaukee).

2011 Property Tax Bill / Closing Statement and Sale of Home Information

Claimant purchased home during 2011:

Enter the dates occupied during 2011 ▶ From: _____ To: _____
mo / day *mo / day*

Claimant sold home during 2011:

Enter the dates occupied during 2011 ▶ From: _____ To: _____
mo / day *mo / day*

SECTION 1 Tax Bill Information for Your Home (If more than one tax bill, see Section 2)

- 1 Year on property tax bill (must be 2011 property tax bill)
- 2 Name of owner(s) as shown on property tax bill
- 3 Type of owner(s) (*check only one box*) If box 3b is checked, answer 3b1, 3b2 (and 3b3 when applicable)
 - a Self and/or spouse, include life estate, lease, or use by self and/or spouse (e.g. ET UX, ET UM, HW, WF, LE, L EST, LF TEN, LU, LC, VNE)
 - b Self and/or spouse AND OTHERS (e.g., ET AL, multiple owners names)
 - 3b1 Enter your ownership percentage _____ %
 - 3b2 Enter amount of 2011 net property taxes you paid or will pay . . . \$ _____ .00
 - 3b3 If all of the other owner(s) occupied your home during 2011, check box
 - c Trust (e.g., TR, TRSE, TRS, TRST, UDT)
 - d Estate (e.g., EST)
 - e Partnership
 - f Corporation, Subchapter S Corporation, or Limited Liability Company
 - g Other If Other, fill in owner(s) type _____
- 4 Address of property
- 5 Assessed value of land \$ _____ .00
- 6 Assessed value of improvements \$ _____ .00
- 7 Number of acres of land (include decimals)
- 8 Property taxes (without special assessments/charges and before first dollar credit and lottery/gaming credit) . . \$ _____ .00
- 9 Sum of first dollar credit and lottery/gaming credit \$ _____ .00
- 10 Net property taxes after sum of first dollar credit and lottery/gaming credit \$ _____ .00

SECTION 2 Additional Tax Bill Information for Adjoining Property

	Tax Bill 2	Tax Bill 3	Tax Bill 4	Tax Bill 5	Tax Bill 6
1 Number of acres of land (include decimals) .....	.	.	.	.	.
2 Assessed value of land .....	.00	.00	.00	.00	.00
3 Assessed value of improvements .....	.00	.00	.00	.00	.00
4 Net taxes (without special assessments/charges and after first dollar credit) .....	.00	.00	.00	.00	.00

SECTION 3 Closing Statement and Sale of Home Information

- 1 Date home was sold.
- 2 Name of seller(s) as shown on closing statement
- 3 Type of seller(s) (*check only one box*) If box 3b is checked, answer 3b1 (and 3b2 when applicable)
 - a Self and/or spouse
 - b Self and/or spouse AND OTHERS 3b1 Enter your ownership percentage _____ %
 3b2 If all of the other owner(s) occupied your home before it was sold, check box
 - c Other If Other, fill in seller(s) type _____
- 4 Address of home sold
- 5 Property taxes allocated to seller(s) on closing statement. \$ _____ .00
- 6 Selling price of home (do not include personal property items you sold with your home) \$ _____ .00
- 7 Expense of sale (commissions, advertising, attorney fees, etc.) \$ _____ .00
- 8 Adjusted basis of home sold (purchase price, improvements, etc.) \$ _____ .00

Rent Certificate

Wisconsin Department of Revenue

NOTE: Alterations on lines 1 to 13 or the signature line (whiteouts, erasures, etc.) will void this rent certificate. A rent certificate with an error should be discarded and a new one completed.

2011

Need an additional rent certificate? Go to www.revenue.wi.gov, select "Forms."

Renter (Claimant) Complete lines 1, 3, and 4. Have your landlord fill in lines 6 to 13 and sign, then complete line 2.

1 Name _____

2 Social security number ▶ _____

3 Address of rental property (property must be in Wisconsin)

4 Time you actually lived here in 2011
 From (mo./day) ____ / ____ / 2011 To (mo./day) ____ / ____ / 2011

5 If your landlord will not sign your rent certificate, complete lines 6 to 13, attach rent verification (see instructions), and check this box. →

Landlord Fill in lines 6 to 13 and sign.

6 Name _____

7 Address _____

8 Telephone number _____

9 a Is the rental property (line 3) subject to property taxes?
 Yes No

b If 9a is "No" and you are a sec. 66.1201 municipal housing authority that makes payments in lieu of taxes, check this box. →

10a Is this rent certificate for rent of:
 A mobile or manufactured home? Yes No
 A mobile or manufactured home site? Yes No

b Mobile or manufactured home taxes or municipal permit fees you collected from this renter for 2011. \$ _____

11 Fill in lines 11a to 11e based on the period of time this rental unit was occupied **by this renter**. Use the additional columns on lines 11a and 11b only if rent rates changed during the year (see instructions). Do not include amounts received directly from a governmental agency.

a Rent collected per month for this rental unit for 2011 \$ _____ \$ _____ \$ _____ \$ _____

b Number of months this rental unit was rented to this renter in 2011 _____

c Total rent collected for this rental unit for 2011 \$ _____

d Number of occupants in this rental unit – do **not** count spouse or children under 18 . . . _____

e This renter's share of total 2011 rent \$ _____

12 Value of food and services provided by landlord (this renter's share) \$ _____

13a Rent paid for occupancy only – Subtract line 12 from line 11e \$ _____

b Was heat included in the rent? Yes No

c If a long-term care facility/CBRF/nursing home, check the method used to compute line 13a:
 Standard rate (\$100 per week).
 Percentage formula (fill in percentage) _____ %.
 Other method approved by Department of Revenue.

Sign here 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

NEED HELP? 608-266-8641 (Madison) or 414-227-4000 (Milwaukee)

- REMINDERS FOR RENTERS:**
- If line 11d above is 2 or more and each occupant did not pay an equal share of the rent, see instructions for Shared Living Expenses Schedule.
 - Schedule H or H-EZ must be completed and filed with this rent certificate.

Shared Living Expenses Schedule

Step 1: List name(s) of other occupants:

Step 2: List the total amount (not the monthly amount) of all shared living expenses (rent, food, utilities, and other) paid by all occupants and the amount that you paid:

Shared Living Expenses	Total Paid by All Occupants	Amount You Paid
Rent	1a)	1b)
Food	2a)	2b)
Utilities	3a)	3b)
Other	4a)	4b)
Total	5a)	5b)

Step 3: Using the amounts listed in Step 2, compute your allowable rent paid for occupancy only:

1 Total rent paid (line 1a) **1** _____

2 Shared living expenses you paid (line 5b) **2** _____

3 Total shared living expenses (line 5a) **3** _____

4 Divide line 2 by line 3. Fill in decimal amount **4** x . _____

5 Multiply line 1 by line 4. **5** _____

6 Value of food and services provided by landlord (line 12 above) **6** _____

7 Subtract line 6 from line 5. This is your allowable rent. Fill in here and on line 14a or 14c of Schedule H (line 9a or 9c of Schedule H-EZ) . . **7** _____

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	5
<input type="checkbox"/>	2 Sources of income reported on Line 8b of Schedule H note is attached	8
<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"	10
<input type="checkbox"/>	4 Car or truck expenses claimed using the standard mileage rate. Fill in the number of miles _____	10
<input type="checkbox"/>	5 Adjusted basis of car or truck reached zero using standard mileage rate	10
<input type="checkbox"/>	6 Car or truck expenses claimed using the actual expense method	10
<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.	10
<input type="checkbox"/>	8 Claimant or spouse are age 65 or over and received no social security, SSI, or railroad retirement benefits	11
<input type="checkbox"/>	9 All or part of a pension or annuity distribution includes a rollover or a tax-free exchange	9
<input type="checkbox"/>	10 Nontaxable repaid amounts note is attached	11
<input type="checkbox"/>	11 Very little or no household income note is attached	11
<input type="checkbox"/>	12 Ownership of property document is attached	12
<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.	12
<input type="checkbox"/>	14 Personal property tax bill is for a mobile or manufactured home	12
<input type="checkbox"/>	15 Two or more property tax bills. Drawing showing description, size, and location of each parcel is attached	12
<input type="checkbox"/>	16 No lottery and gaming credit on property tax bill. Fill in the amount claimed \$ _____	12
<input type="checkbox"/>	17 No lottery and gaming credit on property tax bill. Lottery and gaming credit not claimed by homeowner.	12
<input type="checkbox"/>	18 Landlord will not sign rent certificate. Rent verification is attached	13
<input type="checkbox"/>	19 Claimant moved during the year. Note of the address of each dwelling and the dates lived there is attached	13
<input 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	13
<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	14
<input type="checkbox"/>	22 Moved to tax-exempt housing. Claiming property taxes for up to 12 months after the move note is attached.	14
<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	15
<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	15
<input type="checkbox"/>	25 Married but separated part of year: Required information is attached.	15
<input type="checkbox"/>	26 Marriage took place during year: Required information is attached.	16
<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	16
<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.	16
<input type="checkbox"/>	29 Spouse died during year: Date of death - ____ / ____ / 2011	16
<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	-

2011 Wisconsin Form EIC-A

Earned Income Credit
Information for up to three qualifying children

Instructions

Complete the information for each qualifying child for the Wisconsin Earned Income Credit. If you have more than three qualifying children, you only have to list three to get the maximum credit.

Qualifying Child Information	Child 1	Child 2	Child 3
	First Last	First Last	First Last
1 Child's name			
2 Child's social security number	____ - ____ - ____	____ - ____ - ____	____ - ____ - ____
3 Child's relationship to you <i>(check one)</i>	<input type="checkbox"/> Son or Daughter <input type="checkbox"/> Grandchild <input type="checkbox"/> Brother or Sister <input type="checkbox"/> Nephew or Niece <input type="checkbox"/> Foster Child	<input type="checkbox"/> Son or Daughter <input type="checkbox"/> Grandchild <input type="checkbox"/> Brother or Sister <input type="checkbox"/> Nephew or Niece <input type="checkbox"/> Foster Child	<input type="checkbox"/> Son or Daughter <input type="checkbox"/> Grandchild <input type="checkbox"/> Brother or Sister <input type="checkbox"/> Nephew or Niece <input type="checkbox"/> Foster Child
4 Number of months child lived with you in the United States during 2011 NOTE: If the child lived with you for more than half of 2011, but less than 7 months, enter "7". If the child was born or died in 2011, and your home was the child's for the entire time he or she was alive during 2011, enter "12".	____ ____	____ ____	____ ____
5 Child's year of birth	____ ____ ____ ____	____ ____ ____ ____	____ ____ ____ ____
6 If the child was born before 1993 –			
a Was the child under age 24 at the end of 2011 and a full time student?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
b Was the child permanently and totally disabled during any part of 2011?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Your first name and initial	Last name	OMB No. 1545-0074
		Your social security number
If a joint return, spouse's first name and initial	Last name	Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. Apt. no.

▲ Make sure the SSN(s) above and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).

Foreign country name	Foreign province/county	Foreign postal code
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Presidential Election Campaign
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. You Spouse

Filing status
Check only one box.

<p>1 <input type="checkbox"/> Single</p> <p>2 <input type="checkbox"/> Married filing jointly (even if only one had income)</p> <p>3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here. ▶</p>	<p>4 <input type="checkbox"/> Head of household (with qualifying person). (See instructions). If the qualifying person is a child but not your dependent, enter this child's name here. ▶</p> <p>5 <input type="checkbox"/> Qualifying widow(er) with dependent child (see instructions)</p>
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Exemptions

6a Yourself. If someone can claim you as a dependent, **do not** check box 6a.

b Spouse

c Dependents:

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if child under age 17 qualifying for child tax credit (see instructions)
				<input type="checkbox"/>

d Total number of exemptions claimed.

Boxes checked on 6a and 6b
No. of children on 6c who:
• lived with you
• did not live with you due to divorce or separation (see instructions)
Dependents on 6c not entered above
Add numbers on lines above ▶

Income

7 Wages, salaries, tips, etc. Attach Form(s) W-2.	7
8a Taxable interest. Attach Schedule B if required.	8a
b Tax-exempt interest. Do not include on line 8a.	8b
9a Ordinary dividends. Attach Schedule B if required.	9a
b Qualified dividends (see instructions).	9b
10 Capital gain distributions (see instructions).	10
11a IRA distributions.	11a
11b Taxable amount (see instructions).	11b
12a Pensions and annuities.	12a
12b Taxable amount (see instructions).	12b
13 Unemployment compensation and Alaska Permanent Fund dividends.	13
14a Social security benefits.	14a
14b Taxable amount (see instructions).	14b
15 Add lines 7 through 14b (far right column). This is your total income . ▶	15

Adjusted gross income

16 Educator expenses (see instructions).	16
17 IRA deduction (see instructions).	17
18 Student loan interest deduction (see instructions).	18
19 Tuition and fees. Attach Form 8917.	19
20 Add lines 16 through 19. These are your total adjustments .	20
21 Subtract line 20 from line 15. This is your adjusted gross income . ▶	21

Tax, credits, and payments

22	Enter the amount from line 21 (adjusted gross income).	22	
23a	Check <input type="checkbox"/> You were born before January 2, 1947, <input type="checkbox"/> Blind if: <input type="checkbox"/> Spouse was born before January 2, 1947, <input type="checkbox"/> Blind } Total boxes checked ▶ 23a <input type="checkbox"/>		
b	If you are married filing separately and your spouse itemizes deductions, check here ▶ 23b <input type="checkbox"/>		
24	Enter your standard deduction .	24	
25	Subtract line 24 from line 22. If line 24 is more than line 22, enter -0-.	25	
26	Exemptions. Multiply \$3,700 by the number on line 6d.	26	
27	Subtract line 26 from line 25. If line 26 is more than line 25, enter -0-. This is your taxable income .	▶ 27	
28	Tax , including any alternative minimum tax (see instructions).	28	
29	Credit for child and dependent care expenses. Attach Form 2441.	29	
30	Credit for the elderly or the disabled. Attach Schedule R.	30	
31	Education credits from Form 8863, line 23.	31	
32	Retirement savings contributions credit. Attach Form 8880.	32	
33	Child tax credit (see instructions).	33	
34	Add lines 29 through 33. These are your total credits .	34	
35	Subtract line 34 from line 28. If line 34 is more than line 28, enter -0-. This is your total tax .	35	
36	Federal income tax withheld from Forms W-2 and 1099.	36	
37	2011 estimated tax payments and amount applied from 2010 return.	37	
38a	Earned income credit (EIC).	38a	
b	Nontaxable combat pay election.	38b	
39	Additional child tax credit. Attach Form 8812.	39	
40	American opportunity credit from Form 8863, line 14.	40	
41	Add lines 36, 37, 38a, 39, and 40. These are your total payments .	▶ 41	

Standard Deduction for—
 • People who check any box on line 23a or 23b or who can be claimed as a dependent, see instructions.
 • All others:
 Single or Married filing separately, \$5,800
 Married filing jointly or Qualifying widow(er), \$11,600
 Head of household, \$8,500

If you have a qualifying child, attach Schedule EIC.

Refund

42	If line 41 is more than line 35, subtract line 35 from line 41. This is the amount you overpaid .	42	
43a	Amount of line 42 you want refunded to you . If Form 8888 is attached, check here ▶ <input type="checkbox"/> 43a		
b	Routing number <input type="text"/> ▶ c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
d	Account number <input type="text"/>		
44	Amount of line 42 you want applied to your 2012 estimated tax .	44	

Direct deposit? See instructions and fill in 43b, 43c, and 43d or Form 8888.

Amount you owe

45	Amount you owe. Subtract line 41 from line 35. For details on how to pay, see instructions.	▶ 45	
46	Estimated tax penalty (see instructions).	46	

Third party designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? **Yes**. Complete the following. **No**

Designee's name ▶	Phone no. ▶	Personal identification number (PIN) ▶
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Sign here

Joint return? See page 13. Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and accurately list all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Your signature	Date	Your occupation	Daytime phone number
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	

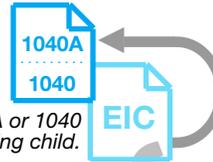
Paid preparer use only

Print/type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶	Firm's address ▶		Firm's EIN ▶	Phone no.

SCHEDULE EIC
(Form 1040A or 1040)

Earned Income Credit

Qualifying Child Information



OMB No. 1545-0074

2011

Attachment
Sequence No. **43**

Department of the Treasury
Internal Revenue Service (99)
Name(s) shown on return

Complete and attach to Form 1040A or 1040
only if you have a qualifying child.

Your social security number

Before you begin:

- See the instructions for Form 1040A, lines 38a and 38b, or Form 1040, lines 64a and 64b, to make sure that **(a)** you can take the EIC, and **(b)** you have a qualifying child.
- Be sure the child's name on line 1 and social security number (SSN) on line 2 agree with the child's social security card. Otherwise, at the time we process your return, we may reduce or disallow your EIC. If the name or SSN on the child's social security card is not correct, call the Social Security Administration at 1-800-772-1213.



- If you take the EIC even though you are not eligible, you may not be allowed to take the credit for up to 10 years. See page 2 of schedule for details.
- It will take us longer to process your return and issue your refund if you do not fill in all lines that apply for each qualifying child.

Qualifying Child Information

Child 1

Child 2

Child 3

	Child 1	Child 2	Child 3
1 Child's name If you have more than three qualifying children, you only have to list three to get the maximum credit.	First name _____ Last name _____	First name _____ Last name _____	First name _____ Last name _____
2 Child's SSN The child must have an SSN as defined in the instructions for Form 1040A, lines 38a and 38b, or Form 1040, lines 64a and 64b, unless the child was born and died in 2011. If your child was born and died in 2011 and did not have an SSN, enter "Died" on this line and attach a copy of the child's birth certificate, death certificate, or hospital medical records.			
3 Child's year of birth	Year _____ <i>If born after 1992 and the child was younger than you (or your spouse, if filing jointly), skip lines 4a and 4b; go to line 5.</i>	Year _____ <i>If born after 1992 and the child was younger than you (or your spouse, if filing jointly), skip lines 4a and 4b; go to line 5.</i>	Year _____ <i>If born after 1992 and the child was younger than you (or your spouse, if filing jointly), skip lines 4a and 4b; go to line 5.</i>
4 a Was the child under age 24 at the end of 2011, a student, and younger than you (or your spouse, if filing jointly)?	<input type="checkbox"/> Yes. <input type="checkbox"/> No. <i>Go to line 5. Go to line 4b.</i>	<input type="checkbox"/> Yes. <input type="checkbox"/> No. <i>Go to line 5. Go to line 4b.</i>	<input type="checkbox"/> Yes. <input type="checkbox"/> No. <i>Go to line 5. Go to line 4b.</i>
b Was the child permanently and totally disabled during any part of 2011?	<input type="checkbox"/> Yes. <input type="checkbox"/> No. <i>Go to line 5. The child is not a qualifying child.</i>	<input type="checkbox"/> Yes. <input type="checkbox"/> No. <i>Go to line 5. The child is not a qualifying child.</i>	<input type="checkbox"/> Yes. <input type="checkbox"/> No. <i>Go to line 5. The child is not a qualifying child.</i>
5 Child's relationship to you (for example, son, daughter, grandchild, niece, nephew, foster child, etc.)			
6 Number of months child lived with you in the United States during 2011 • If the child lived with you for more than half of 2011 but less than 7 months, enter "7." • If the child was born or died in 2011 and your home was the child's home for the entire time he or she was alive during 2011, enter "12."	_____ months <i>Do not enter more than 12 months.</i>	_____ months <i>Do not enter more than 12 months.</i>	_____ months <i>Do not enter more than 12 months.</i>

**Exclusion of Interest From Series EE and I
 U.S. Savings Bonds Issued After 1989
 (For Filers With Qualified Higher Education Expenses)**
 ► Attach to Form 1040 or Form 1040A.

Your social security number

1	(a) Name of person (you, your spouse, or your dependent) who was enrolled at or attended an eligible educational institution	(b) Name and address of eligible educational institution

If you need more space, attach a statement.

2	Enter the total qualified higher education expenses you paid in 2011 for the person(s) listed in column (a) of line 1. See the instructions to find out which expenses qualify	2		
3	Enter the total of any nontaxable educational benefits (such as nontaxable scholarship or fellowship grants) received for 2011 for the person(s) listed in column (a) of line 1 (see instructions)	3		
4	Subtract line 3 from line 2. If zero or less, stop . You cannot take the exclusion	4		
5	Enter the total proceeds (principal and interest) from all series EE and I U.S. savings bonds issued after 1989 that you cash during 2011	5		
6	Enter the interest included on line 5 (see instructions)	6		
7	If line 4 is equal to or more than line 5, enter "1.000." If line 4 is less than line 5, divide line 4 by line 5. Enter the result as a decimal (rounded to at least three places)	7	x	
8	Multiply line 6 by line 7	8		
9	Enter your modified adjusted gross income (see instructions)	9		
<p>Note: If line 9 is \$86,100 or more if single or head of household, or \$136,650 or more if married filing jointly or qualifying widow(er) with dependent child, stop. You cannot take the exclusion.</p>				
10	Enter: \$71,100 if single or head of household; \$106,650 if married filing jointly or qualifying widow(er) with dependent child	10		
11	Subtract line 10 from line 9. If zero or less, skip line 12, enter -0- on line 13, and go to line 14	11		
12	Divide line 11 by: \$15,000 if single or head of household; \$30,000 if married filing jointly or qualifying widow(er) with dependent child. Enter the result as a decimal (rounded to at least three places)	12	x	
13	Multiply line 8 by line 12	13		
14	Excludable savings bond interest. Subtract line 13 from line 8. Enter the result here and on Schedule B (Form 1040A or Form 1040), line 3 ►	14		

General Instructions

Section references are to the Internal Revenue Code.

Purpose of Form
 If you cashed series EE or I U.S. savings bonds in 2011 that were issued after 1989, you may be able to exclude from your income part or all of the interest on those bonds. Use this form to figure the amount of any interest you may exclude.

Who Can Take the Exclusion
 You can take the exclusion if all four of the following apply.

1. You cashed qualified U.S. savings bonds in 2011 that were issued after 1989.
2. You paid qualified higher education expenses in 2011 for yourself, your spouse, or your dependents.
3. Your filing status is any status except married filing separately.
4. Your modified AGI (adjusted gross income) is less than: \$86,100 if single or head of household; \$136,650 if married filing jointly or qualifying widow(er) with dependent child. See the instructions for line 9 to figure your modified AGI.

U.S. Savings Bonds That Qualify for Exclusion

To qualify for the exclusion, the bonds must be series EE or I U.S. savings bonds issued after 1989 in your name, or, if you are married, they may be issued in your name and your spouse's name. Also, you must have been age 24 or older before the bonds were issued. A bond bought by a parent and issued in the name of his or her child under age 24 does not qualify for the exclusion by the parent or child.

Recordkeeping Requirements

Keep the following records to verify interest you exclude.

- Bills, receipts, canceled checks, or other documents showing you paid qualified higher education expenses in 2011.
- A written record of each post-1989 series EE or I bond that you cash. Your record must include the serial number, issue date, face value, and total redemption proceeds (principal and interest) of each bond. You can use Form 8818, Optional Form To Record Redemption of Series EE and I U.S. Savings Bonds Issued After 1989, as your written record.