

Test #10

This is a Single taxpayer with wages, unemployment and claiming EIC. Taxpayer has elected direct deposit for the refund due.

Federal Forms: None

Wisconsin Forms: 1A, EIC-A

Address:

209 N 5th Ave  
Wausau, WI 54401

Taxpayer:

Test Panther  
400-00-5410  
02/13/1965  
1099-G  
W2- WI withholding: \$1,600, WI ID# 036-9876543210-06

Dependent 1:

Pink Panther  
400-00-5445  
08/10/1990

Dependent 2:

Peter Panther  
400-00-5446  
05/08/1995

Filing Status: HOH

For this scenario, the taxpayer has requested the refund be direct deposited into the savings account listed below.

Bank routing number: 075911852

Bank account number: 555666789012



Complete form using **BLACK INK**

**Note**

DO NOT STAPLE

Your legal last name <b>PANTHER</b>		Legal first name <b>TEST</b>		M.I.	Your social security number <b>400 00 5410</b>
If a joint return, spouse's legal last name		Spouse's legal first name		M.I.	Spouse's social security number
Home address (number and street). If you have a PO Box, see page 6. <b>209 N 5TH AVE</b>				Apt. No.	
City or post office <b>WAUSAU</b>		State <b>WI</b>	Zip code <b>54401</b>		
Filing status <input type="checkbox"/> Single <input type="checkbox"/> Married filing joint return (even if only one had income) <input checked="" type="checkbox"/> Head of household      Fill in qualifying person's name ▼ Also, check here if married. ▶ <input type="checkbox"/> <b>PINK PANTHER</b>					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 2013. <input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town City, village, or town ▶ <b>WAUSAU</b> County of ▶ <b>MARATHON</b> School district number (see page 23) <b>6223</b> Special conditions <input type="checkbox"/>

	Print numbers like this → <b>0 1 2 3 4 5 6 7 8 9</b>	Not like this → <b>0147</b>	NO COMMAS; NO CENTS
1 Wages, salaries, tips, etc. (see page 7) .....	1		20800.00
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		10450.00
6 Taxable IRA distributions, pensions, and annuities (see page 8) .....	6		.00
7 Add lines 1 through 6 .....	7		31250.00
8 IRA deduction (see page 10) .....	8	300.00	
9 Student loan interest deduction (see page 10) .....	9	100.00	
10 Medical care insurance deduction (see page 10) .....	10	.00	
11 Add lines 8 through 10 .....	11		400.00
12 Subtract line 11 from line 7. This is your Wisconsin income .....	12		30850.00
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 <b>standard deduction</b> for your filing status from table, page 31. <b>But</b> if you checked line 13, fill in amount from worksheet, page 11 .....	14		9119.00
15 Subtract line 14 from line 12. If line 14 is larger than line 12, fill in 0 .....	15		21731.00
16 <b>Exemptions</b> (Caution: see page 11)			
a Fill in exemptions from your federal return .....	▶	3 x \$700 .. 16a	2100.00
b Check if 65 or older <input type="checkbox"/> You + <input type="checkbox"/> Spouse = <input type="checkbox"/> x \$250 .. 16b			.00
c Add lines 16a and 16b .....	16c		2100.00
17 Subtract line 16c from line 15. If line 16c is larger than line 15, fill in 0. This is your taxable income ..	17		19631.00
18 Tax. Use amount on line 17 to find your tax using table, page 24 .....	18		993.00
19 Armed forces member credit (must be stationed outside U.S., see page 11) 19			.00
20 School property tax credit			
a Rent paid in 2013—heat included <u>1400.00</u> } Find credit from			
Rent paid in 2013—heat not included <u>5200.00</u> } table page 12 .. 20a			193.00
b Property taxes paid on home in 2013 <u>1370.00</u> ▶ Find credit from			
table page 13 .. 20b			164.00
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		300.00
24 Subtract line 23 from line 18. If line 23 is larger than line 18, fill in 0. This is your net tax ..	24		693.00

ENCLOSE withholding statements

PAPER CLIP payment here

**NO COMMAS; NO CENTS**

25 Fill in net tax from line 24 ..... 25 693.00

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

27 Donations (decreases refund or increases amount owed)

a Endangered resources ..... .00	f Firefighters memorial ..... .00
b Packers football stadium ..... .00	g Military family relief ..... 20.00
c Cancer research ..... .00	h Second Harvest/Feeding Amer. .... .00
d Veterans trust fund ..... .00	i Red Cross WI Disaster Relief ..... .00
e Multiple sclerosis ..... .00	j Special Olympics ..... .00

Total (add lines a through j) .. ▶ 27k 20.00

28 Add lines 25, 26, and 27k ..... 28 713.00

29 Wisconsin income tax withheld. Enclose withholding statements ..... 29 1600.00

30 2013 estimated tax payments and amount applied from 2012 return ... 30 .00

31 Earned income credit (see page 16)  
 Qualifying Federal  
 children ▶ 2 credit ... 2130.00 x 11 % = ... 31 234.00

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 1834.00

35 If line 34 is more than line 28, subtract line 28 from line 34. This is the **AMOUNT YOU OVERPAID** 35 1121.00

36 Amount of line 35 you want **REFUNDED TO YOU** ..... 36 621.00

37 Amount of line 35 you want **applied to your 2014 estimated tax** ..... 37 500.00

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 19)?  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>
5 Rate of credit is .03 (3%) ..... 5		X <u>.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>



For Department Use Only

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# 2013 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
<b>1 Child's name</b>	First                  Last <b>Pink                  Panther</b>	First                  Last <b>Peter                  Panther</b>	First                  Last _____
<b>2 Child's social security number</b>	<b>400 - 00 - 5445</b>	<b>400 - 00 - 5446</b>	_____ - _____ - _____
<b>3 Child's relationship to you</b> <i>(check one)</i>	<input checked="" 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 checked="" 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
<b>4 Number of months child lived with you in the United States during 2013</b> <small>NOTE: If the child lived with you for more than half of 2013, but less than 7 months, enter "7". If the child was born or died in 2013, and your home was the child's for the entire time he or she was alive during 2013, enter "12".</small>	<u>1</u> <u>2</u>	<u>1</u> <u>2</u>	_____
<b>5 Child's year of birth</b>	<u>1</u> <u>9</u> <u>9</u> <u>0</u>	<u>1</u> <u>9</u> <u>9</u> <u>5</u>	_____
<b>6 If the child was born before 1995 –</b>			
<b>a</b> Was the child under age 24 at the end of 2013 and a full time student?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>b</b> Was the child permanently and totally disabled during any part of 2013?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

22222		Void <input type="checkbox"/>		a Employee's social security number 400-00-5410		For Official Use Only ▶ OMB No. 1545-0008						
b Employer identification number (EIN) 11-2233456				1 Wages, tips, other compensation 20,800.00		2 Federal income tax withheld 1,328.00						
c Employer's name, address, and ZIP code Happy Camper RV Park 8700 Stewart Ave Wausau, WI 54401				3 Social security wages 20,800.00		4 Social security tax withheld 874.00						
				5 Medicare wages and tips 20,800.00		6 Medicare tax withheld 302.00						
				7 Social security tips		8 Allocated tips						
				9		10 Dependent care benefits						
d Control number		e Employee's first name and initial Test		Last name Panther		Suff.		11 Nonqualified plans		12a See instructions for box 12		
f Employee's address and ZIP code 209 N 5th Ave Wausau, WI 54401				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 WI		Employer's state ID number 036-9876543210-06		16 State wages, tips, etc. 20,800.00		17 State income tax 1,600.00		18 Local wages, tips, etc.		19 Local income tax		20 Locality name

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

**2013**

Department of the Treasury—Internal Revenue Service  
For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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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 VOID  CORRECTED

PAYER'S name, street address, city or town, province or state, country, ZIP, or foreign postal code, and telephone no. <b>Test Unemployment 200 King St Madison, WI 53713</b>		1 Unemployment compensation \$ 12,500.00	OMB No. 1545-0120 <b>2013</b> Form 1099-G		<b>Certain Government Payments</b>  <b>Copy A</b> <b>For Internal Revenue Service Center</b> <b>File with Form 1096.</b> For Privacy Act and Paperwork Reduction Act Notice, see the 2013 General Instructions for Certain Information Returns.	
PAYER'S federal identification number <b>01-2345678</b>		2 State or local income tax refunds, credits, or offsets \$	3 Box 2 amount is for tax year			4 Federal income tax withheld \$
RECIPIENT'S identification number <b>400-00-5410</b>		5 RTAA payments \$		6 Taxable grants \$		
RECIPIENT'S name <b>Test Panther</b>		7 Agriculture payments \$		8 Check if box 2 is trade or business income <input type="checkbox"/>		
Street address (including apt. no.) <b>209 N 5th Ave</b>		9 Market gain \$		10a State		
City or town, province or state, country and ZIP or foreign postal code <b>Wausau, WI 54401</b>		10b State identification no.		11 State income tax withheld \$		
Account number (see instructions)				\$		
				\$		

Form 1099-G

Cat. No. 14438M

www.irs.gov/form1099g

Department of the Treasury - Internal Revenue Service

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