

2022 Additional Information / Wisconsin Tax Intake Sheet

Taxpayer Name: _____

____ City ____ Village ____ Town _____

County _____

School District _____

1 Did you (and your spouse, if applicable) live in Wisconsin ALL of 2022? []Yes []No

2 Did you make any Estimated Tax Payments to Wisconsin Dept of Revenue? []Yes []No

3 Did you pay Medical Insurance Premiums in 2022?	Monthly	Annual	[]Yes []No
1) Medicare Insurance Parts A, B, C, D	\$ _____	\$ _____	
2) Medicare Supplemental Insurance	\$ _____	\$ _____	
3) Health Insurance (Include Marketplace Pmts)	\$ _____	\$ _____	
4) Dental Insurance	\$ _____	\$ _____	
5) Vision Insurance	\$ _____	\$ _____	
6) Badger Care Insurance	\$ _____	\$ _____	
Total Medical Premiums Paid After-Tax	\$ _____	\$ _____	

4 Did you pay Long-Term Care Insurance premiums in 2022? []Yes []No
 If Yes, Taxpayer \$ _____ Spouse \$ _____

5 Amount you paid for Tuition for K-12 private schools? \$ _____

6 Amount you paid for Tuition and/or fees to a college or vocational school? \$ _____

7 Did you contribute to a Wisconsin EdVest or Tomorrow's Scholar account? \$ _____ []Yes []No

8 How much Rent did you pay for your Primary Residence(s) in 2022? Monthly Amount \$ _____
 Was heat included in Rent? []Yes []No

9 How much did you pay in Property Taxes for your primary residence in 2022?
 Do not include assessments, garbage service, recycling fees, etc. \$ _____

10 Did you buy anything outside of Wisconsin for which no sales tax was charged? []Yes []No
 If yes, total amount of purchases \$ _____

11 Do you want to claim Homestead Credit if possible? []Yes []No
(Total household income must be less than \$24,680 and full year WI resident)
 If Yes, do you have a completed Rent Certificate (no errors or corrections visible)? []Yes []No
 Or, do you have a copy of your 2022 Property Tax Bill (whether paid or not)? []Yes []No

If claiming Homestead Credit, list income from any of the following sources:

a. SSI	\$ _____
b. VA Benefits (Military Compensation)	\$ _____
c. Scholarships/Fellowships/Grants/VEAP/GI Bill	\$ _____
d. Court Ordered Child Support	\$ _____