



2021 Federal Tax Return Filing Instructions
FOR THE YEAR ENDING
December 31, 2021

Prepared for	JOE SALINTHONE																
Tax Summary	<table style="width: 100%;"><tr><td style="width: 60%;">Gross Income.....</td><td style="text-align: right; border-top: 1px solid black;">\$49171</td></tr><tr><td>Adjusted Gross Income.....</td><td style="text-align: right; border-top: 1px solid black;">\$49171</td></tr><tr><td>Total Deductions.....</td><td style="text-align: right; border-top: 1px solid black;">\$12550</td></tr><tr><td>Total Taxable Income.....</td><td style="text-align: right; border-top: 1px solid black;">\$36621</td></tr><tr><td>Total Tax.....</td><td style="text-align: right; border-top: 1px solid black;">\$4196</td></tr><tr><td>Total Payments.....</td><td style="text-align: right; border-top: 1px solid black;">\$3852</td></tr><tr><td>Refund Amount.....</td><td style="text-align: right; border-top: 1px solid black;">\$0</td></tr><tr><td>Amount You Owe.....</td><td style="text-align: right; border-top: 1px solid black; border-bottom: 3px double black;">\$344</td></tr></table>	Gross Income.....	\$49171	Adjusted Gross Income.....	\$49171	Total Deductions.....	\$12550	Total Taxable Income.....	\$36621	Total Tax.....	\$4196	Total Payments.....	\$3852	Refund Amount.....	\$0	Amount You Owe.....	\$344
Gross Income.....	\$49171																
Adjusted Gross Income.....	\$49171																
Total Deductions.....	\$12550																
Total Taxable Income.....	\$36621																
Total Tax.....	\$4196																
Total Payments.....	\$3852																
Refund Amount.....	\$0																
Amount You Owe.....	\$344																
Make check payable to																	
Mailing Address	Since you are filing your return electronically and you chose to use an electronic signature, you do not mail your return.																

Instructions

If you e-filed your return and it has been accepted, you will get notified via text or email if you opted for that option.

If you have a balance due being paid by check or are paper filing the return, mail it to the address indicated.

Sign and date Form. Assemble what you need to mail. Attach any schedules and forms behind Form 1040 in order of the Attachment Sequence Number shown in the upper right corner of the schedule or form.

If there are supporting statements, arrange them in the same order as the schedules or forms they support and attach them last. Do not attach correspondence or other items unless required to do so.

Attach a copy of each W-2, W-2G, and 2439 to the front of Form 1040. Also attach Form(s) 1099-R or 1099-G if tax was withheld.

Pay balance due on your taxes Make your check or money order for 344 payable to the United States Treasury. Do not send cash and do not forget to sign it. Write your Social Security number(s) and daytime phone number on your check or money order (U.S. funds only).



2021 STATE TAX RETURN FILING INSTRUCTIONS

WISCONSIN
FOR THE YEAR ENDING
December 31, 2021

Prepared for	JOE SALINTHONE																					
Tax Summary	<table><tr><td>Adjusted Gross Income.....</td><td>\$</td><td>49,171</td></tr><tr><td>Total Deductions.....</td><td>\$</td><td>7,228</td></tr><tr><td>Total Taxable Income.....</td><td>\$</td><td>41,243</td></tr><tr><td>Total Tax.....</td><td>\$</td><td>1,894</td></tr><tr><td>Total Payments.....</td><td>\$</td><td>2,191</td></tr><tr><td>Refund Amount.....</td><td>\$</td><td>297</td></tr><tr><td>Amount You Owe.....</td><td>\$</td><td>0</td></tr></table>	Adjusted Gross Income.....	\$	49,171	Total Deductions.....	\$	7,228	Total Taxable Income.....	\$	41,243	Total Tax.....	\$	1,894	Total Payments.....	\$	2,191	Refund Amount.....	\$	297	Amount You Owe.....	\$	0
Adjusted Gross Income.....	\$	49,171																				
Total Deductions.....	\$	7,228																				
Total Taxable Income.....	\$	41,243																				
Total Tax.....	\$	1,894																				
Total Payments.....	\$	2,191																				
Refund Amount.....	\$	297																				
Amount You Owe.....	\$	0																				
Make check payable to																						
Mailing Address	Since you are filing your return electronically and you chose to use an electronic signature, you do not mail your return.																					

Special Instructions

Keep A Copy

Click on Main Menu and then E-File or Print to print your return. Attach your copy of each W-2, W-2G, 1099R or 1099G with withholding. Keep with your records for three years.

INTERNAL REVENUE SERVICE
P O Box 931000
Louisville, KY 40293-1000

Fold here for #10 envelope

INTERNAL REVENUE SERVICE
P O Box 931000
Louisville, KY 40293-1000

Fold here for 6x9 envelope

Fold here for #10 envelope

2021 TWO YEAR COMPARISON

JOE SALINTHONE
616-96-8743

Keep for Your Records

	2021	2020	Difference
Filing status	Single		
INCOME:			
Wages, salaries, tips, etc.	49,171		49,171
Interest income			
Ordinary dividend income			
IRA distributions and pension income			
Taxable social security income			
Capital gain or (loss) (Schedule D)			
Schedule 1 - Income			
Refunds of state and local taxes			
Business income or (loss) (Schedule C)			
Other gains or (losses) (Form 4797)			
Rental real estate, partnerships, estates, etc. (Schedule E)			
Farm income or (loss) (Schedule F)			
Unemployment compensation			
Other income			
Total income	49,171		49,171
ADJUSTMENTS:			
Schedule 1 - Adjustments			
Deductible part of self-employment tax			
Self-employed SEP, SIMPLE and qualified plans deduction. ...			
Self-employed health insurance			
IRA contributions			
Student loan interest deduction			
Other adjustments			
Charitable contributions if taking standard deduction	N/A		
Total adjustments			
ADJUSTED GROSS INCOME:	49,171		49,171
DEDUCTIONS:			
Standard deduction or Itemized deductions	12,550		12,550
Charitable contributions if taking standard deduction,		N/A	
If itemized, Schedule A deductions:			
Medical and dental expenses			
Sales, income, and other taxes paid	2,191		2,191
Interest paid			
Gifts to charity			
Casualty and theft losses			
Other miscellaneous deductions			
Qualified business income deduction			
TAXABLE INCOME:	36,621		36,621
TAX COMPUTATION (BEFORE CREDITS):			
Tax	4,196		4,196
Tax calculation method	TABLE		
Schedule 2 - Taxes			
Alternative minimum tax			
Excess advance premium tax credit repayment			
Total taxes	4,196		4,196
Tax rate	12%		

Tax Calculation Methods:

Sch D = Sch D tax worksheet
Sch J = Inc Aver for Farmer/Fisherman
FEITW = Foreign Earned Income Tax WS

QDCGTW = Qual Div Cap Gain Tax WS
F8615 = Child with unearned income

TCW = Tax Comp Worksheet (rates)
TABLE = Tax Table

2021 TWO YEAR COMPARISON

JOE SALINTHONE
616-96-8743

Keep for Your Records

	2021	2020	Difference
CREDITS:			
Child and other dependents tax credit			
Schedule 3 - Non-Refundable Credits			
Foreign tax credit			
Child care credit			
Education credit			
Retirement savings contribution credit			
Other credits			
Total credits			
OTHER TAXES:			
Schedule 2 - Other Taxes			
Self-employment tax			
Additional tax on IRAs			
Health Care (Individual Responsibility)			
Other taxes			
TOTAL TAXES:			
PAYMENTS:			
Federal income tax withheld	3,852		3,852
Estimated payments made			
Earned income credit			
Refundable child tax credit or additional child tax credit			
American opportunity credit			
Recovery rebate credit			
Schedule 3 - Refundable Credits & Payments			
ACA premium tax credit			
Qualified sick and family leave credit		N/A	
Deferral for certain Schedule H or Schedule SE filers		N/A	
Other payments			
Total payments	3,852		3,852
AMOUNT DUE / REFUND:			
Amount overpaid			
Overpayment applied to next year			
Refund			
Amount due	344		344
Penalty			344

Your first name and middle initial JOE	Last name SALINTHONE	Your social security number 616-96-8743
---	-------------------------	--

If joint return, spouse's first name and middle initial	Last name	Spouse's social security number
---	-----------	---------------------------------

Home address (number and street). If you have a P.O. box, see instructions. 5836 RUSSETT RD	Apt. no.	Presidential Election Campaign Check here if you, or your
--	----------	---

City, town, or post office. If you have a foreign address, also complete spaces below.	State	ZIP code	spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change
Madison	WI	53711	

Foreign country name	Foreign province/state/county	Foreign postal code	You <input type="checkbox"/> Spouse <input type="checkbox"/>
----------------------	-------------------------------	---------------------	--


At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency?	Yes	<input checked="" type="checkbox"/> No
---	-----	--

Standard	Someone can claim: <input type="checkbox"/> You as a dependent <input type="checkbox"/> Your spouse as a dependent
1. The dependent must be a U.S. citizen, resident, or national.	<input type="checkbox"/>
2. The dependent must be under 19 years old at the end of the year, or under 24 years old if a student.	<input type="checkbox"/>
3. The dependent must be unmarried.	<input type="checkbox"/>
4. The dependent must be unable to support themselves.	<input type="checkbox"/>
5. The dependent must be a member of your household.	<input type="checkbox"/>
6. The dependent must be a U.S. resident.	<input type="checkbox"/>

Deduction ☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: ☐ Were born before January 2, 1957 ☐ Are blind Spouse: ☐ Was born before January 2, 1957 ☐ Is blind

Dependents (see instructions):

(1) First name		Last name	number	to you	Child tax credit	Credit for other dependents
If more than four dependents, see instructions and check here 						

1 Wages, salaries, tips, etc. Attach Form(s) W-2				1 49,171				
Attach Sch. B if required.	2a	Tax-exempt interest	2a	b	Taxable interest	2b		
	3a	Qualified dividends	3a	b	Ordinary dividends	3b		
	4a	IRA distributions	4a	b	Taxable amount	4b		
	5a	Pensions and annuities	5a	b	Taxable amount	5b		
Standard Deduction for- • Single or Married filing separately, \$12,550 • Married filing jointly or Qualifying widow(er), \$25,100 • Head of household, \$18,800 • If you checked any box under Standard Deduction, see instructions.	6a	Social security benefits	6a	b	Taxable amount	6b		
	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here					7	
	8	Other income from Schedule 1, line 10					8	
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income					9	49,171
	10	Adjustments to income from Schedule 1, line 26					10	
	11	Subtract line 10 from line 9. This is your adjusted gross income					11	49,171
	12a	Standard deduction or itemized deductions (from Schedule A)			12a	12,550		
	b	Charitable contributions if you take the standard deduction (see instructions)			12b			
	c	Add lines 12a and 12b			12c	12,550		
	13	Qualified business income deduction from Form 8995 or Form 8995-A					13	
14	Add lines 12c and 13					14	12,550	
15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-					15	36,621	

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2021)

16 Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>	16	4,196
17 Amount from Schedule 2, line 3	17	
18 Add lines 16 and 17	18	4,196
19 Nonrefundable child tax credit or credit for other dependents from Schedule 8812	19	
20 Amount from Schedule 3, line 8	20	
21 Add lines 19 and 20	21	
22 Subtract line 21 from line 18. If zero or less, enter -0-	22	4,196
23 Other taxes, including self-employment tax, from Schedule 2, line 21	23	
24 Add lines 22 and 23. This is your total tax	24	4,196
25 Federal income tax withheld from:		
a Form(s) W-2	25a	3,852
b Form(s) 1099	25b	
c Other forms (see instructions)	25c	
d Add lines 25a through 25c	25d	3,852
26 2021 estimated tax payments and amount applied from 2020 return	26	
27a Earned income credit (EIC). Check here if you were born after January 1, 1998, and before January 2, 2004, and you satisfy all the other requirements for taxpayers who are at least age 18, to claim the EIC. See instructions ... <input type="checkbox"/>	27a	
b Nontaxable combat pay election	27b	
c Prior year (2019) earned income	27c	
28 Refundable child tax credit or additional child tax credit from Schedule 8812	28	
29 American opportunity credit from Form 8863, line 8	29	
30 Recovery rebate credit. See instructions.	30	
31 Amount from Schedule 3, line 15	31	
32 Add lines 27a and 28 through 31. These are your total other payments and refundable credits	32	
33 Add lines 25d, 26, and 32. These are your total payments	33	3,852
Refund 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	
35a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here ... <input type="checkbox"/>	35a	
Direct deposit? <input type="checkbox"/> See instructions. b Routing number XXXXXXXXXXXXXXXXXXXX c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
d Account number XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		
36 Amount of line 34 you want applied to your 2022 estimated tax	36	
Amount 37 Amount you owe . Subtract line 33 from line 24. For details on how to pay, see instructions	37	344
You Owe 38 Estimated tax penalty (see instructions)	38	

Third Party DesigneeDo you want to allow another person to discuss this return with the IRS? See instructions ... ☐ **Yes**. Complete below. ☒ **No**

Designee's name ▶

Phone no. ▶

Personal identification number (PIN) ▶

Sign Here

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 complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See instructions. Keep a copy for your records.

Your signature

Date

Your occupation

LABROER

If the IRS sent you an Identity Protection PIN, enter it here (see inst.) ▶

Spouse's signature. If a joint return, **both** must sign.

Date

Spouse's occupation

If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) ▶

Phone no. 530-966-4933

Email address joe.salinthone@gmail.com

Paid**Preparer****Use Only**

Preparer's name

Preparer's signature

Date

PTIN

Check if:

☐ Self-employed

Firm's name ▶

Phone no.

Firm's address ▶

Firm's EIN ▶

Go to www.irs.gov/Form1040 for instructions and the latest information.Form **1040** (2021)

Credit for Qualified Retirement Savings Contributions

► **Attach to Form 1040, 1040-SR, or 1040-NR.**
 ► **Go to www.irs.gov/Form8880 for the latest information.**

Name(s) shown on return
JOE SALINTHONEYour social security number
616-96-8743You **cannot** take this credit if **either** of the following applies.

- The amount on Form 1040, 1040-SR, or 1040-NR, line 11, is more than \$33,000 (\$49,500 if head of household; \$66,000 if married filing jointly).
- The person(s) who made the qualified contribution or elective deferral **(a)** was born after January 1, 2004; **(b)** is claimed as a dependent on someone else's 2021 tax return; or **(c)** was a **student** (see instructions).

	(a) You	(b) Your spouse
1 Traditional and Roth IRA contributions, and ABLE account contributions by the designated beneficiary for 2021. Do not include rollover contributions		
2 Elective deferrals to a 401(k) or other qualified employer plan, voluntary employee contributions, and 501(c)(18)(D) plan contributions for 2021 (see instructions)	2,050	
3 Add lines 1 and 2	2,050	
4 Certain distributions received after 2018 and before the due date (including extensions) of your 2021 tax return (see instructions). If married filing jointly, include both spouses' amounts in both columns. See instructions for an exception		
5 Subtract line 4 from line 3. If zero or less, enter -0-	2,050	
6 In each column, enter the smaller of line 5 or \$2,000	2,000	
7 Add the amounts on line 6. If zero, stop ; you can't take this credit		2,000
8 Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 11*	49,171	
9 Enter the applicable decimal amount from the table below.		

If line 8 is --		And your filing status is --		
Over --	But not over --	Married filing jointly	Head of household	Single, Married filing separately, or Qualifying widow(er)
Enter on line 9 --				
---	\$19,750	0.5	0.5	0.5
\$19,750	\$21,500	0.5	0.5	0.2
\$21,500	\$29,625	0.5	0.5	0.1
\$29,625	\$32,250	0.5	0.2	0.1
\$32,250	\$33,000	0.5	0.1	0.1
\$33,000	\$39,500	0.5	0.1	0.0
\$39,500	\$43,000	0.2	0.1	0.0
\$43,000	\$49,500	0.1	0.1	0.0
\$49,500	\$66,000	0.1	0.0	0.0
\$66,000	---	0.0	0.0	0.0

Note: If line 9 is zero, **stop**; you can't take this credit.

10 Multiply line 7 by line 9	10	
11 Limitation based on tax liability. Enter the amount from the Credit Limit Worksheet in the instructions	11	4,196
12 Credit for qualified retirement savings contributions. Enter the smaller of line 10 or line 11 here and on Schedule 3 (Form 1040), line 4	12	

* See Pub. 590-A for the amount to enter if you claim any exclusion or deduction for foreign earned income, foreign housing, or income from Puerto Rico or for bona fide residents of American Samoa.

For Paperwork Reduction Act Notice, see your tax return instructions.Form **8880** (2021)

2021 WAGES AND SALARIES SUMMARY ATTACHMENT

JOE SALINTHONE
616-96-8743

Employer Name	Employer EIN	T or S	Wages	Federal Withholding	Social Security Tax Withheld	State	State Wages	State Tax Withheld	Local Tax Withheld
SUB-ZEROINC	39-0742970	T	49,171	3,852	3,176	WI	49,171	2,191	

Total			49,171	3,852	3,176		49,171	2,191
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2021 FEDERAL TAX WITHHOLDINGS ATTACHMENT

JOE SALINTHONE
616-96-8743

W-2

SUB-ZEROINC

3,852

Total to Form 1040/1040-SR line 25d

3,852

2021 SCHEDULE A - STATE AND LOCAL TAX ATTACHMENT

JOE SALINTHONE
616-96-8743

WI W2 W/H FROM SUB-ZERO INC

2,191

TOTAL TO SCHEDULE A LINE 5A

2,191

A voucher is printed at the bottom of this page.

NOTE: This is a new scannable voucher approved by the IRS for filing of the 1040-V for the year 2021. This is different than the voucher that is on the IRS website.

- ▶ Use this voucher when making a payment with Form 1040.
- ▶ Do not staple this voucher or your payment to Form 1040.
- ▶ Make your check or money order payable to the "United States Treasury".
- ▶ Write your Social Security Number (SSN) on your check or money order.

Mail payment to:

INTERNAL REVENUE SERVICE
P O Box 931000
Louisville, KY 40293-1000

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21 1040VS1

TXO 1040

Form **1040-V** (2021)

▼ Detach Here and Mail with Your Payment and Return ▼

Department of the Treasury Internal Revenue Service	2021 OMB No. 1545-0074	Form 1040-V Payment Voucher		
<p>▶ Use Form 1040-V when paying the balance due on Form 1040, Form 1040A, 1040EZ, or 1040NR. ▶ Enter your SSN on your check or money order. ▶ If your name, address, or SSN is incorrect, see instructions.</p>		<table><tr><td>Amount you are paying by check or money order. Make your check or money order payable to "United States Treasury"</td><td>Dollars 344</td></tr></table>	Amount you are paying by check or money order. Make your check or money order payable to "United States Treasury"	Dollars 344
Amount you are paying by check or money order. Make your check or money order payable to "United States Treasury"	Dollars 344			

1729

For Privacy Act and Paperwork Reduction Act Notice, see instructions.



JOE SALINTHONÉ
5836 RUSSETT RD
Madison, WI 53711

INTERNAL REVENUE SERVICE
P O Box 931000
Louisville, KY 40293-1000

616968743 BS SALI 30 0 202112 610

2022 CARRYFORWARD INFORMATION

JOE SALINTHONE
616-96-8743

Keep for Your Records

Itemized Returns Only – 2021 state and local tax refund (this amount may not be taxable in 2022)	
Charitable contributions carryover to 2022	
Estimated short-term capital loss carryover	
Estimated long-term capital loss carryover	
2021 tax liability (for 2022 Form 2210 purposes)	4,196
Form 8839: 2021 carryover of unqualified expenses	
Refund amount applied to 2022	
Disallowed investment interest in 2021	
Additional state taxes paid	
Form 8396: Mortgage interest credit from 2019	
Mortgage interest credit from 2020	
Mortgage interest credit from 2021	
Form 8801: Minimum tax credit carryforward	0
Potential 2022 IRA contribution from 2021 tax refund	

NOL carryforward:				Regular Tax	AMT Tax			
from 2001		from 2011			from 2001		from 2011	
from 2002		from 2012			from 2002		from 2012	
from 2003		from 2013			from 2003		from 2013	
from 2004		from 2014			from 2004		from 2014	
from 2005		from 2015			from 2005		from 2015	
from 2006		from 2016			from 2006		from 2016	
from 2007		from 2017			from 2007		from 2017	
from 2008		from 2018			from 2008		from 2018	
from 2009		from 2019			from 2009		from 2019	
from 2010		from 2020			from 2010		from 2020	
Gross NOL generated in 2021					Gross AMT NOL generated in 2021			
To be absorbed in carryback period					To be absorbed in carryback period			
Net carryforward from 2021					Net carryforward from 2021			
Total carryforward to 2022					Total carryforward to 2022			

- The amounts carried to next year from Schedule(s) E, pages 1 and/or 2, are found on Form 8582, Worksheet 6. Carryover AMT amounts are found on the AMT Form 8582, Worksheet 6.
- Foreign Tax Credit carryforward to 2022
- General Business Credit carryforward to 2022
- First-Time Homebuyer Credit Repayment carryforward to 2022
- If there are Form(s) 6252 in this tax return, the gross profit ratio and prior payments received (including the current year payments) will carry forward from each Form 6252.
- Amounts from Form 6251, lines 16 through 18, lines 27 and 28 are automatically carried forward to 2022.

For the year Jan. 1–Dec. 31, 2021, or other tax year

Check here if an amended return ☐ beginning _____, 2021 ending _____, 20____.

DO NOT STAPLE

See instructions before assembling return

Your legal last name SALINTHONE		Legal first name JOE		M.I.	Your social security number 616968743
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 instr. 5836 RUSSETT RD				Apt. no.	
City or post office MADISON		State WI	Zip code 53711		
Filing status Check <input checked="" type="checkbox"/> below <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married filing joint return <input type="checkbox"/> Married filing separate return. Fill in spouse's SSN above and full name here ▶				Tax district Check below then fill in either the name of the city, village, or town and the county in which you lived at the end of 2021. <input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town City, village, or town ▶ MADISON County of ▶ DANE School district number See inst. 3269	
<input type="checkbox"/> Head of household, NOT married (see instructions). <input type="checkbox"/> Head of household, married (see instructions).				Special conditions <input type="checkbox"/> _____ <input type="checkbox"/> Form 804 filed with return (see instructions)	
Legal last name Legal first name M.I.				If married, fill in spouse's SSN above and full name here ↑	

Use **BLACK Ink**

NO COMMAS; NO CENTS

1	Federal adjusted gross income (see instructions)	1	49171 .00
	Form W-2 wages included in line 1 ▶		49171 .00
2	Total additions to income from Schedule AD, line 33. Enclose Schedule AD (see instructions)	2	.00
3	Add lines 1 and 2	3	49171 .00
4	Total subtractions from income from Schedule SB, line 51. Enclose Schedule SB (see instructions) Enter as a positive number	4	.00
5	Subtract line 4 from line 3. This is your Wisconsin income	5	49171 .00
6	Standard deduction. See table on page 34, OR ▼ If someone else can claim you (or your spouse) as a dependent, see page 14 and check here ▶	6	7228 .00
7	Subtract line 6 from line 5. If line 6 is larger than line 5, fill in 0	7	41943 .00
8	Exemptions (Caution: See page 14)		
a	Fill in exemptions allowed 1 x \$700 8a		700.00
b	Check if 65 or older <input type="checkbox"/> You + <input type="checkbox"/> Spouse = <input type="checkbox"/> x \$250 8b		.00
c	Add lines 8a and 8b	8c	700 .00
9	Subtract line 8c from line 7. If line 8c is larger than line 7, fill in 0. This is taxable income	9	41243 .00
10	Tax (see table on page 36)	10	1894 .00

PAPER CLIP payment here



NO COMMAS; NO CENTS

11	Itemized deduction credit. Enclose Schedule 1, page 4	11	<u>.00</u>
12	School property tax credit		
a	Rent paid in 2021 – heat included <u>.00</u>	Find credit from table in instr . . .	12a <u>.00</u>
	Rent paid in 2021 – heat not included <u>.00</u>		
b	Property taxes paid on home in 2021 <u>.00</u>	Find credit from table in instr . . .	12b <u>.00</u>
13	Working families tax credit (see instructions)	13	<u>.00</u>
14	Married couple credit. Enclose Schedule 2, page 4	14	<u>.00</u>
15	Nonrefundable credits from line 34 of Schedule CR	15	<u>.00</u>
16	Net income tax paid to another state. Enclose Schedule OS	16	<u>.00</u>
17	Add lines 11 through 16	17	<u>.00</u>
18	Subtract line 17 from line 10. If line 17 is larger than line 10, fill in 0. This is your net tax	18	<u>1894 .00</u>
19	Sales and use tax due on internet, mail order, or other out-of-state purchases (see instructions)	19	<u>.00</u>
	If you certify that no sales or use tax is due, check here		<u>X</u>
20	Donations (decreases refund or increases amount owed)		
a	Endangered resources <u>.00</u>	e	Military family relief <u>.00</u>
b	Cancer research <u>.00</u>	f	Second Harvest/Feeding Amer. <u>.00</u>
c	Veterans trust fund <u>.00</u>	g	Red Cross WI Disaster Relief <u>.00</u>
d	Multiple sclerosis <u>.00</u>	h	Special Olympics Wisconsin <u>.00</u>
	Total (add lines a through h)	20i	<u>.00</u>
21	Penalties on IRAs, retirement plans, MSAs, etc. (see instructions)	<u>.00</u> x .33 =	21 <u>.00</u>
22	Other penalties (see instructions)	22	<u>.00</u>
23	Add lines 18, 19, 20i, 21 and 22	23	<u>1894 .00</u>
24	Wisconsin tax withheld. Enclose withholding statements	24	<u>2191.00</u>
25	2021 estimated tax payments and amount applied from 2020 return	25	<u>.00</u>
26	Earned income credit. Number of qualifying children <u> </u>		
	Federal credit <u>.00</u> x <u> </u> % =	26	<u>.00</u>
27	Farmland preservation credit.		
	a Schedule FC, line 17	27a	<u>.00</u>
	b Schedule FC-A, line 13	27b	<u>.00</u>
28	Repayment credit (see instructions)	28	<u>.00</u>

NOTE: You must use your 2021 earned income (see instructions).



Name(s) shown on Form 1 JOE SALINTHONE		Your social security number 616968743	
NO COMMAS; NO CENTS			
29	Homestead credit. Enclose Schedule H or H-EZ	29	.00
30	Eligible veterans and surviving spouses property tax credit	30	.00
31	Refundable credits from Schedule CR, line 40. Enclose Schedule CR	31	.00
32	AMENDED RETURN ONLY – Amounts previously paid (see instructions)	32	.00
33	Add lines 24 through 32	33	2191 .00
34	AMENDED RETURN ONLY – Amounts previously refunded (see inst.)	34	.00
35	Subtract line 34 from line 33	35	2191 .00
36	If line 35 is larger than line 23, subtract line 23 from line 35. This is the AMOUNT YOU OVERPAID	36	297 .00
37	Amount of line 36 you want REFUNDED TO YOU	37	297 .00
38	Amount of line 36 you want APPLIED TO YOUR 2022 ESTIMATED TAX	38	.00
39a	If line 35 is smaller than line 23, subtract line 35 from line 23. This is the AMOUNT YOU OWE . Paper clip payment to front of return	39a	.00
39b	Interest (see instructions)	39b	.00
40	Underpayment interest. Fill in exception code – See Sch. U Also include on line 39a (see instructions)	40	.00

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

Designee's name ▶	Phone no. ▶	Personal identification number (PIN) ▶
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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	Date	Daytime Phone	Wisconsin Identity Protection PIN (7 characters)
JOE SALINTHONE	02/28/22	530-966-4933	
Spouse's signature (if filing jointly, BOTH must sign)	Date	Daytime Phone	Wisconsin Identity Protection PIN (7 characters)

I-010ai

Mail your return to: Wisconsin Department of Revenue

If tax due PO 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



NO COMMAS; NO CENTS**Schedule 1 – Itemized Deduction Credit (see instructions)**

1	Medical and dental expenses from federal Schedule A (Form 1040). See instructions for exceptions	1	.00
2	Interest paid from federal Schedule A (Form 1040). 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	.00
3	Gifts to charity from federal Schedule A (Form 1040). See instructions for exceptions	3	.00
4	Casualty losses from federal Schedule A (Form 1040)	4	.00
5	Add lines 1 through 4.	5	.00
6	Fill in your standard deduction from line 6 on page 1 of Form 1	6	.00
7	Subtract line 6 from line 5. If line 6 is more than line 5, fill in 0	7	.00
8	Rate of credit is .05 (5%)	8	x .05
9	Multiply line 7 by line 8. Fill in here and on line 11 on page 2 of Form 1	9	.00

▶ **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 instructions)

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 .00	.00
2 Net profit or (loss) from self-employment from federal Schedules C, C-EZ, and F (Form 1040), Schedule K-1 (Form 1065), and any other taxable self-employment or earned income	2 .00	.00
3 Combine lines 1 and 2. This is earned income	3 .00	.00
4 Add the amounts from federal Schedule 1 (Form 1040), lines 12, 16, 20, 24e, 24f, and 24g, and any Wisconsin disability income exclusion. Fill in the total of these adjustments that apply to you or your spouse's income	4 .00	.00
5 Subtract line 4 from line 3. This is qualified earned income. If less than zero, fill in 0.	5 .00	.00
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	.00
7 Rate of credit is .03 (3%).	7	x .03
8 Multiply line 6 by line 7. Fill in here and on line 14 on page 2 of Form 1	8	.00

Do not fill in
more than \$480.