

1998

Combined Wisconsin Individual Income Tax Return for Nonresident Directors of Corporations

Form 1CND

Due Date: April 15, 1999

Form with fields: Corporation Name, Federal Employer ID Number, Wisconsin Employer ID (Withholding) Number, Number and Street, City, State, Zip Code, Person to Contact Regarding This Return, Telephone Number, Fax Number.

Instructions:

Complete this form on behalf of the qualifying and participating nonresident directors of a corporation that does business in Wisconsin. All requirements stated in the instructions to this form must be met in order to file a combined individual income tax return.

Schedule 1 Tax Computation

Table with 10 rows for tax computation: 1 Wisconsin directors' fees, 2 Tax from Schedule 2, column F, 3 Alternative minimum tax, 4 Temporary recycling surcharge, 5 Total tax, 6 Estimated tax payments, 7-8 Tax due/overpayment, 9-10 Applied/refunded amount.

SIGNATURES section with declaration text and fields for Signature of Authorized Officer, Title, Date, Individual or Firm Signature of Preparer, Preparer's Address, Date.

MAILING section with instructions: Attach a copy of any application for an extension of time to file the return. Make check payable to and mail return to: Wisconsin Department of Revenue, P.O. Box 8912, Madison, WI 53708-8912.

