Who Must File - Only corporations that do not have a federal extension need to fill in Part I, items 1 through 8.

Any extension of time allowed for filing a federal return automatically extends the time for filing the corresponding Wisconsin return to 30 days after the federal due date provided you include a copy of the federal extension Form 7004 as the last page of your return at the time of filing.

When to File – Submit this application on or before the original due date of your tax return.

Part I Application for Wisconsin Extension						
1	Print or type the corporation's name and address:		Enter ORIGINAL (unextended) due date of your federal return:			
		6	Check if applicable: initial return change in accounting period final return capital stock acquisition			
		7	Will corporation file a consolidated federal return? yes no			
		1	If yes, enter parent's original due date			
2	Enter the named corporation's federal employer identification number:		Enter parent's federal employer identification number below:			
3	An extension of time is requested in which to file the corporation franchise					
	or income tax return of the named corporation for the: calendar year 2005. taxable year beginning, and		Signature of authorized officer or representative Date			
	ending		MAIL THIS APPLICATION TO:			
4	Indicate which federal form will be filed:	Wisconsin Department of Revenue P.O. Box 8908 Madison, WI 53708-8908				
	990-C 1120 (cooperative) Other					
	990-T 1120-IC-DISC					
	1120 1120-FSC					

You must attach a copy of this application as the last page of your return when you file.

Part II **Wisconsin Corporation Estimated Tax Payment**

An extension of time to file does not extend the time to pay tax and recycling surcharge. To make an estimated tax and surcharge payment, use the preprinted voucher previously sent to you or detach and submit the voucher below.

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4-ES		n Corporation Estimated Tax Voucher his form only if your taxable year begins in 2005		Make check payable to and mail to: Wisconsin Department of Revenue Box 93194 Milwaukee, WI 53293-0194		
Person to Contact Regarding Payment		Telephone Number This estimated tax payr		nt is for:		
		Federal Employer ID Number	Fiscal year beginning	, 2005		
Corporation Name	oration Name			and ending, 20,		
Number and Street			 of the taxable year and, for corporations receiving extensions, by the 15th day of the 3rd month after the end of the taxable year. Amount of Payment 			
City	State	ZIP Code	\$			

Please do not staple your payment to this voucher