

Registration Verification

Wisconsin Department of Revenue
Nexus Unit 2-233
PO Box 8906
Madison WI 53708-8906
Phone: (608) 266-3969
FAX: (608) 266-5464
website: revenue.wi.gov

Complete this form to document your business's Wisconsin tax status. If you do not verify that your business and its affiliates are registered for Wisconsin sales or use tax or that all sales are exempt, Wisconsin state agencies and authorities may not purchase products or services from the business or affiliates.

A. Identification

Case ID: ____ - ____ - ____ - ____

| | | | |
|---|-----------------------------------|---------------------|-----------|
| Legal name (sole proprietors enter your last name, first, MI) | | Business name (DBA) | |
| Mailing address | | City | State Zip |
| Federal Employer Identification Number (FEIN) | SSN required for sole proprietors | Website address | |

Sole Proprietorship

Corporation → C corp
 S corp
 QSub

Date of incorporation _____ → State of incorporation _____
(mm dd yyyy)

| | |
|---------------------|--|
| Legal name of owner | Owner SSN or, if owner is a business, enter FEIN |
|---------------------|--|

Partnership → General Limited (LP)

Limited Liability Partnership (LLP)
 Limited Liability Company (LLC)

Date registered _____ → State of registration _____
(mm dd yyyy)

→ LLC classification for federal income tax →

C Corporation S Corporation Partnership
 Disregarded entity (LLC activity reported on owner's income tax return). Enter owner below.

| | |
|---------------------|--|
| Legal name of owner | Owner SSN or, if owner is a business, enter FEIN |
|---------------------|--|

Other (e.g., Governmental unit, nonprofit organization) _____

If your income year does not end on December 31st, enter the date your fiscal year ends _____
(mm - dd)

B. Current Wisconsin Registration Status (check appropriate box)

- Currently registered to collect and remit Wisconsin sales and use tax. Enter Wisconsin sales and use tax account number. _____ - _____ - _____
- Registering to collect and remit Wisconsin sales and use tax. Register online at tap.revenue.wi.gov/btr and enter your Business Tax Registration confirmation number. _____ - _____ - _____
- All sales of products and services in Wisconsin are exempt. Complete and attach Affidavit of Exempt Sales (Form A-006).
- We are not eligible to submit an Affidavit of Exempt Sales and decline to register to collect and remit Wisconsin sales and use tax. (Note: Wisconsin state agencies and authorities may not purchase products or services from your company).

Affiliate Information

Do you have affiliates* selling products or services in Wisconsin? Yes No
 If Yes, complete and attach Affiliate Registration Verification (Form A-002).

*"Affiliate" means a person or business that controls, is controlled by, or is under common control with another person or business. "Control" means to own, directly or indirectly, more than 10% of the interest in, or voting securities of, a business.

C. Wisconsin Business Activity

1. Describe all products sold, rented or leased to Wisconsin customers.

2. Describe all services sold or provided to Wisconsin customers.

3. Do you sell products or services in Wisconsin to customers that are not governmental units? Yes No

4. Are all of your sales in Wisconsin exempt from sales and use tax? Yes No

Why are all sales exempt? (*check all that apply*)

- Sales to governmental units
- Sales for resale
- Sales are not taxable. Exemption certificates provided by customers or nontaxable services
- Other (*describe*)

5. Do salespersons or representatives visit Wisconsin for any business purpose? Yes No
If yes, explain?

6. Do you license software or intangible assets, such as trademarks, customer lists, etc., in Wisconsin? . . Yes No

7. Do you provide services outside Wisconsin for which the benefits are received in Wisconsin? Yes No

8. What year did you start selling products/services to Wisconsin customers? _____

I certify that, to the best of my knowledge, the above information is accurate and complete.

Completed by (*type or print*)

Title

Signature

Date

()

Telephone number

Email address