## Wisconsin Corporation Franchise or Income Tax Return

**2007** 

For	2007 or taxable year beginning M M D D D Y Y Y A A	nd ending	$\overline{M} \overline{M} \overline{D} \overline{D} \overline{V} \overline{V} \overline{V} \overline{V} \overline{V}$		
Со	mplete form using BLACK INK.				month following close of taxable year.
Coi	poration Name			A Fede	eral Employer ID Number
Nui	mber and Street			<b>B</b> Busi	ness Activity (NAICS) Code
City		State	ZIP (+ 4 digit suffix if known)		e of Incorporation and Year Enter abbreviation of state
D (	Check ✓ if applicable and attach explanation:			-	in box, or if a foreign
1,	, First return - new corporation or entering Wisconsin 3, Sh	ort period	- change in accounting period		country, enter below.
2	Final return - corporation dissolved or withdrew 4 Sh	ort period	- stock purchase or sale		
Che	ck ✓ if applicable and see instructions:			_	
E	If this is an amended return, attach an explanation of the changes.				
F∟	☐ If you have an extension of time to file, enter the extended due date		$\frac{D}{D} \frac{D}{D} \frac{A}{A} \frac{A}{A} \frac{A}{A} \frac{A}{A}$		
G _		attach a co	omplete copy of your federal retur		
-	ENTER NEGATIVE NUMBERS LIKE THIS → -1		-		NO COMMAS; NO CENTS
_	Federal taxable income from Form 1120, line 28				
2	, ,				
<b>3</b>	Add lines 1 and 2				
4	Subtractions (from Schedule W, line 13)			_	.00
5	Subtract line 4 from line 3. This is net income (loss) be	efore ne	t business loss offset	5	
6	Wisconsin net business loss carryforward (from Form	4BL, line	e 30) but not more than lin		<u>.00</u>
7	Subtract line 6 from line 5. This is Wisconsin net incor	me (loss	)	7	
8	Enter 7.9% (0.079) of Wisconsin net income on line 7.	. This is	gross tax	Ε	.00
9	Nonrefundable credits (from Schedule C1, line 23)				.00
10	Subtract line 9 from line 8. If line 9 is more than line 8,	, enter z	ero (0). This is net tax	10	.00
11	Recycling surcharge (see instructions)			11	00
12	Endangered resources donation (decreases refund or	increas	es amount owed)	12	200
13	Veterans trust fund donation (decreases refund or incl	reases a	amount owed) 🖤 🗸	<b>TS</b> 13	<u>.00</u>
14	Add lines 10 through 13			14	1
15	Estimated tax payments less refund from Form 4466V If this is an amended return, see instructions			<u>.00</u>	
16	Wisconsin tax withheld	16		<b>.</b> 00	
17	Refundable credits (from Schedule C2, line 5)	17		<b>.</b> 00	
18	Add lines 15 through 17			18	.00
19	Interest, penalty, and late fee due (from Form 4U, line If you annualized income on Form 4U, check box	17 or 20	6). <b>&gt;</b>	19	.00
20	Tax due. If the total of lines 14 and 19 is larger than li	ne 18, e	nter amount owed	20	.00
21	Overpayment. If line 18 is larger than the total of lines	s 14 and	19, enter amount overpai	d . <b>2</b> 1	00
22	Enter amount of line 21 you want credited on 2008 estimated tax	x . <b>22</b>		<u>.00</u>	
23	Subtract line 22 from line 21. This is your refund			23	.00
24	1 7 0 1		•		_
25	Enter total company assets from federal Form 1120			25	

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Scl	nedule C1 - Nonrefundable Credits (See instructions, page 12)		
1	Manufacturer's sales tax credit carryforward (Sch. MS, line 5)	1	
2	Dairy and livestock farm investment credit (Sch. DI, line 9)	2	
3	Research expense credit (Sch. R, line 30)	3	
4	Research expense credit for activities related to internal combustion engines		
	(Sch. R-1, line 29)	4	
5	Research expense credit for activities related to certain energy efficient products (Sch. R-2, line 29)	5	.00
6	Development zones research credit carryforward	6	<b>.</b> 00
7	Research facilities credit (Sch. R, line 34)	7	.00
8	Research facilities credit for activities related to internal combustion engines (Sch. R-1, line 33)	8	.00
9	Research facilities credit for activities related to certain energy efficient products (Sch. R-2, line 33)	9	
10	Community development finance credit	10	
11	Development zones jobs credit carryforward	11	
12	Development zones sales tax credit carryforward	12	
13	Development zones investment credit (Sch. DC, line 15)	13	
14	Development zones location credit carryforward	14	
15	Development zone capital investment credit (Sch. DC, line 23)	15	
16	Development zones day care credit carryforward	16	
17	Development zones environmental remediation credit carryforward	17	
18	Development zones credit (Sch. DC, line 7)	18	
19	Technology zone credit (Sch. TC, line 8)	19	
20	Early stage seed investment credit (Sch. VC, line 12)	20	
21	Supplement to federal historic rehabilitation tax credit (Sch. HR, line 7)	21	
22	Internet equipment credit (Sch. IE, line 3)	22	
23	Add lines 1 through 22 (enter on page 1, line 9)	23	
Scl	nedule C2 - Refundable Credits (See instructions, page 14)		
1	Farmland preservation credit (Sch. FC, line 18)	1	
2	Farmland tax relief credit (Sch. FT, line 6)	2	
3	Enterprise zone jobs credit (Sch. EC, line 16)	3	
4	Dairy manufacturing facility investment credit (Sch. DM, line 6)	4	
5	Add lines 1 through 4 (enter on page 1, line 17)	5	



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Additional Information Required					
1 Person to contact concerning this return:		Phone #:		_ Fax #:	
2 City and state where books and records an	re located for audit purpose	s:			
<b>3a</b> If you are the sole owner of any limited list schedule if necessary.	ability companies, enter the	names and federal EINs of	your solely o	owned LLCs below. Attach a	
Name of LLC			FEIN		
<b>3b</b> Did you include the income of the LLCs I	listed on line 3a in this retur	n? Yes No			
4 If you had transactions with related parties, on lines 4a through 4f below. Attach a scho				amount of such transactions	
4a Sales to related parties			\$		
4b Purchases from related parties			\$		
<b>4c</b> Management fees paid to related parties			\$		
4d Interest expense paid to related parties			\$		
<b>4e</b> Royalties paid to related parties			\$		
4f Interest income received from related part	ties	\$		<b>;</b>	
5 Did you purchase any taxable tangible persof a state sales or use tax?  Yes	No If yes, you owe Wise	consin use tax. See instruction	ons, page 6	, for how to report use tax.	
6 Did any adjustments made by the Internal R If yes, see General Instructions, page 5, at			•	· — —	
Under penalties of law, I declare that this retu		rue, correct, and complete to	the best of		
Signature of Officer	Title			Date	
Preparer's Signature	Preparer's Federal I	Employer ID Number		Date	

## Attach a copy of your federal return, even if no Wisconsin activity.

If you are not filing your return electronically, make your check payable to and mail your return to: Wisconsin Department of Revenue

Wisconsin Department of Revenue PO Box 8908 Madison, WI 53708-8908

