Form **5** *Wisconsin Corporation*
Franchise or Income Tax Return

2008

For 2008 or taxable year beginning ___ ___ ___ ___ ___ ___ ___ ___ and ending ___ ___ ___ ___ ___ ___ ___ ___ .
M M D D Y Y Y Y   M M D D Y Y Y Y

Complete form using BLACK INK.

Due Date: 15th day of 3rd month following close of taxable year.

Corporation Name

A Federal Employer ID Number

Number and Street

B Business Activity (NAICS) Code

City

State

ZIP (+ 4 digit suffix if known)

C State of Incorporation   and   Year

Enter abbreviation of state in box, or if a foreign country, enter below.

D Check ✓ if applicable and attach explanation:

1 ___ First return - new corporation or entering Wisconsin

2 ___ Final return - corporation dissolved or withdrew

3 ___ Short period - change in accounting period

4 ___ Short period - stock purchase or sale

Check ✓ 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 ___ ___ ___ ___ ___ ___ ___ ___ .
M M D D Y Y Y Y

G ___ If no business was transacted in Wisconsin during the taxable year, attach a complete copy of your federal return.

H ___ If you have related entity expenses and are required to file Schedule RT with this return.

I ___ If you filed a federal consolidated return, enter Parent Company's federal employer ID number . . . . _____ .

	ENTER NEGATIVE NUMBERS LIKE THIS → –1000 NOT LIKE THIS → (1000)		**NO COMMAS; NO CENTS**
1	Federal taxable income from Form 1120, line 28	**1**	.00
2	Additions (from Schedule V, line 12)	**2**	.00
3	Add lines 1 and 2	**3**	.00
4	Subtractions (from Schedule W, line 16)	**4**	.00
5	Subtract line 4 from line 3. This is net income (loss) before net business loss offset	**5**	.00
6	Wisconsin net business loss carryforward (from Form 4BL, line 30) but not more than line 5.	**6**	.00
7	Subtract line 6 from line 5. This is Wisconsin net income (loss) . . . . ▶	**7**	.00
8	Enter 7.9% (0.079) of Wisconsin net income on line 7. This is gross tax	**8**	.00
9	Nonrefundable credits (from Schedule CR, line 33)	**9**	.00
10	Subtract line 9 from line 8. If line 9 is more than line 8, enter zero (0). This is net tax	**10**	.00
11	Recycling surcharge (see instructions)	**11**	.00
12	Endangered resources donation (decreases refund or increases amount owed) . . . . 🦆	**12**	.00
13	Veterans trust fund donation (decreases refund or increases amount owed) . . . . . 🏴VETS .	**13**	.00
14	Add lines 10 through 13	**14**	.00

15	Estimated tax payments less refund from Form 4466W. If this is an amended return, see instructions	**15**	.00		
16	Wisconsin tax withheld	**16**	.00		
17	Refundable credits (from Schedule CR, line 37)	**17**	.00		

18	Add lines 15 through 17	**18**	.00
19	Interest, penalty, and late fee due (from Form 4U, line 17 or 26). If you annualized income on Form 4U, check the space after the arrow . . . . ▶ ___	**19**	.00
20	**Tax due.** If the total of lines 14 and 19 is larger than line 18, enter amount owed	**20**	.00
21	**Overpayment.** If line 18 is larger than the total of lines 14 and 19, enter amount overpaid . .	**21**	.00
22	Enter amount of line 21 you want credited on 2009 estimated tax . . . **22** _____ .00		
23	Subtract line 22 from line 21. **This is your refund**	**23**	.00

24 Enter total company gross receipts from all activities (see instructions). . . . . **24** _____ **.**00

25 Enter total company assets from federal Form 1120 . . . . **25** _____ **.**00

26 If the corporation paid, accrued, or incurred more than $100,000 of expenses to a related entity, the corporation must file Schedule RT with this return. **Under Wisconsin law, certain related entity expenses may not be allowable unless disclosed on Schedule RT on a timely filed return.** See instructions for details. On line 26, enter total related entity expenses disclosed on Schedule RT . . . . **26** _____ **.**00

27a If the corporation is the sole owner of any limited liability companies (LLCs), enter the names and FEINs of those LLCs below. Submit an additional schedule if necessary:

Name of LLC	FEIN

27b Did you include the income of the LLCs listed on line 27a on this return? ☐ Yes ☐ No

Additional Information Required

1 Person to contact concerning this return: _____ Phone #: _____ Fax #: _____

2 City and state where books and records are located for audit purposes: _____

3 Did you purchase any taxable tangible personal property or taxable services for storage, use, or consumption in Wisconsin without payment of a state sales or use tax? ☐ Yes ☐ No   If yes, you owe Wisconsin use tax. See instructions for how to report use tax.

4 Did any adjustments made by the Internal Revenue Service to your income for prior years become finalized during this year? ☐ Yes ☐ No
If yes, see instructions and indicate years adjusted: _____

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.

Signature of Officer ▶	Title	Date
Preparer's Signature ▶	Preparer's Federal Employer ID Number ▶	Date

You must file a copy of your federal return with Form 5, 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
PO Box 8908
Madison, WI 53708-8908