Schedule **Y**	**Wisconsin Subtraction Modification for Dividends**	**2010**
Wisconsin Department of Revenue	File with Wisconsin Form 4 or 5 *Read instructions before filling in this schedule*	

Corporation or Designated Agent Name	Federal Employer ID Number

Dividends Received

1a

Name of Payer Corporation	Date Acquired by Payee
	M M D D Y Y Y Y
Name of Payee Corporation	Payee's Ownership of Payer (check (√) one)
	⌐ > 70%
	⌐ > 50% but < or = 70%

1a _____ .00

1b

Name of Payer Corporation	Date Acquired by Payee
	M M D D Y Y Y Y
Name of Payee Corporation	Payee's Ownership of Payer (check (√) one)
	⌐ > 70%
	⌐ > 50% but < or = 70%

1b _____ .00

1c

Name of Payer Corporation	Date Acquired by Payee
	M M D D Y Y Y Y
Name of Payee Corporation	Payee's Ownership of Payer (check (√) one)
	⌐ > 70%
	⌐ > 50% but < or = 70%

1c _____ .00

1d

Name of Payer Corporation	Date Acquired by Payee
	M M D D Y Y Y Y
Name of Payee Corporation	Payee's Ownership of Payer (check (√) one)
	⌐ > 70%
	⌐ > 50% but < or = 70%

1d _____ .00

1e

Name of Payer Corporation	Date Acquired by Payee
	M M D D Y Y Y Y
Name of Payee Corporation	Payee's Ownership of Payer (check (√) one)
	⌐ > 70%
	⌐ > 50% but < or = 70%

1e _____ .00

1f

Name of Payer Corporation	Date Acquired by Payee
	M M D D Y Y Y Y
Name of Payee Corporation	Payee's Ownership of Payer (check (√) one)
	⌐ > 70%
	⌐ > 50% but < or = 70%

1f _____ .00

1g Add lines 1a through 1f . . . . **1g** _____ .00

1h Total of line 1g from additional Schedules Y (see instructions) . . . . **1h** _____ .00

2 Add lines 1g and 1h . . . . **2** _____ .00

3 Enter foreign taxes paid on dividends included on line 2 . . . . **3** _____ .00

4 Subtract line 3 from line 2. Enter this amount on Schedule W, line 1 . . . . **4** _____ .00

IC-025i