Form X-NOL

## Carryback of Wisconsin Net Operating Loss (NOL)

2	0	2	0
	V		V

\_\_\_ Check here if an estate or trust

Legal last name – Individual	Legal first name	M.I.	Social security number
	-		
If married, spouse's legal last name	Legal first name	M.I.	Spouse's social security number
Legal name – Estate/Trust		•	Estate's / Trust's federal EIN
Address (number and street)	City or post office	State	Zip code
a. If you filed a joint return (or separate return) for one, but not both, of the tax years involved in figuring the carryback,			

a.	If you filed a joint return (or separate return) for one, but not both, of the tax years involved in figuring the carryback,
	list the years and specify whether joint (J) or separate (S) return for each

b.	If SSN for carryback year is different from about		
	enter	Social Security Number	



Computation of Decrease in Tax	Column A 20 Before Carryback	20 <i>Column B</i> After Carryback
1 NOL deduction	.00	
2 Wisconsin income	.00	.00
3 Standard deduction	.00	.00
4 Subtract line 3 from line 2	.00	.00
5 Exemptions	.00	.00
6 Taxable income. Subtract line 5 from line 4 6	.00	.00
7 Tax 7	.00	.00
8 Nonrefundable credits	.00	.00
9 Subtract line 8 from line 7. If less than zero, fill in a 0 (zero). This is your net tax 9	.00	.00
10 Enter amount from line 9 of Column B on line 10 of Column A	.00	
11 Decrease in tax. Subtract line 10 from line 9. This is the amount of your refund	.00	

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. Your Signature

Spouse's Signature (If joint return)

here				
Third	Complete below to allow another person to discuss this return with the Wisconsin Department of Revenue.			
Party Designee	Designee's name (print)	Phone no. ▶ ( )	Personal identificatior number (PIN	

Date